



Dear Members of the Petitions Committee,

P-06:1538: Protect full stroke services at Bronglais Hospital; prevent downgrade to 'Treat and Transfer'. (Lead Petitioner: Bryony Davies - Signatures collected: 17,881).

Thank you for your communication inviting Protect Bronglais Services (PBS) to offer reflections on the above debate.

Firstly, we should like to thank both the Petitions Committee and the Business Committee for their understanding in ensuring that this debate was heard quickly given that a final decision on implementation of plans is expected from Hywel Dda University Health Board (HDdUHB) early next year.

The Debate:

- We feel we should mention that so significant is the petition, that approximately fifty people from Mid Wales (a good number of them stroke survivors who had been treated at Bronglais Hospital), travelled by coach to the Senedd on the 22nd October, determined to listen to this debate. They were fortunate enough to do so, both in the public gallery in Ty Hywel and also by watching it live on the wide-screen TVs in the Neuadd.
- PBS should also like to thank Carolyn Thomas as Chair of the Committee for giving such a full and comprehensive introduction to this important debate.
- The debate was extraordinarily strong, with excellent and passionate contributions from across all parties. The cross-party unity shows a clear understanding that the proposed 'Treat and Transfer' model is unworkable and unsafe for a rural region like ours. You cannot apply an urban system to Mid and West Wales, where travel times can often be over two hours compared to just minutes in cities.

- The quality of the debate was excellent with very well researched and factually accurate contributions from Senedd Members and we are grateful that they recognised the importance of taking part in the debate and that there is so much at stake here for the people of Mid and West Wales in terms of equitable healthcare.
- It is also important to mention that there was cross-party consensus and unity in this debate which along with the 17,881 signatures (collected in very short space of time), reflects the real concerns of constituents about the Health Board's proposal to move stroke rehabilitation away from Bronglais Hospital.
- Similarly, PBS believes it is very significant that on the Monday before the debate took place, every Senedd Member received a **Stroke Association briefing** document entitled: 'A Summary of the Stroke Association response to Hywel Dda Clinical Services Plan'. Within this document, the Stroke Association made clear their position on the proposals stating:

'The Stroke Association does not support Hywel Dda University Health Board's proposed changes to move stroke rehabilitation to a treat and transfer model. We believe that the current public proposals risk undermining specialist-led treatment, fragmenting services, and increasing health inequalities across Wales'.

Given that the Welsh Government states that the Stroke Association plays a significant role in its determination of policy around stroke, this was key and indeed, during an intervention from Mabon ap Gwynfor MS during the debate, the Cabinet Secretary for Health and Social Care, Jeremy Miles, accepted this fact.

Meeting with the Cabinet Secretary for H&SC following the debate:

Following the debate, at my request as Chair of PBS, a meeting was convened with the Cabinet Secretary for H&SC through the Llywydd, Elin Jones. Myself, Lead Petitioner Bryony Davies and Dr. Phil Jones (retired Stroke Doctor from Bronglais and former Stroke Lead for Wales), attended the meeting along with Elin Jones. At this meeting, the points listed below were made to Mr. Miles:

- As the Committee will know, there are huge issues around the Health Board's proposal to transport stroke patients onward from Bronglais to Llanelli – the Welsh Ambulance Service has not given any details as to how, or if, they can support this proposal and this is perhaps the only response that HDdUHB need to have had. These plans should have stopped as soon as this was known.

- Given that geography, population densities and transport infrastructure are not within Hywel Dda's power to change, they need to consider bespoke solutions that offer the optimum service for the catchment population they serve - (and we are grateful that again, a number of contributors to the debate recognised this fact).
- This stroke plan offered for public consultation has omitted key areas such as subarachnoid hemorrhage, transport (patient and relatives/carers), palliative care and support for patients undergoing rehabilitation from families and friends – omissions which are staggering oversights which is why PBS deemed this consultation to be fundamentally flawed from the outset.
- Whilst the Stroke Association is calling on the Welsh Government to introduce Specialist Stroke Centres that can deal with emergencies 24/7, it is important to state that Llanelli Hospital would not be this. Described within the Consultation document as a comprehensive centre for stroke, it is not.

It was also pointed out to Mr. Miles that:

- The evidence base for centralised stroke services is almost wholly derived from very large urban settings; for example, the London model is based on a specialist stroke unit that serves a population of one million with travel times of eight minutes to that unit. These units are supported by stroke physicians, neuroradiologists, interventional neuroradiologists, neurosurgeons, neurologists and vascular surgeons. The only site in Wales that has all of these components is Cardiff. No single site in Wales caters for a catchment population of one million and to meet the travel time of eight minutes would require a very large number of specialist stroke units. The solution for Wales, especially rural Wales, must be a bespoke model that applies the evidence with clear consideration for the geography; Hywel Dda UHB have failed to do this.

We very much hope that the Cabinet Secretary will also consider this and inform the Health Board that they need to go back to the drawing board. Mr. Miles indicated that he was 'in listening mode' and we hope that this is the case and that he has understood the strength of feeling and lack of evidence-base and detail around these proposals.

Following the debate an important question remains:

If the population disagrees with a health board's plans — especially those drawn up far from the communities affected — who do people have recourse to?

As publicly funded bodies, health boards must ultimately answer to our elected representatives and to government.

Finally, the debate around this matter is not just about policy. **This is about values:** primarily about fairness and equity and Hywel Dda need to think very deeply about what sort of Health Board they want to be.

Thank you for taking the time to read this - another long submission from us!

PBS should also like to thank the Clerk and all of the members of staff of the Petitions Committee for their invaluable help and guidance around this petition and in making this petition go forward to debate. We, and all who signed the petition, are most grateful. Diolch o galon.

Yours faithfully,

FOR AND ON BEHALF OF PROTECT BRONGLAIS SERVICES

Lisa Francis (Chair of PBS)

Bryony Davies (Lead Petitioner and Member of PBS)