

Open a full hospital facility, including an A&E department in mid Wales

Y Pwyllgor Deisebau | 09 May 2022
Petitio
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Petition Number: P-06-1250

Petition title: Open a full hospital facility, including an A&E department in mid Wales

Text of petition:

The public of mid Wales currently must travel between 30 and 50 to get to the nearest hospital facility.

We are relying on English hospitals and English out of hours service (shropdoc - www.shropdoc.org.uk) to care for our people.

Recently ambulance times in the mid Wales area have taken up to 5 hours to reach patients who are obviously in difficulty, sometimes in life threatening circumstances.

Our basic medical facilities in the area are struggling to cope.



1. Background

1.1. Current health services for the population of Powys

Powys Teaching Health Board (THB) provides health services for 133,000 people living in Powys - a large rural county of 2000 square miles, approximately a quarter of the land mass of Wales.

The THB itself provides care for their residents within Powys through nine community hospitals as well as other health and care centres and clinics. However, Powys has a complex set of healthcare pathways spanning England and Wales, and the THB states that:

The very rural nature of Powys means that the majority of local services are provided locally, through GPs and other primary care services, community hospitals and community services. But with such a sparsely populated area we do not have the critical mass of people locally to provide a District General Hospital within Powys. Therefore, we pay for Powys residents to receive specialist hospital services in hospitals outside of the county in both England and Wales.

We are always striving to bring as many services back into Powys as possible, including assessments and follow ups after treatment.

The THBs' Integrated Medium Term Plan 2020-21 to 2022-23 also sets out:

The residents of Powys form part of the catchment areas for Accident and Emergency Department provision at several of the bordering District General Hospitals including the Royal Shrewsbury Hospital, Hereford Hospital, Bronllais Hospital in Aberystwyth, Wrexham Maelor Hospital, Morriston Hospital in Swansea, Glangwili Hospital in Carmarthen, Nevill Hall Hospital in Abergavenny and Prince Charles Hospital in Merthyr Tydfil. An even wider range of bordering providers in England and Wales are used by Powys residents for other planned and urgent care referrals and specialist care.

Primary Care out of hours services in Powys are currently provided by Shropdoc, who have primary care centres located in community hospitals in Brecon, Llandrindod Wells, Newtown and Welshpool.

1.2. Service standards

The THB has a responsibility to ensure its population has timely access to safe, sustainable, high-quality healthcare in the most appropriate setting. When looking at the case for a full acute District General Hospital (DGH) there are clinical and professional guidelines and recommendations which the THB would need to take account of, including around ensuring the availability of sufficient staffing and clinical workload. These include:

- In 2019 The Royal College of Emergency Medicine (RCEM) published its recommendations on consultant staffing in emergency departments (ED). The College defined for the first time there should be a **minimum of 1 WTE Consultant to between 3,600-4,000 new attendances annually**, depending upon complexity of workload and associated clinical services for which an ED is responsible. The consultant would also require the support of non-consultant medical staff. The most recent published data for emergency departments (May 2021) shows a monthly attendance of 942 across all hospitals in Powys.
- RCEM does not recommend specific population sizes or densities for each ED. Provision of emergency care should be configured around local population needs. However, it should be noted that to yield maximal operational efficiency and the best use of the resources required to establish an ED, **the ED should see approximately 45,000 patients or more per year.**
- In 2012, The Welsh Institute for Health and Social Care's 2012 publication The Best Configuration of Hospital Services for Wales: A Review of the Evidence – Quality and Safety set out that:

The Royal College of Physicians and the Royal College of Surgeons have stated that high-quality emergency medicine and surgery services need a critical mass of medical consultants and a minimum amount of immediately available diagnostic equipment and treatment facilities. The Royal College of Surgeons recommends that a safe major Accident and Emergency department should service a **population of no fewer than 300,000** (Royal College of Surgeons, 2008).
- In 2006, The Royal College of Surgeons of England (and Wales) published an initial report on reconfiguration of services, Delivering high-quality surgical services for the future. This maintained that for an acute or district general hospital providing the full range of facilities, specialist staff and expertise for both elective and emergency medical and surgical care **requires a population of between 450,000–500,000 residents**. However, where feasible, **smaller hospitals should merge to achieve a catchment population of least 300,000**, although the report identified the difficulty

of developing effective clinical networks across too many separate hospital sites.

- The same report also stated that a fully functioning 24/7 A&E service (ie a centre that accepts all emergencies) requires a critical population mass in order to provide efficient and effective services, alongside a range of clinical support services;

1.3. Ambulance response times

The responsibility for providing ambulance services lies with the [Welsh Ambulance Services NHS Trust \(WAST\)](#). Senedd Research has published information on [Ambulance Response targets](#). There is an **all-Wales target for 65 per cent of red calls** (Immediately life-threatening) to have a response within 8 minutes. For Powys, the most recently available published figures are set out in Table 1 below:

Table 1: Performance on Ambulance Red Calls, Powys and all-Wales, August 2021-February 2022

Date	% of red calls seen within 8 minutes	
	Powys	Wales
2022		
February	52.9	55.0
January	42.1	52.5
2021		
December	43.0	51.1
November	41.8	53.0
October	44.5	50.0
September	56.5	52.3
August	47.5	57.6

Source: [StatsWales](#)

A broader range of Ambulance Service Quality Indicators, including response times to amber calls, are also published by [StatsWales](#) and the [NHS Wales Emergency Ambulance Services Committee](#).

2. Welsh Government response to the petition

2.1. Health services

On 31 March 2022 the Minister for Health and Social Services wrote to the Chair of the Petitions Committee. The letter echoes the position of the THB and states that:

Due to the size of the population and the rurality, it is not considered viable for there to be a district general hospital in Powys. The very rural nature of Powys means that the majority of local services are provided locally, through GPs and other primary care services, community hospitals and community services. The health board is looking at repatriating a number of outpatient services and bringing them closer to home and are using in-reach services, which means that patients don't have to travel. It also carries out a number of day case procedures locally, and it is generally only inpatient treatments where patients need to travel to a general hospital. However, the health board continues to explore how it can further develop these services.

2.2. Ambulance response times

The Minister's response states that:

...the Welsh Ambulance Services NHS Trust (WAST) recognises the historic challenges of delivering equity of service across all parts of Wales, particularly in rural areas where it is difficult to predict the focus of demand and road networks can impact on the speed of response.

...the Trust began the process of undertaking a national roster review in April 2021, to ensure its staff and resources are best placed geographically to deliver a responsive and equitable emergency ambulance service across all parts of Wales.

The response also notes that a rural impact assessment has also been undertaken, which demonstrates that all counties designated as rural by Welsh Government – including Powys - will receive an increase in staff numbers to support timely ambulance response in those areas and that:

The new rosters for all stations in Wales will begin to be implemented from September 2022 and I expect the Trust to keep rosters under ongoing review to ensure there is equity of service across all parts of Wales and no adverse impact on responsiveness, staff and patient experience, or clinical outcomes.

Every effort is made to ensure that the information contained in this briefing is correct at the time of publication. Readers should be aware that these briefings are not necessarily updated or otherwise amended to reflect subsequent changes.