



GIG  
CYMRU  
NHS  
WALES

Bwrdd Iechyd  
Addysgu Powys  
Powys Teaching  
Health Board

# New Directions

*Improving Healthcare Services for South East Powys*

## Public Consultation Document September 2012



**This consultation document relates to adult and older people's health services in South East Powys. For the purpose of this document South East Powys covers the areas served by the Haygarth, Brecon and Crickhowell medical practices.**

**September 2012**

# Contents

<b>5</b>	<b>Introduction from the Chairman and Chief Executive</b>
<b>9</b>	<b>Background To Our Plans</b>
9	Current Services
12	Why the need for change
13	How we developed our proposals
<b>15</b>	<b>Vision For Future Health Care Services</b>
15	The future changes we have been discussing
	Our plans for:
15	<i>GP supported care</i>
16	<i>Diagnostic and Treatment Centre</i>
17	<i>Outpatients</i>
17	<i>Day Surgery</i>
18	<i>Stroke Services</i>
22	<i>Access and Transport</i>
<b>23</b>	<b>Workforce, financial and other implications</b>
23	Workforce
23	Finance
24	Equality
25	Timescales for change
<b>27</b>	<b>Appendix 1: Frequently Asked Questions</b>
<b>30</b>	<b>Appendix 2: A Vision for NHS Wales</b>
<b>30</b>	<b>Appendix 3: Stakeholder Involvement</b>
<b>31</b>	<b>Appendix 4: Appraisal of Options for the Overall Service Model</b>
<b>33</b>	<b>Appendix 5: Glossary of Terms</b>



## Message from the Chairman and Chief Executive

Powys teaching Health Board (tHB) was established in 2009 to set a new direction for the delivery of health care services for people living in Powys. In February 2010, we started conversations in South East Powys about the future of adult and older people's health services.

### You have told us that:

- delivery of services locally is very important, demonstrated by the request that both Breconshire War Memorial Hospital and Bronllys hospitals should be retained.
- you would like to see services delivered in all communities;
- you recognise the financial challenges the health service faces.

We have listened to you, and as a result we are committed to building on and developing the services that are currently available and where possible extending those services. As with all services they will need to change and develop as the communities needs change. In the future they may need to be provided differently and the location of services within South East Powys may need to change but our overall goal is to provide more care within South East Powys.

In October 2011, we outlined our vision on future health care services in a discussion document 'New Directions for Healthcare Services for South East Powys'. This work was led by your local GPs and explained our joint vision to strengthen our community services, increase elective day case surgery and the number of outpatient clinics provided locally and finally to look at how we locate services across South East Powys.

Welsh Government guidance on Consultation and Engagement on Health Service Changes requires Powys teaching Health Board to continually engage its population on service change. Powys teaching Health Board has a duty to work with the Community Health Council (CHC) to agree if any of its future plans require a process of formal consultation and we have agreed that we need to seek your views on these plans.

Overall our plans demonstrate our commitment to do more in Powys for Powys residents. We have already done much work to achieve this for example the delivery of end of life care through a 'hospice at home' service. Other examples are listed later in this document.

In reading this document you will see that it is clear that we plan to extend the range of hospital services that we provide in Breconshire War Memorial Hospital and make the best use of the facilities we have there. Our preferred option for stroke services is to transfer the stroke unit currently provided at Bronllys Hospital to Breconshire War Memorial Hospital to enable us to provide the very best of stroke care. We are specifically required to consult

you on this proposed transfer, and we urge you to look closely at these plans and give us your views.

We are also proposing that, in time, the provision of GP care in communities will move to an integrated model with GP care being provided alongside social care both at home and within care homes. We are already moving towards this in Builth Wells and will be able to use the experience we gain there to move forward in South East Powys. The precise location of how this will be delivered in South East Powys is not yet clear. We therefore want to continue to hear your views on this plan.

It will also be clear to you that these changes have implications for the future of Bronllys Hospital. The hospital buildings have a limited life and we need to plan a future for the services, site and buildings. There are however a number of commitments that we have, and will continue to make, in respect of the future of Bronllys hospital:

- the Bronllys site remains an important administrative centre for the Health Board and an important source of local employment that we wish to retain
- the outpatient services provided on the site will remain but will in time require new accommodation – this could be on the site or as part of other developments within the Hay and Talgarth area
- there are a number of options for the development of care homes both on the Bronllys site and other sites in the Hay and Talgarth area and we will need to continue to look at our options as these progress
- the child and adolescent mental health services currently provided at Bronllys require upgraded accommodation and we will come forward with plans to achieve improvements for this service
- similarly the nature of mental health services are changing, and we will come forward with our plans for these services early next year.

Some of the choices and decisions that need to be taken will be difficult. We will be challenging people to look to the future to ensure that services in South East Powys can continue to be delivered for future generations. We have considered your comments and revisited our plans. We would now like to consult with you on our proposals to finally help shape how we deliver our proposals.

Mel Evans  
Chairman

Andrew Cottom  
Chief Executive

## Having your say

In setting out our plans for service change we want as many people as possible to comment on our proposals. You can have your say in a number of different ways:

- Attend one of our consultation events advertised locally and on our website.
- e-mail at: [Powys.Geninfo@wales.nhs.uk](mailto:Powys.Geninfo@wales.nhs.uk)
- Write to us at: South East Powys Consultation Document  
C/O Planning Department  
Powys teaching Health Board  
Mansion House  
Bronllys  
LD3 OLS
- Social media: Powys teaching Health Board now has a presence on both Twitter and Facebook and we encourage people to discuss this document through these. Follow us on

Twitter: [@PowystHB](https://twitter.com/PowystHB) or [www.facebook.com/PowystHB](http://www.facebook.com/PowystHB).

Alternatively, you are invited to send your comments to Brecknock & Radnor Community Health Council (CHC). The CHC is an independent body that:

- scrutinises and keeps under review the delivery and planning of local health services;
- represents the interest of patients and the public in the NHS;
- inspects and monitors service provision and the patient environment;
- provides an enquiries and complaints advocacy service;
- email CHC at: [breconchc@breconchc.org.uk](mailto:breconchc@breconchc.org.uk)
- write to CHC: Brecknock and Radnor CHC  
1st Floor, Neuadd Bryncheiniog  
Cambrian Way  
Brecon  
LD3 7HR

A series of questions are included as a pull out section of this document to assist you in making your response to us.

An easy to read version of the document is available on request.

Closing date for replies: Friday 30 November 2012

## What happens next?

All the feedback will be collated and analysed at the end of the consultation. Powys teaching Health Board will then consider what you have said, how this has influenced our proposals and the changes we plan to make, taking account of the results of the consultation. The final decision will be made in public by the Board once they have had time to consider the consultation feedback and responses.





## Background

In 2011, Powys teaching Health Board published its New Directions for Powys discussion document and began a dialogue with people throughout Powys. New Directions for Powys sets out a framework on how services across Powys will be delivered for future generations.

The document explains that we want to do more in Powys, not less. We know that public services in Powys, as is the case across the UK, are facing unprecedented challenges. Health services are required to constantly change and develop to reflect changes in clinical practice. After many years of growth in NHS funding, we must now all face the challenge of doing more with less. For Powys we believe that the solution to improving health care and protecting front line services is to provide more care in Powys, reduce the need to travel out of County for care, but also ensure that high quality specialist services are available to Powys residents when they need them. We also believe we can do more by bringing together health and social care in local communities. To deliver these improvements we also need to plan for improvements in the buildings from which services are provided. Our main aim is to deliver an integrated service at the point of delivery that is patient focused, safe and effective.

## Current Services

People in South East Powys receive their healthcare from one or more places which can be described as:

1. primary care services
2. community and community hospital services
3. specialised services (mostly provided out of county)

Primary care services are delivered by:

- three GP partnerships across seven sites
- seven dental practices
- five community pharmacies
- five local opticians

There are a wide range of community services provided across South East Powys by district nursing, community therapy and specialist nursing services. Since 2009 we have extended the range of community services that we provide to include:

- community nursing service extended into the early evening
- an expanded role for community nurses
- a 'hospice at home' service
- support in the home from reablement teams, jointly with Powys County Council; the team helps people to adapt to living their lives following periods of illness

- cardiac/heart failure nurses and specialist nurses in urinary tract disorders
- education programmes for people living with long term conditions such as diabetes and heart disease
- Care Transfer Coordinators who help to identify and transfer patients sooner from out of county hospitals back to Powys services
- a Care Coordination Centre which helps GPs to identify the right service for patients

Breconshire War Memorial Hospital and Bronllys Hospital are the two sites from which services are delivered. Most of our services are provided at one of these hospitals, with some provided in both.

### **Breconshire War Memorial provides the following services**

- GP led medical inpatient care supported by nursing and therapy teams
- Consultant led rehabilitation unit supported by nursing and therapy teams
- end of life care
- 24 hour, 7 day a week minor injury service
- out of hours GP service
- day case surgery provided by visiting consultants for example orthopaedics, general surgery and diagnostic endoscopy
- day hospital
- outpatient clinics provided by visiting consultants including
  - General Surgery
  - Urology
  - Haematology
  - Orthopaedic
  - Ears Nose and Throat (ENT)
  - Orthodontics and Oral Surgery
  - Gynaecology including colposcopy
  - Rheumatology
  - Ophthalmology
  - Cardiology
  - Age Care Medicine
  - General Medicine;
- nurse-led outpatients are provided for
  - Gynaecology
  - Urology

- General Surgery
- Cardiac rehabilitation
- Diabetes
- pre-operative assessment
- PSA (type of blood test)
- Lymphoedema
- Chronic obstructive pulmonary disease
- visual fields and biometrics
- Diabetic Retinopathy Screening
- outpatient therapies including physiotherapy, speech and language therapy, podiatry, dietetics, occupational therapy and audiology
- community dental services
- x-ray with digital links to Nevill Hall Hospital
- ultrasound and endoscopy services
- a range of services for children within the children's centre, older people's mental health services and the midwife led birthing centre are also provided from the site

### **Bronllys Hospital provides the following services:**

- shared GP & consultant medical inpatient care supported by nursing and therapy teams
- consultant led inpatient stroke rehabilitation supported by nursing and therapy teams
- end of life care
- day hospital
- consultant led outpatient clinic for age care medicine, movement disorders and early memory impairment disorders
- nurse led clinics are provided for
  - Parkinson's Disease
  - Urology
- outreach chemotherapy from Velindre Cancer Centre
- Diabetic Retinopathy Screening Service
- outpatient therapy services including physiotherapy, podiatry, dietetics and occupational therapy and a physiotherapy led falls programme.
- pain management, mental health services, older peoples mental health services and child and adolescent mental health services are also provided from the site.

The Bronllys site is also the base for approximately 200 staff providing headquarters and other support functions for Powys teaching Health Board, and some support services hosted on behalf of the NHS in Wales.

## Why the need for change?

As a Health Board we have a duty to ensure that we safely provide the best possible care for our population within the resources we have.

In 2011, the Welsh Government published its five year vision for health. This sees an NHS based around community services with patients at the centre and prevention, quality and transparency at its heart.

There are many new challenges we need to meet, but also many opportunities to provide healthcare in new and better ways:

- we are living longer and our health needs are changing resulting in an ever rising demand for health care;
- many patients with long term conditions including heart disease, stroke, diabetes and asthma can be treated safely in the community, preventing unnecessary trips to hospital if the right services are on hand;
- Powys is not able to provide specialised inpatient services such as those required for cancer, acute stroke and heart disease. We can however safely provide elements of these services locally such as day surgery, chemotherapy and rehabilitation, building on what Powys services do well and exploiting the opportunities afforded by new technologies;
- developments in diagnostics and treatment mean that we can do far more to look after patients at home and in the community. This reflects what people have said they want, and provides better outcomes;
- advances in technology mean that when people go into hospital, it is usually for a far shorter period of time than would have been the case in the past;
- promotion of good health as well as treating illness, helps to keep people out of hospital which means doing more around advice and education;
- we are expecting to continue to experience a difficult financial and economic climate for some time to come which means we need to continue to focus on efficiency and effective services.

Against this background, continuing to run two hospital sites in South East Powys will become increasingly challenging for quality, safety, staffing and efficiency reasons. The condition and layout of Bronllys Hospital in particular means that the buildings currently used for health care have a limited working life. Considerable

### Population of Powys

- **Powys has an estimated population of 133,000 (census 2011); the proportion of people aged 75 and over has increased from 9.7% in 2001 to 10.5% in 2011.**
- **23% of the population in South East Powys are aged 65 and over**

investment will be required to maintain both hospital buildings, and running two sites has become increasingly expensive. The Health Board needs to have a clear plan for how the buildings will support service delivery in the long term. Health care should not be about bricks and mortar but about services. We must not judge the quality of care by the number of buildings that we have. We know from the work that we have carried out that there is capacity within Breconshire War Memorial hospital to provide more services than at present.

Many of the factors which have led to this plan for local health services are similar to those faced elsewhere in the country. By not dealing with these challenges, we will be putting the future sustainability of services at risk. We need to respond to these challenges in a planned way, to get the best outcomes for our patients.

## How we developed our proposals?

In February 2010, Powys teaching Health Board began a dialogue with local community representatives, staff, and interested organisations from the South East Powys area. Through a series of workshops, Powys teaching Health Board worked with these stakeholders to consider the future model of health care services for the population of South East Powys.

During 2011 we also held a series of drop-in sessions across South East Powys to discuss the New Directions Plan. In 2012 we again held drop-in sessions in South East Powys to engage local people in dialogue around the plans for local services developed by GPs with the Health Board.

### ***This is what you told us you need:***

- where appropriate, people should be cared for in their own home with appropriate care and support, or as close to their home as possible;
- timely and speedy access to diagnostics and treatment;
- improved management of long-term health conditions, such as asthma and diabetes, and more services to prevent ill health including supportive technology that helps people to be cared for at home;
- better discharge processes in place;
- closer working between those providing health and social care to avoid duplication;
- improvements to make access to services as easy as possible;
- education and information to empower service users and their carers to be able to manage their care themselves;
- local access to these services, rather than all services provided from a single site.

## Options for location of services in South East Powys

Local community representatives and Powys teaching Health Board developed a list of options (Appendix 4) to describe how we could locate services in South East Powys. The main options from this that were considered were to:

### ***Option 1: Continue to provide services in current facilities***

This option would see services continue to be provided within the existing facilities at Bronllys Hospital and Breconshire War Memorial Hospital.

### ***Option 2: Develop a combination of a "Rural Hospital" and a "Health and Social Care Centre"***

This option would provide a community hospital facility that would provide an enhanced range of hospital based services for example minor injuries, consultant outpatients, diagnostics, day surgery, stroke rehabilitation services, community dentists. The option includes provision of GP managed care for example short stay care, palliative care, respite care provided alongside residential and nursing care within a separate health and social care centre.

### ***Option 3: A combination of a "Rural Hospital" and an "Enhanced Health and Social Care Centre"***

This option would be similar to the option above, with the health and social care centre providing additional services for example nurse and therapy led outpatient clinics diagnostic support, day services and health and well-being activities.

### ***Option 4: A single facility providing all services***

This option would provide all health services on one site.

The plans in this document are based around delivering option 3. From the engagement exercise it is clear that local people wish to see services continue to be provided across South East Powys and this option is most able to do this.

## Vision for Healthcare Services in South East Powys

The 'Vision for Healthcare Services in South East Powys' aims to:-

- strengthen the services we provide in the community by bringing together a range of health care workers and others to help people remain in their own homes for as long as possible;
- reduce the number of occasions people need to travel outside of Powys, by providing a greater range of outpatient, day surgery and diagnostic services in Powys;
- distribute services in the South East Powys area to ensure people have access to services close to where they live.

To achieve this we plan to:

- continue to extend the range of services provided in the community and at home
- develop Breconshire War Memorial Hospital as the Rural Hospital and make best use of the facilities and services already available at this hospital
- transfer the stroke rehabilitation service currently provided at Bronllys Hospital to Breconshire War Memorial Hospital to enable continued improvement and development of a more integrated service
- continue to provide the services at Bronllys Hospital while seeking an alternative facility within the Hay and Talgarth area from which to provide these services

## The future changes that we have been discussing

### ***Our plans to retain GP supported care***

GPs support patients in the patient's home, within the local community hospitals in Bronllys and Brecon and in residential and nursing homes.

We intend to continue providing GP supported care in Powys but to be able to do this we need to work with social care to deliver healthcare together with social care in the future.

Continued development and investment in community services will mean a continued move away from a reliance on hospital based care. The shift to care available in the community does not mean that we will stop providing inpatient care in the future.

We propose that in the future access to short stay GP supported care for people who are not ready to be cared for at home will be provided alongside residential and nursing home care. By bringing together health and social care together in this way, we

will be able to provide a service that will respond to individual needs more quickly and flexibly.

We propose that access to short stay GP supported care currently provided at Bronllys Hospital will be provided differently in the future. The options we are looking at include:

- new nursing homes are proposed in both the Hay-on-Wye and Talgarth areas: as these plans develop we will look to see if they provide the right environment for the new service we wish to deliver
- we will explore the possibilities of developing a care home facility on the Bronllys hospital site
- we will look at the feasibility of developing our plans within the existing care home facility in Hay-on-Wye

For the rest of South East Powys:

- we will look at options to provide GP supported care in Crickhowell and its surrounding areas.
- short stay GP supported care will continue to be available from Breconshire War Memorial Hospital.

### ***Our Plans to Extend Diagnostic and Treatment Services at Brecon Hospital***

Patients in South East Powys already access a range of diagnostic services at Breconshire War Memorial Hospital for example, routine x-rays and ultrasound scans. In addition, a 24/7 Minor Injury Unit is available at Breconshire War Memorial Hospital.

We plan to enhance the existing range of diagnostic and treatment we currently provide in Brecon to enable GPs to assess and manage a greater number of medical patients in Powys, rather than transfer them to Nevill Hall or Hereford for assessment. In doing this, we intend to:-

- improve access to diagnostic services for all residents of South East Powys, reducing the amount of travel required for many people;
- provide quicker results which aids a quicker diagnosis and improves clinical decision making;
- provide safer new opportunities to care for people where appropriate closer to their home;
- reduce the number of journeys out of Powys for diagnostic tests which can be provided locally for example
  - routine and urgent x-rays
  - routine and urgent scanning
  - diagnostic assessments such as endoscopy
  - screening services



- other opportunities to extend diagnostics services; an example of this is 'near patient testing' which is a procedure that is carried out to analyse blood results locally.

In the future we will refer to this as a Diagnostic and Treatment Centre which will be led by local GPs.

We have already enhanced the minor injuries service currently based at Breconshire War Memorial Hospital by working with Aneurin Bevan Health Board to support the team at Brecon. We are also investing in further training for staff to help continually improve the service into the future.

### ***Our plans to increase outpatients***

We plan to increase the number of patients who have their outpatient appointments locally. Currently we are looking at dermatology, ophthalmology and orthopaedics and we will continually explore opportunities to reduce travel for patients. We are also investing in internet technology to enable appointments with out of county services to be undertaken within Powys.

We plan that all specialist Consultant outpatient clinics will continue to be provided from Breconshire War Memorial Hospital to ensure access to the x-ray and diagnostic facilities at this hospital that is required for many of these clinics.

Other therapy and nurse-led clinics will be provided in suites designed to deliver flexible services to rural communities. These will be in GP Practices at Haygarth, Crickhowell and Brecon, at Breconshire War Memorial Hospital and other locations such as the health and social care centre. In the meantime we will continue to provide these services from their current location in Breconshire War Memorial Hospital and Bronllys Hospital.

### ***Our Plans to Increase Day Surgery***

We already have a very successful day theatre operating from Breconshire War Memorial Hospital that has capacity to do much more.

We plan to increase the number of people who have their day surgery at Breconshire War Memorial Hospital. By achieving this we will reduce the number of journeys people need to make outside of Powys. We have already introduced a new podiatric surgery service. In addition, we will work in partnership with our neighbouring health organisations to increase other specialities taking place in South East Powys including:-

- more cataract operations;
- more daycase orthopaedic procedures such as arthroscopies.

Work to replace the current ventilation system at Breconshire War Memorial Hospital at a cost of £0.5 million is due to commence during the Autumn of 2012 to help achieve this.

## Our Plans to Improve Stroke Services

When people first suffer a stroke, evidence shows that they do better if they are taken to a specialist centre which provides clot-busting drug therapy (thrombolysis) within the first three hours. For Powys residents this must be provided in a major hospital. You have told us that you are happy to travel to specialised units out of County as they provide the best outcome, but would want to come back to Powys as soon as possible for your rehabilitation and after care support.

Following a stroke, and after an initial period of rehabilitation, a proportion of patients may need continuing specialist inpatient rehabilitation. Guidance for stroke care recommends that this should:

- be provided in a discrete area in a hospital;
- be staffed by a specialist stroke multidisciplinary team;
- enable access to equipment for monitoring and rehabilitating patients;
- have regular multidisciplinary meetings;

Consultant led stroke rehabilitation care is currently provided within the general medical ward in Bronllys Hospital. The service serves patients from South East Powys and Mid Powys. Patients who have completed their stroke programme in the unit will be discharged home or to a more local community hospital.

Between April 2010 and March 2012, 91 people received care in the unit and the diagram below shows the numbers registered with each GP practice in the area.

### Stroke services

Stroke is one of the top three causes of death in Wales. An estimated 10,000 to 11,000 people in Wales suffer a stroke each year. We know that the effects of stroke can have a devastating and lasting impact on the lives of people and their families. A third of people who have a stroke are left with long-term disability. The effects can include physical disability, loss of cognitive and communication skills, depression and other mental health problems.

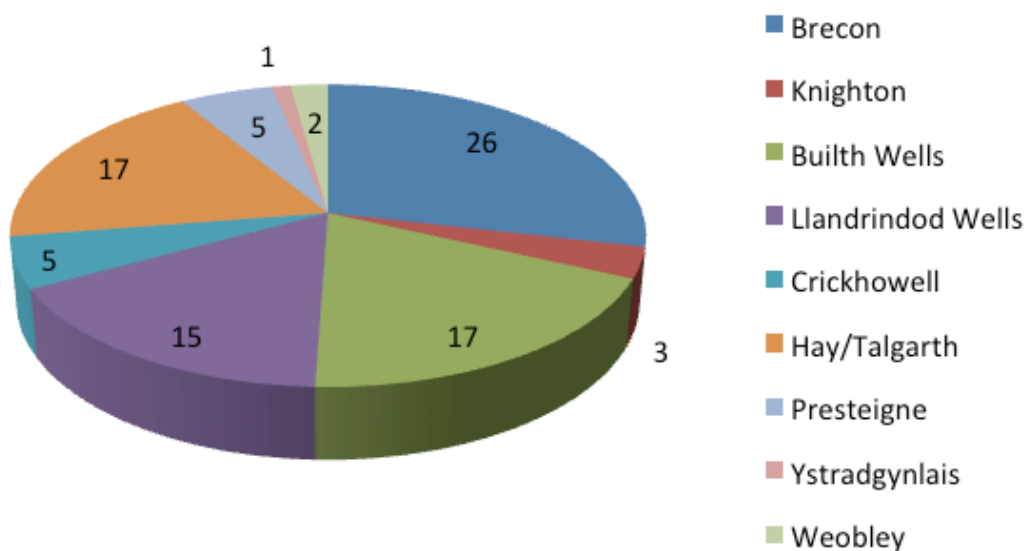


Figure 1: Numbers of stroke patients by GP practice using the Bronllys stroke unit between April 2010 and March 2012.

# New Directions

## *Improving Healthcare Services for South East Powys*

### **Consultation Document Feedback Form**

This is a pull out section.

If you wish to submit comments on this document, please complete this section, pull-out and return to Powys teaching Health Board (address on back).

We are looking for your views on these plans and the following questions are designed to help you with make your views known to us. If you would like more details on the proposals join us at one of our consultation events:

**1. What do you think about our overall proposals for services in South East Powys?**

Strongly support  Support  Neutral  Against  Strongly against

Is there anything in our proposals that you think we need to consider further or differently?

**2. What do you think about our preferred option of transferring stroke rehabilitation services to Breconshire War Memorial Hospital?**

Strongly support  Support  Neutral  Against  Strongly against

What if anything are your concerns about our proposals to transfer stroke rehabilitation services to Breconshire War Memorial Hospital?

**3. What do you think about our plans to strengthen community services in South East Powys?**

Strongly support  Support  Neutral  Against  Strongly against

Is there anything in our proposals for community services that you think we need to consider further or differently?

**4. What do you think about our plans to explore alternative ways to deliver GP supported care?**

Strongly support  Support  Neutral  Against  Strongly against

What are your views on the options that we are exploring?

**5. What do you think about our plans to increase outpatients and day case surgery at Breconshire War Memorial Hospital?**

Strongly support  Support  Neutral  Against  Strongly against

Is there anything in our proposals for outpatients and day case surgery that you think we need to consider further or differently?

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Post code: \_\_\_\_\_

Email: \_\_\_\_\_

Powys teaching Health Board intends to publish a summary of the responses to this document. Normally, the name and address (or part of the address) of its author are published along with the response, as this gives credibility to the consultation exercise. If you do not wish to be identified as the author of your response, please tick here.

Please return this questionnaire to:

Planning Department

Powys teaching Health Board

Mansion House

Bronllys Hospital

Bronllys

Powys

LD3 0LS

## Options for stroke services

In considering future provision of intensive stroke rehabilitation care for the population of South East and Mid Powys, the following options were considered:

- Option 1** Do nothing, stroke rehabilitation services remain on existing site
- Option 2** Relocate stroke rehabilitation services to Breconshire War Memorial Hospital
- Option 3** Relocate stroke rehabilitation services to the new Health and Social Care Centre currently under construction at Builth Wells
- Option 4** All services are provided Out of County - no intensive stroke rehabilitation is provided in South East Powys. Patients receive both acute and rehabilitation phases of their stroke care in a neighbouring District General Hospital
- Option 5** A new build to accommodate stroke rehabilitation services in South East Powys
- Option 6** All stroke rehabilitation is provided in the community – no inpatient stroke rehabilitation care is provided in South East Powys
- Option 7** Stroke rehabilitation services are provided on more than one site: this could also include Ystradgynlais or Llandrindod Wells

We have considered each of these options by testing them against the criteria set out in the table over the page.

<b>Criteria</b>	<b>Sub Criteria</b>
Delivers against national and local strategy and guidance	Compliance with national standards for stroke care provision Consistent with Powys tHB Strategic Direction /South East Powys future Vision
Quality & Safety	Continuous improvements in: Clinical efficiency /Best use of clinical resources Clinical outcomes & patient experience Rehabilitating patients in an appropriate environment (*in line with national guidance) Compliance with latest clinical standards Clinical pathways/timely transfer of care Quality and safety Appropriate intensity/sustainability/consistency to provide intensity of rehabilitation
Equity of access	Reasonable access for rural populations (public transport/parking/disabled access)
Functional suitability	Provides environments suitable for delivery of care; clinical adjacencies with other relevant services
Acceptability	Acceptable to service users, carers, relatives and other significant partners
Ease of implementation	Least disruptive to patients, clinicians, staff
Workforce	Provides an environment which supports the recruitment/retention of staff; supports appropriate clinical staffing arrangements (e.g. on-call, reduced travel etc)



We rejected Options 3, 5 & 6 at the initial stage of consideration, as they:

- do not meet the needs of the local population, and do not have support of the clinical staff in the health board
- do not offer high quality safe and sustainable patient services;
- restrict accessibility to some parts of the population;
- are not achievable within current financial climate.

**Our preferred option for the future of stroke services is option 2; to transfer them to Breconshire War Memorial Hospital.** The key reasons for this are that the hospital is more able to meet the required clinical standards and:

- will improve patient safety and quality; maintaining and building on national standards;
- will provide care in newly refurbished single occupancy accommodation with en-suite facilities; providing improved physical space around the bed which will result in improving dignity for patients and is conducive to intensive rehabilitation.
- provides access to a wider range of professional advice and services that will enhance the integrated stroke rehabilitation service;
- will help to retain and recruit staff and develop clinical expertise;
- is affordable now and will continue to be so in future years
- has better transport links;
- will improve disabled access;
- it was acknowledged that some patients and relatives would need to travel further than currently, however this was outweighed by the clinical benefits the hospital is able to offer

### **Specialist stroke teams**

**The transfer of stroke rehabilitation services to Breconshire War Memorial Hospital would improve access to additional support on site including the Minor Injuries Unit nurses, the GP out of hours base, barium swallow and X-ray**

**The move would also improve access to visiting consultants if required.**

**We want to hear your views on our preferred option to transfer this service to Breconshire War Memorial Hospital.**

## ***Our Plans to Improve Access and Transport***

You have told us that transport to enable access to services is a key concern. People accept that quality and results are the most important considerations for them, and that they are willing to travel if required for specialist care. However they have made it clear that there need to be arrangements in place to improve access and transport.

At the heart of these proposals is the need to ensure the best possible access to services. Our aim is for care to be provided in patients' homes, or close to their home through community clinics, or through their GPs in their surgery or other community setting. We also aim to bring more services back to Powys.

We therefore recognise the need to develop a local transport plan which will include:

- a review of our community transport and non emergency transport arrangements;
- working with our County Council colleagues to improve integration of planning for local bus services with health service delivery
- parking arrangements for all of our facilities, with a specific parking plan introduced to address parking for patients at Breconshire War Memorial Hospital
- rapid access to acute services in an emergency

We will continue to work with the voluntary sector, public transport providers, Powys Council and the Welsh Ambulance Service NHS Trust to consider how we best improve access to services through improved transport.

# Workforce, Financial And Other Implications

## Workforce

Clinical staff working in Powys have been actively involved in the development of these proposals. They believe that the proposals outlined in this consultation document represent not only a new direction but also a new beginning for the provision of robust, sustainable and local health service provision.

The workforce within Powys is our biggest asset, and we will continue to need a flexible and motivated workforce that are able to take on the challenges of providing more care in Powys. These plans therefore provide a number of opportunities for staff across clinical and support roles as we will need them to develop and adapt to meeting the requirements of doing more in Powys.

We are actively planning our clinical workforce within Powys to enable them to support and deliver service change in the future. Similarly our support staff based at Bronllys will continue to be needed to be ever more flexible to support the safe and efficient delivery of services.

## Finance

Rising demands, pressures from an increased ageing population, new treatments and the current economic climate will continue to put pressure on our services and the associated costs of those services. In the present economic climate we do not anticipate that the health board will receive any significant growth in funding for the foreseeable future.

As a result, we must develop new ways of delivering better results and a high quality of care within our existing resources. The proposals that we have set out are designed to better use the available money for patient care, providing more care locally in the most cost-effective way.

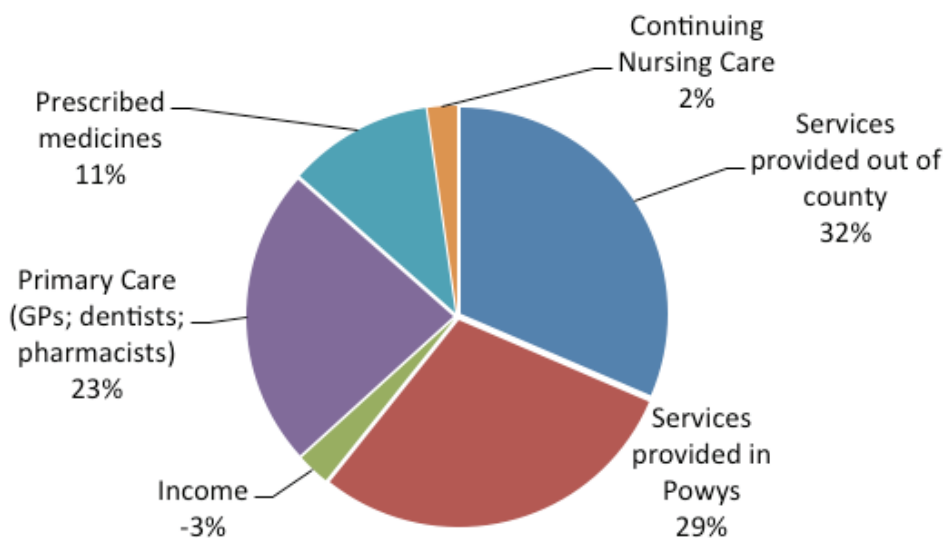
In 2012-13 the budget for adult services in South Powys (including Ystradgynlais) was a total of £53.1 million.

The diagram on the next page shows how this money is currently spent, split between the funding that goes to primary care services, GP prescribing, services provided directly by Powys tHB and services paid for out of county. Our plans will enable us to maintain our overall spend for the locality at current levels but to shift the proportion of that funding that is spent on services directly in Powys.

We are already taking steps by making sure that as much money as possible is re-invested into community services and improving productivity and efficiency in some services. However this will not be enough for the future. As a Health Board, we need to make significant savings each year to cover

the increasing costs of providing services. The proposals set out in this document will help to improve and modernise care and help to achieve this requirement.

### South Powys 2012/13 Budget



### Equality Impact Assessment

As part of our process we have carried out an initial impact assessment to determine if the overarching vision for improving healthcare in South East Powys and proposals to provide stroke rehabilitation care at Breconshire War Memorial Hospital would have an impact on any of the target groups who are protected under the Equality Act 2010.

We will continue to gather and update the assessment as a clearer picture of any specific impact on particular individuals or groups and staff emerges during the formal public consultation process and adjust our plans accordingly.

## What is the timetable for change?

The change process will be implemented in a phased approach. We anticipate that the timescales to achieve all proposals set out in this document will span over three years to five years.

Some areas of the proposals can be achieved more quickly:

- the strengthening of primary and community services has already commenced as has the increase in day surgery and outpatients.
- plans to implement improved access to diagnostics for GPs are currently being developed
- the transfer of stroke rehabilitation services to Breconshire War Memorial Hospital, if supported by the community and CHC can be implemented within six months
- improved parking at Breconshire War Memorial Hospital
- enhancements to clinical environments at Bronllys hospital

Some areas of the proposals will take longer to implement e.g.:

- local access to more specialised diagnostics
- implementation of transport plans
- Some areas of the proposals will depend upon other options of care becoming available locally for example commissioning of short stay GP supported care

We will continue the dialogue with local residents as delivery of these plans progresses to make sure we get them right for patients, and so that you are able to see the progress we are making.



# Appendix 1: FREQUENTLY ASKED QUESTIONS

## **Q: What has happened to the plans for a new hospital in South Powys?**

**A:** A new hospital in South Powys would have meant bringing together all services currently provided at Bronllys and Brecon onto a single site. You told us you want access to services across the area, and this is our plan. We will continue to develop Breconshire War Memorial Hospital as a centre for healthcare and services. We will also continue to provide services in the Hay and Talgarth area. We also know from the work that we have carried out that we can provide many of the planned service developments within the existing facilities.

## **Q: Will staff be losing their jobs?**

**A:** At the moment we do not believe that anyone will lose their job, although some staff may need to change what they do. We know that we cannot provide services unless we have the right staff, with the right skills in the right place. Doing more in Powys means our keeping and developing our staff is more important than ever. Discussion will be held with staff within the Health Board as to how best to utilise our existing staff to deliver the services in the future.

## **Q: Is this all about saving money?**

**A:** No but it is about using the resources we have available as a health community more effectively. Investing in and providing more services in the local area, helps us to reduce the money we spend out of county, and also improves the patient experience. It is also about adopting the latest practices in health care delivery and making services more able to respond to changing needs.

## **Q: Is this affordable?**

**A:** Best care is also more cost effective care. By extending community services we reduce the need for hospital admissions and long term care which will make our plans more affordable.

## **Q: What will happen to Breconshire War Memorial Hospital?**

**A:** We see the hospital as central to our plans for the future, maximising the use of the excellent facilities available to the whole of Breconshire.

## **Q: What will happen to Bronllys Hospital?**

**A:** The Bronllys site is far larger than the NHS can practically use in the future. We do however intend to continue offering services

from the site, and to seek alternatives for some services in new accommodation. The Bronllys site remains one of the options for these new facilities. We have embarked on a plan to work with the local community to extend the range of organisations that are able to use the site. We believe the site can be a focus of wider employment and local regeneration for this area. This work was undertaken with the Prince's Foundation for the Built Environment, and a separate report on these proposals can be found on our web-site.

**Q: Is it safe to be cared for in the community?**

**A:** As recent publicity has shown, patients in hospital can acquire infections that impact on their recovery. In addition, there is also the risk, particularly for older people, of becoming increasingly dependent on hospital care. This can lead to premature admission to permanent residential care. Being cared for in the community is about supporting people to help them to maintain their independence as long as possible, keeping them well and avoiding an unnecessary hospital stay

**Q: Why can't we have a District General Hospital in Powys?**

**A:** A District General Hospital requires a population of at least 250,000 people to provide the frequency of treatment that enables doctors and nurses to maintain their skills. Powys has a population of around 132,000 and is very sparsely populated. A large hospital would therefore not be safe to be provided in Powys. We do however believe we can increase the amount of services that visit Powys, such as surgeons undertaking day operations at Breconshire War Memorial Hospital.

**Q: Are there any changes planned for Childrens Services?**

**A:** We are currently working with social services and education colleagues on how to enhance integrated children's services within South East Powys in the future. We will publish separate proposals on services for children in due course.

**Q: If stroke services move, are the remaining these services at Bronllys Hospital viable on a stand-alone basis?**

**A:** Yes, Powys tHB has a number of areas across Powys that operate satisfactorily with around 12 beds.

**Q: How do the proposals benefit patients?**

**A:** We believe that by improving health care provision in South East Powys we will bring the following benefits to local people and staff:



- modern health services delivered locally, designed to meet the changing needs of the population;
- better health and well-being for the population;
- more services provided through primary care and based in the community;
- support for people with long-term conditions and helping them get the most out of life;
- fewer unnecessary hospital admissions and journeys out of county
- better access to key diagnostic tests;
- greater involvement in the planning and delivery of health services.

**Q: Are there any changes planned for Mental Health Services?**

**A:** We are currently working with Aneurin Bevan Health Board on how we can improve mental health services in South East Powys in the future. This work is particularly focused on the modernisation of mental health care in the community and for people in crisis. We will publish separate proposals on services for mental health in due course.

**Q: What is Powys tHB’s involvement in the proposals around the Hay-on-Wye Supermarket development?**

**A:** The Health Board has not made a formal commitment to any care home including the one proposed for Hay-on-Wye. Powys tHB has maintained contact with the developer and Powys Council to ensure it is aware of this and other potential options for care in the local area.

## Appendix 2: A Vision for NHS Wales

In developing these plans to improve healthcare services in South East Powys, there are many Welsh Government health and social care policies and Measures we need to consider.

These include: Fulfilled Lives, Supportive Communities (2007); the Rural Health Plan – Improving Integrated Service Delivery Across Wales (2009); Our Healthy Future (2009); Setting the Direction: Primary and Community Services Strategic Delivery Programme (2010); Programme for Government (2011); Sustainable Social Services for Wales: A Framework for Action (2011); Together for Health: A Five Year Vision for the NHS in Wales (2011); Fairer Health Outcomes for All: Reducing Inequities in Health Strategic Action Plan (2011), Working Differently – Working Together – a Workforce and Organisational Development framework (2012)

## Appendix 3: Stakeholder Representation

We would like to thank the following Community Stakeholders for offering their time and input into the workshops which were held to develop new ways of providing future health and social care services in South East Powys.

- Local County Councillors
- Local Town Councillors
- Local Community Councillors
- Brecon League of Friends
- Bronllys League of Friends
- PAVO
- Powys tHB Staff
- Powys Age Concern
- Hay & District Community Support
- Keep the Heart in the Community Group
- Brecknock and Radnor Community Health Council
- Powys Staff Partnership Forum
- Powys County Council
- Crossroads

We would also like to thank members of the local community for taking the time to share your views and comments on Powys tHB's Vision for Future Health Care Services in South East Powys discussion document.

## Appendix 4: Option Appraisal for the Overall Service Model

### How options were developed?

As a part of the stakeholder engagement events, a long list of options on how future health care service could be provided was developed. The options considered included:

#### Option 1a: Do nothing

This option would mean all services remain as they currently stand with no service improvement or any improvements to existing buildings (This option was discounted as it is not sustainable)

#### Option 1b: Do minimum

This option would mean all services remain as they currently stand with very minimal improvement. Maintenance of buildings will only be undertaken to meet minimum standards (This option provides limited ability to improve or integrate health care services and provides limited financial gains – the option was left in as a possible alternative option for comparative purposes only)

#### Option 2: A combination of a “Rural Hospital” and a range of “Health and Social Care Centres”

This option would provide an enhanced community hospital type facility within the area. The facility would provide an enhanced range of community hospital based services for example minor injuries, consultant outpatients, diagnostics, day surgery, stroke rehabilitation services, community dentists. The option also includes provision of GP managed care for example short stay care, palliative care, respite care provided alongside residential and nursing care. (This option provides greater local access for patients however does not fully achieve Powys tHBs vision to provide a greater range of community services more locally – the option was left in as a viable option)

#### Option 3: A combination of a “Rural Hospital” and Enhanced Health and Social Care Centre”

This option would provide an enhanced community hospital type facility within the area. The facility would provide an enhanced range of community hospital based services for example minor injuries, consultant outpatients, diagnostics, day surgery, stroke rehabilitation services, community dentists. The option also includes provision of GP managed care as shown in Option 3 for example short stay care, palliative care, respite care provided alongside residential and nursing care. The enhanced health and social care centre may also include a range of additional services

for example outpatient clinics that do not require diagnostic support, day services, health and well-being activities, therapy led clinics and specialist nurse led clinics (This option provides the best access for patients locally and fully meets Powys tHBs vision for future health services and therefore is has been taken forward as the preferred option)

#### Option 4: Single facility providing all services

This option would provide all health services as listed above on one single site. (This option does not meet Powys tHB's strategic direction and therefore was discounted)

## Appendix 5 Glossary of Terms

**Acute care:** medical and surgical treatment usually provided by a large hospital.

**Acute hospitals:** the hospitals people go to for major surgery and the treatment of very serious conditions.

**Clinician:** a general term for hospital doctors, GPs, nurses, therapists and other healthcare professionals.

**Community services:** health services provided outside of a hospital. Community health staff include district nurses, health visitors, community age care consultants. Many community staff are attached to GP practices.

**Community Health Council (CHC):** The CHC is an independent body that scrutinises and keeps under review the delivery and planning of local health services, represents the interests of patients and the public in the NHS, inspects and monitors service provision and the patient environment, provides an enquiries and complaints advocacy service.

The CHC is the public's independent "watchdog" in the NHS.

**Daycase or day surgery:** a patient who has an investigation, treatment or operation and is admitted and discharged on the same day.

**Equality impact assessment:** is a process designed to ensure that a policy, project or scheme does not discriminate against people who have been categorised as being disadvantaged or vulnerable people, these include age, disability, sex, race, religion or belief (including lack of belief), gender reassignment and sexual orientation

**GP:** general practitioners are doctors who work from a local surgery providing primary care for their patients who have registered on their list, and except for emergencies act as the gateway to acute and other care.

**Inpatient:** an inpatient is a patient who has been admitted to a hospital and is occupying a bed.

**Integrated services:** services which are provided across professions and organisations according to people's need.

**Long term conditions:** conditions such as diabetes, or a heart or respiratory problem that cannot be cured.

**Outpatients:** attend for a consultation, advice and/or treatment but do not stay in a hospital.

**Primary Care:** the first port of call for many people when they develop a health problem is their local doctor, also known as a general practitioner (GP).

**Provider:** is a name used to describe any organisation that provides a service to the NHS.

**Rehabilitation:** is a treatment or treatments designed to facilitate the process of recovery from injury, illness, or disease to as normal a condition as possible

**Secondary care:** this means the same as acute care (see acute care)

**Social care:** non medical care which is aimed at providing vulnerable people (such as the unwell, frail and elderly) with care and support to enable them to live their lives as fully as possible. This is provided by Powys County Council for Powys residents.

**Specialised services:** these are services for which demand is relatively small but which require very specialised staff and equipment. All Powys residents requiring specialised services will travel out of county for the acute part of their care.

**Stakeholder:** an individual or organisation with an interest in health and health initiatives; can be organisations such as local authorities or individuals such as residents.

**Telecare:** technology used to monitor and communicate with patients in their homes, often helping elderly people to remain in their own homes rather than moving into residential care.

**Telehealth or Telemedicine:** is a broader term referring to healthcare supported through use of telecommunications. An example would include a consultant in a district general hospital assessing a patient using a video link to avoid the patient having to travel.

**Third Sector:** also referred to as the voluntary sector or community sector

**Workforce:** the term generally used within the NHS to refer to staff



**Please complete the pull-out feedback sheet at the centre of this document and return to:**

**Planning Department  
Powys teaching Health Board  
Mansion House  
Bronllys Hospital  
LD3 0LS**

**by email at**  
[\*powys.geninfo@wales.nhs.uk\*](mailto:powys.geninfo@wales.nhs.uk)

**or through Twitter**  
[\*@PowystHB\*](https://twitter.com/PowystHB)

**or Facebook**  
[\*facebook.com/PowystHB\*](https://facebook.com/PowystHB)

**Further details will be published at**  
[\*powysthb.wales.nhs.uk\*](http://powysthb.wales.nhs.uk)

### **Public meetings and events**

**Powys teaching Health Board will be holding a series of consultation events across the area to allow you to discuss the details of this document and ask any questions that you may have.**

**Details of these will be published on the website [\*powysthb.wales.nhs.uk\*](http://powysthb.wales.nhs.uk) and public notices will also be displayed and distributed.**