



25th February 2024

Mr Jack Sargeant MS
Chair –Petitions Committee
Senedd Cymru.
Cardiff
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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 4th March and invited me to provide an opinion on Ms Shillabeer's letter to the Committee of February 8th.

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 ward in Tywyn has now been closed for more than 9 months,

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 much too long with inadequate healthcare service provision.

In this letter, I concentrate on the actions that Betsi Cadwaladr have taken to seek to be able to reopen the ward. I reflect upon the Board's failure to succeed in their endeavours and their dim prospects given their current limited approach.

BETSI CADWALADR LACK OF SUCCESS.

Ms Shillabeer describes the Board's lack of success in the paragraph in her letter which reads:

"We will be able to provide a date for the reopening of Dyfi Ward in Tywyn Hospital once our new recruits have been fully signed off as competent to work independently and the remaining vacancies are filled. Our priority remains patient safety and we require a full complement of staff to be able to provide safe staffing levels to our inpatients at all times."





This has been drafted in a somewhat disingenuous way. Ms Shillabeer is unable to offer a date for the reopening of Dyfi ward or any assurance that it will reopen. She states that she has one available nurse, who has been promoted to the Band 7 post. She plans to relocate two "Internationally Trained Nurses (ITN) to Tywyn, when they are suitably qualified at some undisclosed date. When this has been achieved, the Board still has to recruit a band 6 and a band 5 nurse in an area where there is dire shortage of nurses.

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 18 months, Betsi Cadwaladr has advertised for staff to fill at least 12 types of nursing posts in South Meirionnydd and their success rate has been disappointingly low.

Ms Shillabeer confirms the gross shortage of nurses in the locality when she writes, "In total we have deployed 6 ITNs to the Meirionnydd area, four to Dolgellau Hospital and two to Tywyn Hospital vacancies" and despite deploying six "Internationally Trained Nurses" the Board still has unfilled nursing vacancies.

Sadly, the Community Hospitals Association is not persuaded by Ms Shillabeer's closing sentence, "We trust this information provides reassurance of the Health Board's commitment to supporting the Tywyn community". We trust that the Committee will challenge this assertion.

Betsi Cadwaladr faces the same problem that other health bodies supporting rural healthcare have faced, a severe shortage of locally resident nurses. In several rural areas with the need to fill key nursing vacancies, recruitment from 'out of area' has proved to be the only viable approach.

A WAY FORWARD

Some people has asserted that there is a "national shortage of nurses". The recently published staff statistics in England challenge that view. The English Health Minister, Andrew Stephenson, summed the situation up succinctly "It's fantastic that there are over 370,000 nurses and midwives looking after patients in the NHS – 21,000 more than last year."

The Community Hospitals Association knows of examples in both England and Scotland where "key nursing staff" have been recruited from urban conurbations to relocate to rural areas through health body and local authority joint working.

Placing local adverts for nursing staff for Tywyn has failed for more than 9 months, and it would appear that there are negligible prospects of success in the next 9 months. But targeted recruitment from a large conurbation like the West Midlands could well succeed.

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 when a local authority has worked closely with the healthcare body, and they have retained a recruiting organisation in an urban area with a promise of relocation help, numbers of suitable candidates have shown interest.

The Tywyn Town Council has assisted in identifying accommodation possibilities for the two "Internationally Trained Nurses", to be relocated from Dolgellau. Social Media records the tremendous generosity of local Tywyn people in offers to donate items to the two ITNs for their prospective new home.

The Community Hospitals Association would welcome Gwynedd Council being actively engage in the out of area recruiting since relocating established families can involve both housing and schooling requirements.

No community deserves sub-standard healthcare as Tywyn is experiencing. Betsi Cadwaladr have done little more that hope that one day the Board might find suitable staff. I trust that the Petitions Committee will address the plea from Tywyn and press Betsi Cadwaladr to actually deliver the necessary nursing staff.

Yours sincerely

Tom Brooks

Committee Member for Wales Community Hospitals Association