

4th December 2023

Mr Jack Sargeant MS  
Chair –Petitions Committee  
Senedd Cymru.  
Cardiff  
CF99 1SN

[Redacted]

Tel : [Redacted]  
Mob: [Redacted]  
e-mail: [Redacted]

## **P-06-1350 Re-open Dyfi Ward at Tywyn Hospital now**

Dear Mr Sargeant,

The Tywyn Hospital Action Group has been informed by your Committee’s deputy clerk that their petition, as above, is to be considered once again by your committee on Monday 11<sup>th</sup> December. This follows the public meeting in Tywyn with senior officers of Betsi Cadwaladr University Health Board.

The Tywyn Hospital Action Group has invited me to make a further submission to you on their behalf.

For health reasons I was unable to personally attend the public meeting on November 21st. However, I have spoken to several people who were present and read the meeting reports from various sources.

The Community Hospital Association is asked by community hospital supporters, three or four times each year, for advice and assistance when local health services are unavailable for unreasonable lengths of time. The evidence is overwhelming that community hospitals play a crucial part in delivering patient pathway care that maximises the patient’s outcome prospects and minimises their subsequent readmissions to acute care. Residents of Tywyn, Meirionnydd, consider that they have suffered for too long with inadequate healthcare service provision.

Prof Marcus Longley, when researching his Mid Wales Healthcare Study Report of September 2014 for the Welsh Government, studied Tywyn as one of his key rural areas. In a direct reference to Tywyn, Prof Langley stated (Page 107) :

“As a defined care component, community hospitals offer:

- a setting to which patients leaving District General Hospitals can be sent when they no longer need that hospital's treatment capability, but still need a period of recovery before going home;



- a means by which GPs can directly provide inpatient care for their patients where appropriate - bridging the primary/secondary care settings;
- a base at which visiting consultants from both English and Welsh hospitals provide outpatient consultations;
- a base from which some diagnostic services operate – e.g. X-ray and endoscopy;
- a facility from which many aspects of telecare can be used;
- a minor injuries service;
- support for palliative and end-of-life care; and
- a base from which both health and social care can be jointly planned and delivered.”

The healthcare services which Prof Longley applauded, was matched by the then service pattern at Tywyn as recorded in his Report (Page 169). Sadly, the service pattern has diminished substantially since that time and many residents at the November 21<sup>st</sup> meeting, recorded how they were personally suffering from the diminished service.

On its website the Welsh Government states “The Welsh Government is the devolved Government for Wales. We are working to help improve the lives of people in Wales and make our nation a better place in which to live and work”.

The Welsh Government “working to help improve the lives of people” is not evident to the residents of Tywyn and the Dyfi estuary area. Prof Longley’s report forecast that staffing problems would arise in Mid Wales Rural Areas, due to staff age profiles, and those staffing problems have duly arisen, but they have not been addressed.

There is common ground between Betsi Cadwaladr UHB and the Tywyn community that there isn’t a pool of nurses available in the South Meirionnydd area from whom to seek to recruit. During the past year, Betsi Cadwaladr has advertised for at least 12 different types of nursing posts in South Meirionnydd and their success rate has been disappointingly low. Betsi Cadwaladr faces the same problem that other health bodies supporting rural healthcare have faced. Recruitment from out of area is essential.

## A WAY FORWARD

I would encourage the Petitions Committee to use its influence to arrange a plenary debate based around the Tywyn petition. The issue that the Tywyn area staffing deficit raises is a



policy one, regarding public body interworking and pooled financing in health and social care.

In any healthcare setting nurses are “key workers”. Within the Community Hospitals Association, we have observed that out of area recruitment of “key workers” has been successful when the healthcare body and the local authority have worked closely together to address the challenge. We know of examples in both England and Scotland where “key workers” have been recruited from urban conurbations to relocate to rural areas through health body and local authority joint working.

Attracting out of area key workers often requires more than just placing an advert. For example, Bishops Castle community hospital has recently attracted key nurses by offering a £3,000 additional payment after a period of service.

Many nurses working in the West Midlands will be familiar with South Meirionnydd from having visited on holiday. They may be encouraged to consider relocation if they know that vacancies exist, and that support in terms of relocation costs, plus as necessary also affordable housing, access to schooling etc., is being taken care of. We have seen elsewhere that a local authority has worked closely with the healthcare body to retain a recruiting organisation in an urban area and to ensure that the relocation task, for suitable candidates, is eased.

Despite the Welsh Government’s enthusiasm for Regional Partnership Boards where it says “RPBs bring together health boards, local authorities and the third sector to meet the care and support needs of people in their area”, there is a shortfall of evidence of Betsi Cadwaladr UHB and Cyngor Gwynedd close interworking to solve the Tywyn recruitment problem.

North Wales has a Regional Integration Fund (RIF) to support health and social care effective integration. In 2022-23 the RIF fund had access to £41million of funding. Over £2 million of this was allocated for step-up, step down activities. That is the very role in which community hospitals excel. A modest one off sum from the North Wales RIF budget may solve the Tywyn problem. Engaging a West Midlands recruitment agency to find suitable staff, refunding travel expenses etc for interview, plus material support with moving domicile to South Meirionnydd, may produce the desired results.

Is there a need for much more robust Welsh Government policy guidance to be issued, so as to do more that “bring together health boards and local authorities” and but also to require them to work actively together? It appears that there is.

Betsi Cadwaladr UHB has used ordinary recruitment procedures to seek to recruit nursing staff. But after failing for at least 8 months in their ‘ordinary’ endeavours, there may now be a recognition that extraordinary efforts are needed and that “nominal” partners in the North Wales Regional Partnership Board need to proactively lend their support.



No community deserves sub-standard healthcare. I trust that the Petitions Committee will address the plea from Tywyn by affording it the support it deserves.

Yours sincerely

Tom Brooks

Committee Member for Wales

Community Hospitals Association