

Help Shape the Future of Inpatient Services at Penley Hospital

Phase One Engagement Summary

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1. Introduction

This report provides an overview of the first phase engagement on the future of inpatient services at Penley Hospital. It outlines the context and rationale behind the issues that led to the service review, summarises the efforts taken to involve the local community and stakeholders so far and sets out the legal framework guiding this process. The aim is to ensure transparency and meaningful participation as decisions are made about the provision of healthcare in Penley.

The feedback contained in this report represents the views of 347 respondents to BCUHB's online survey, social media activity as well as a range of face-to-face engagement events and conversations.

2. Background

The inpatient beds at Penley Hospital were temporarily closed in December 2024 due to concerns around the sustainability of the care model and ongoing staffing challenges. Historically, Penley has provided care for patients who are well enough to leave a main hospital but not yet ready to go home.

The number of patients suitable for this type of care has been limited, and ongoing difficulties with recruitment and reliance on temporary staff have made it increasingly difficult to deliver safe and sustainable care.

We have carried out the first phase of engagement with the local community, having reviewed the challenges, listening to what matters most, and exploring different scenarios for delivering care that is safe, high-quality and sustainable.

Whilst gathering input, a multi-stakeholder session has also been carried out with further conversations set to take place, seeking community input ahead of the Health Board aiming to make a decision in a public board meeting in January 2026.

3. Legal duties for communications and engagement relating to service change

As a public body, Betsi Cadwaladr University Health Board must adhere to all legislation regarding the involvement of its population in the planning, development and delivery of services.

[Guidance from the Welsh Government states that:](#)

Section 183 of the National Health Service (Wales) Act 2006 requires local health boards (LHBs), with regard to services they provide or procure, to make arrangements to involve and consult current and prospective service users, or their representatives, on:

- planning to provide services for which they are responsible
- developing and considering proposals for changes in the way those services are provided
- making decisions that affect how those services operate.

Section 242 of the National Health Service Act 2006 extends this requirement to NHS Trusts in Wales. For the purposes of this guidance, the Welsh Government considers that Llais is a body representing current and prospective service users.

Llais represents the interests of the public in relation to health and social services in Wales. The need to secure safe and sustainable services and access for all to best practice within available resources is equally of concern to the NHS and its users and something which the NHS in Wales must work with Llais to achieve. NHS bodies should therefore engage with Llais as it works to improve services.

4. Engagement approach

A wide range of engagement and stakeholder involvement has been undertaken since the closure of the ward in 2023 and since July 2025 there has been a more focused engagement exercise with local residents, staff, and stakeholders.

A phased approach to engagement is being carried out to support the service review process as follows.

Phase one (July 2025 to October 2025)

This phase of communications and engagement focused on:

- Listening to what matters to people — their priorities, concerns, ideas and experiences.
- Recording the feedback
- Raising awareness of the listening exercise, issues surrounding the temporary closure and opportunities to shape the future of local services.

This was done via the following activity:

- Social media and digital awareness raising:

Website views: 1,257

Penley social media posts raising awareness of the survey:

Impressions (reached people's feeds): 58,239 times,

Social media users interacted with the posts 285 times.

- A total of 347 completed surveys were received by BCUHB. No surveys were completed or received in Welsh.
- Reaching out to stakeholder groups for face-to-face conversations and support in awareness raising.
- **07.10.2025** Attendance at the Maelor South Community Council
- Monitoring of correspondence. Five separate enquiries have been received and responded to specifically relating to the changes to Penley Community Hospital and the process being undertaken during this time.

Emerging key themes from online and face to face feedback were presented at the first of the "Balanced Room" discussions for Penley on Friday 26th September 2025. The outcomes of the first Balanced Room will enable more detailed information to be available to support discussions at the second Balanced Room event on Wednesday 29th October 2025, where key identified stakeholders will work to define a shortlist of options, or a preferred option that will shape further engagement throughout November 2025.

Regular communications with Llais remains ongoing with proactive updates being provided as well as their active involvement in the Balanced Room conversations.

Phase two (November to December 2025)

Phase two of the communications and engagement activity will be to raise awareness of and invite feedback on the shortlist of options; explaining the work to develop the options and actively seeking feedback from those who have been involved throughout, those most affected (as outlined by the Integrated Equalities Impact Assessment), staff and the wider community.

Face to face engagement will be carried out as well as making hard copy and digital feedback options available on a large-scale across the local community.

Following this phase of engagement, all feedback will be independently analysed to support the Health Board in making a decision about the future of the services at their Board meeting in January 2026.

5. Phase One findings

It is important to note that participation in requests for feedback is voluntary, with respondents being self-selecting. Views collected may therefore not fully represent the broader patient or public population.

Summary of all feedback

Conversations on the future of Penley Hospital so far have revealed a deeply rooted and widespread community desire to retain but repurpose the facility as a hub for local healthcare. Across hundreds of responses residents, carers, healthcare professionals and former patients expressed a consistent message which was presented by one respondent as: "Penley Hospital is not just a building - it is a vital part of the region's health infrastructure, heritage and identity."

Local provision and accessibility emerged as the most dominant theme. Respondents repeatedly emphasised the importance of having healthcare services close to home, particularly in rural areas where transport is limited and public services are stretched. Penley's location was seen as ideal for serving the Wrexham County villages and surrounding communities; offering a more accessible and less intimidating alternative to large hospitals like the Wrexham Maelor.

Step-down and rehabilitation care was another key priority. Many respondents described Penley as perfectly suited for patients who are medically fit but not yet ready to return home. It was felt that a model like this may help alleviate bed-blocking at Wrexham Maelor Hospital, improve patient outcomes, and reduce

pressure on acute services. The hospital's peaceful environment and familiar staff were credited with aiding recovery and providing dignified end-of-life care.

There was strong support for expanding Penley's role into a multi-functional community health hub. Suggestions included minor injuries units, outpatient clinics, physiotherapy, mental health support and integration with local GP practices and third sector partners. Respondents envisioned Penley as a place where holistic, person-centred care could thrive - especially for the elderly, disabled, and neurodivergent individuals.

Workforce and operational concerns were also raised. While some respondents shared negative experiences, the majority praised the dedication of Penley's staff and called for better support, training and retention strategies. Ideas included rotating placements, recruiting locally, and offering visa sponsorship to overseas workers.

Underlying many responses was a sense of frustration with centralisation and a perceived lack of strategic planning by the Health Board. The closure of Penley was seen as an example of broader issues within the NHS in Wales - overcrowded hospitals, delayed diagnoses and fragmented care. Respondents urged the Health Board to think creatively, consult meaningfully and invest in community-based solutions.

Finally, the historical significance of Penley Hospital was a recurring theme. Originally established to care for Polish war veterans, the feedback suggests that the hospital is seen as a special place to many. Its closure was described not only as a loss of service but linked to a loss of community identity and heritage.

6. Next steps

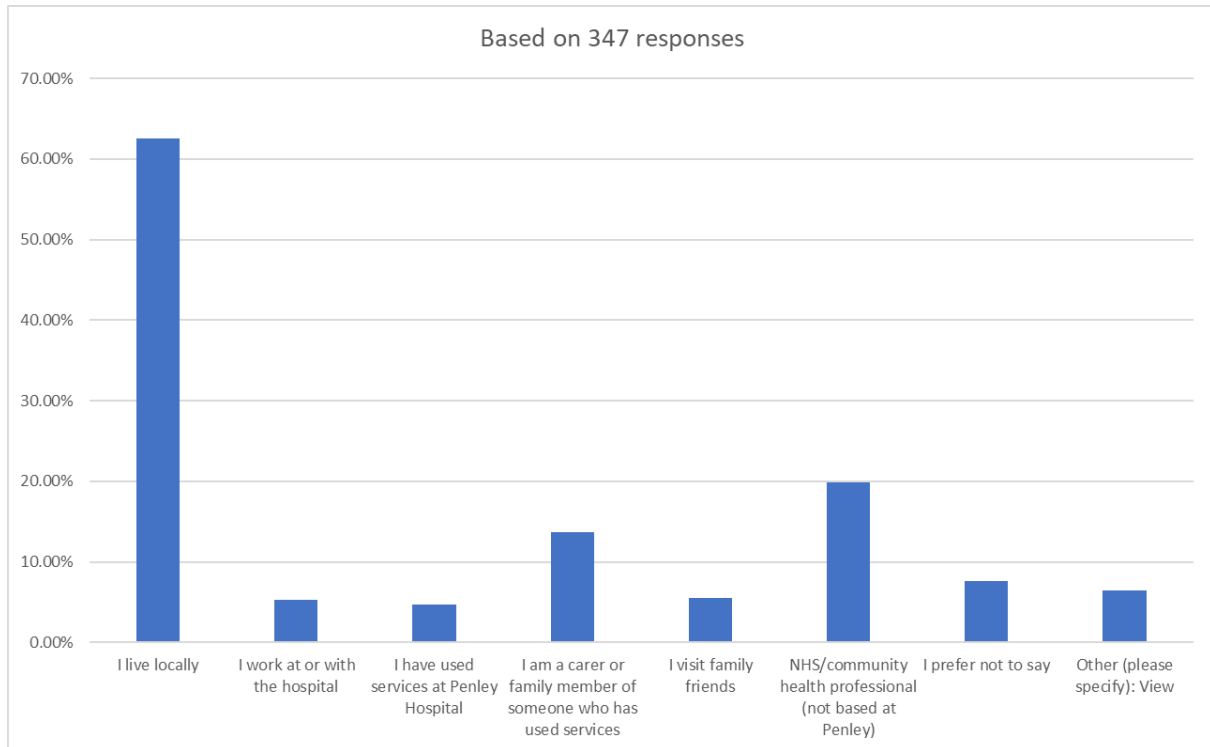
All feedback so far will be considered ahead of the second stakeholder event for Penley on Wednesday 29th October 2025. The information will be used to better inform the Health Board's approach to engagement, ensuring all protected characteristics are considered and heard from; particularly those as identified in the next phase of the Integrated Equalities Impact Assessment.

Following the development of a shortlist of options or preferred option for the future of these services, further targeted public engagement and communications activity will be carried out across multiple channels to raise awareness of any proposals and ways in which to get involved.

7. Question by question feedback from the Phase One survey

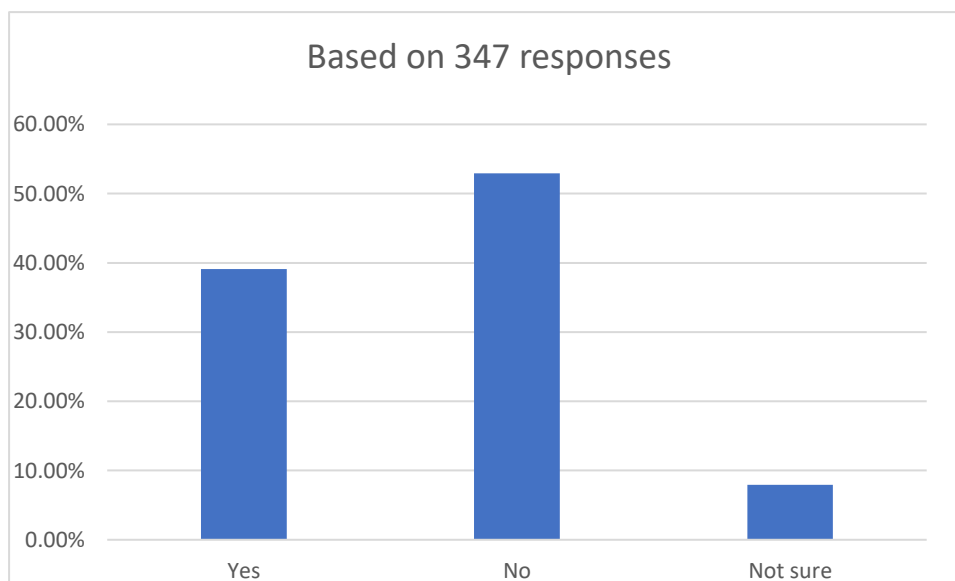
To note, key themes are ordered by frequency of mention.

1) What is your connection to Penley?

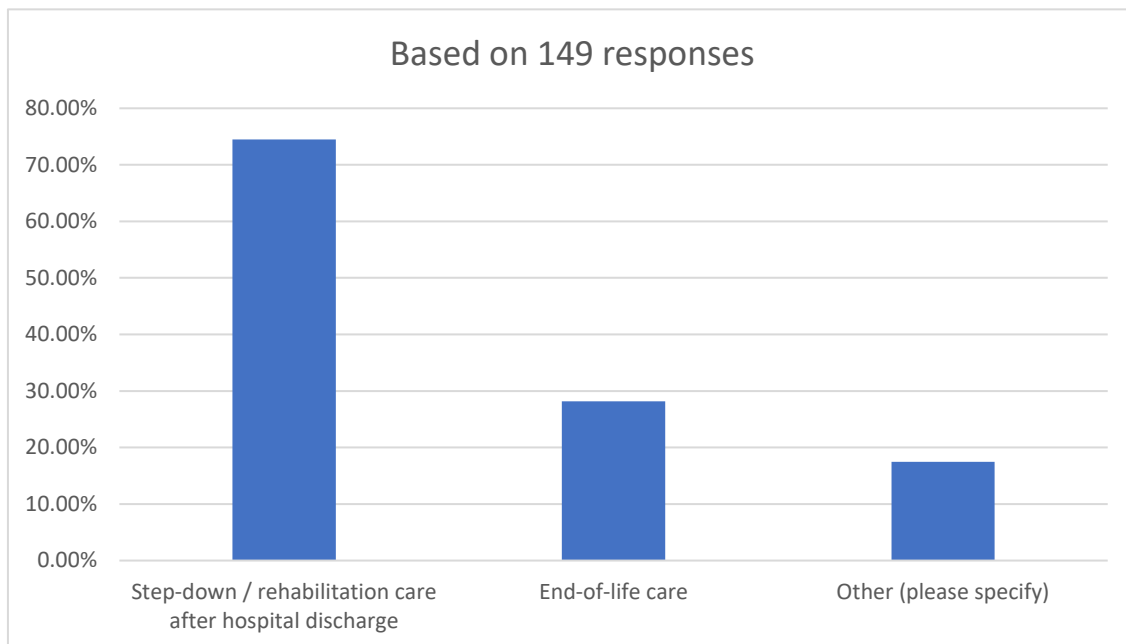


Note: all "other" responses are covered by the options available but some respondents chose to elaborate further.

2) Have you or someone you care for ever received care at Penley Hospital?

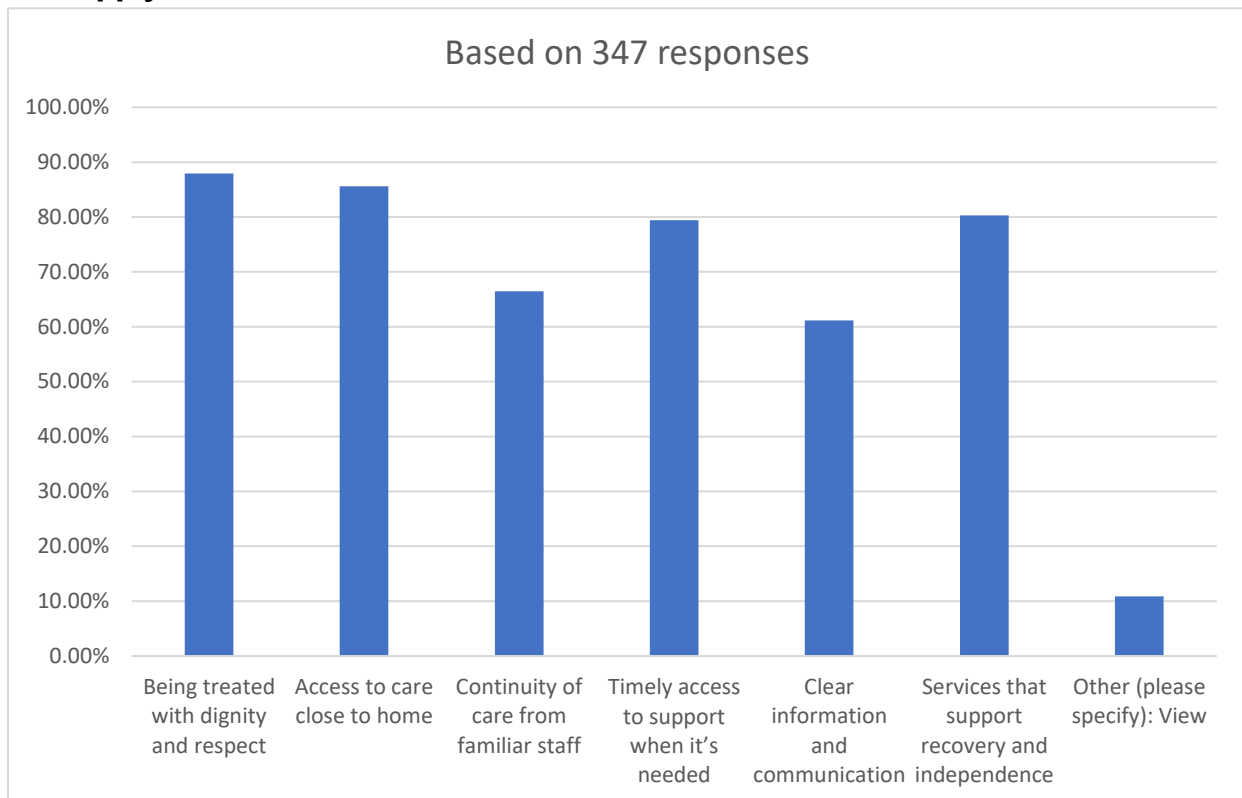


If yes, what type of care did you/the person receive?



The majority of “Other” responses were to highlight personal experiences of step-down care within the setting – some positive and some negative. Those with positive experiences praised this part of their care journey as being essential to recovery, those with negative cited long waits for discharge and care packages.

3) What matters most to you when accessing care in your local area? (Tick all that apply)



Those who chose "Other" cited the following themes most frequently:

- **Receiving high-quality, compassionate care from dedicated and caring staff**
- **Being close to home/Visiting loved ones easily**
- **Supporting elderly patients in familiar surroundings**
- **Reducing travel stress, especially in rural areas with limited transport**
- **End-of-Life and Hospice Care**
- **Rehabilitation and step-down services**
- **Avoiding overcrowded acute hospitals:** Wrexham Maelor Hospital was frequently mentioned in a negative context, with concerns about overcrowding, poor treatment, and lack of continuity. Community hospitals were viewed as a way to relieve pressure on acute services.
- **Sense of belonging and familiarity:** Being in a known and trusted environment was seen as vital for emotional wellbeing, especially for older adults. A local facility fosters a sense of safety and community.
- **Continuity and adaptable care:** Calls for care that adapts to people's situation - whether it's dignity at the end of life, independence during recovery, or continuity for chronic conditions.
- **Cross-border access and integration:** Some feedback calls for better links between Wales and England, especially for border communities who rely on services across both regions.

4) What would help you, your family or your community to stay well and supported locally?

Key themes from people's feedback are:

- **Local access to care:** There is a strong emphasis on having healthcare services close to home, especially in rural areas. People want to avoid long travel times to Wrexham Maelor and other distant hospitals and local facilities like Penley are seen as essential for maintaining independence and wellbeing.
- **Step-down and rehabilitation services:** Many respondents highlighted the need for intermediate care between hospital and home. Penley is viewed as ideal for recovery, reablement, and preventing hospital "bed-blocking."
- **Improved transport and accessibility:** Poor public transport is cited as a major barrier, especially for elderly and disabled residents. Calls for better bus services, circular routes, and easier access to clinics and GP surgeries.
- **Support for carers and families:** Carers need respite and practical support to manage their responsibilities with local care options reducing stress and allowing families to stay involved in loved ones' recovery.
- **Mental Health and Social Care:** Respondents requested more mental health services, neurodivergent-friendly support and social care provision. Integration between health and social services is seen as vital.
- **Minor Injuries and outpatient clinics:** Suggestions for walk-in centres, wound care, blood tests, and outpatient services at community hospitals. These would reduce pressure on A&E and improve timely access to care.
- **Continuity and quality of care:** People value familiar staff, personal attention, and a sense of community. Smaller hospitals are seen as more compassionate and less chaotic than large acute settings.
- **Community hubs and holistic support:** Ideas for multi-use facilities offering day centres, advice clinics, exercise groups, and social activities. The Rainbow Centre was frequently mentioned as a model for integrated community support.
- **Timely and coordinated services:** Respondents reported frustration with delays in appointments, diagnostics, and care packages. There is a desire for better communication between hospitals, GPs and social services.
- **Preserving local facilities:** There is a strong opposition to closing Penley Hospital with many seeing it as a vital resource that should be retained and repurposed to meet the evolving needs of the community.

5) What would you want the Health Board to consider when deciding on the future of services at Penley Hospital?

Key themes from people's feedback are:

- **The importance of local provision of care:** There is a strong and consistent message that services should remain close to home, especially for elderly and disabled residents. Penley Hospital is seen as a vital community asset, offering familiarity, dignity, and accessibility.
- **Step-down and rehabilitation services:** Many respondents advocated for Penley Hospital to be used as a step-down facility for patients discharged from Wrexham Maelor. Thoughts were that this would help reduce bed-blocking, support recovery, and ease pressure on acute services.
- **End-of-life and palliative care:** Penley Hospital was frequently described as ideal for end-of-life care, offering a peaceful and dignified environment. Families valued the ability to visit loved ones easily and felt the unit had previously provided compassionate, personalised care.
- **Workforce and staffing:** While workforce challenges were acknowledged, many felt these could be addressed through local recruitment, better support, and staff retention strategies. Several responses highlighted the dedication of local staff and the need to respect and retain local expertise.
- **Suggestions for alternative models of care, including:**
 - Nurse-led services
 - Minor injuries units
 - Outpatient clinics
 - Integration with a third sector partner – The Rainbow Centre for example is mentioned positively by local people
 - Hybrid models combining in-person and digital care
- **Transport and accessibility:** Poor public transport was a major concern, especially in rural areas. Penley's location was seen as more accessible than larger hospitals for many residents.
- **Recognition of community identity and heritage:** Penley Hospital holds historical significance, particularly for the Polish community. Many respondents expressed emotional attachment and a desire to preserve its legacy.
- **Joined-up thinking and system efficiency:** Calls for better co-ordination between primary, secondary and social care as well as respondents urging the Health Board to think strategically, avoid duplication, and use existing infrastructure wisely.
- **Increased mental health and social care support:** Several responses highlighted the need for neurodivergent-friendly services, mental health support and respite care. Integration with social care was seen as essential for continuity and recovery.
- **Economic and practical considerations:** Some respondents raised concerns about cost-effectiveness, value for money and sustainability. Others suggested using Penley for training, volunteering or shared staffing models.

8. Overview of respondents

Many times, where people have answered the following questions as, "Other" it is to question the need for understanding and collecting the information. Collecting this information is important to ensure the Health Board is meeting its' legal duties in regards to Protected Characteristics, as well as ensuring equity of opportunities to shape the future of services across communities, meeting the whole population need.

Location:

Anglesey	0.29%
Conwy	1.47%
Denbighshire	2.06%
Flintshire	2.95%
Wrexham	87.02%
Gwynedd	1.18%
Other	5.01%

The majority of "other" reported their location as Shropshire.

Ethnicity:

British	49.41%
English	6.76%
Northern Irish	0.29%
Scottish	0.00%
Welsh	36.76%
Irish	0.29%
Gypsy or Irish Traveller	0.00%
Prefer not to say	3.53%
Other	2.94%

Those who responded with "Other" mostly described themselves as European, of Polish descent or Asian.

Age range:

0 -15 Years	0.30%
16 – 24 years	1.49%
25 – 34 years	6.57%
35 – 44 years	16.12%
45 – 54 years	22.39%
55 – 64 years	27.16%
65 – 74 years	17.31%
75 and above	8.66%

Sex:

Male	17.11%
Female	79.06%
Prefer Not To Say	2.95%
Other	0.88%

Sexual orientation:

Heterosexual/Straight	82.53%
Gay Man	2.11%
Gay Woman/Lesbian	0.30%
Bisexual	1.20%
Prefer not to say	12.05%
Other:	1.81%

Religion or belief:

Christian (all denominations)	60.96%
No religion	26.73%
Buddhist	0.60%
Muslim	0.00%
Jewish	0.00%
Hindu	0.90%
Sikh	0.00%
Prefer not to say	9.31%
Other	1.50%

Married or in a same-sex civil partnership:

Yes	61.49%
No	27.76%
Prefer not to say	10.75%

Disabled: Section 6(1) of the Equality Act 2010 states that a person has a disability if:(a) That person has a physical or mental impairment, and(b) The

impairment has a substantial and long-term adverse effect on that person’s ability to carry out normal day-to-day activities. Using this definition do you consider yourself to be disabled?

Yes	16.32%
No	76.85%
Prefer not to say	6.82%

Has your gender identity changed from that assigned at birth?

Yes	1.80%
No	90.99%
Prefer not to say	7.21%

Do you look after or give help or support to family members, friends, neighbours or others because of either: Long term physical or mental ill-health/disability; or Problems related to old age?

Yes	55.82%
No	36.12%
Prefer not to Say	8.06%

9. Summary of discussion at the Maelor South Community Council

On 7 October 2025, representatives from Betsi Cadwaladr University Health Board attended the Maelor South Community Council meeting to discuss the future of services at Penley Hospital. The Health Board team — including Andrea Hughes, Dr Cameron Abbott, and Helen Stevens Jones — provided context on the hospital’s temporary closure, outlining the staffing challenges and clinical limitations that had affected the Dyfi Ward. They explained that the transfer of patients and staff to Chirk Community Hospital in December 2024 had created an opportunity to review how Penley could better meet local health and care needs. The engagement process and next steps were shared, including plans for further stakeholder discussions and plans

for further community engagement in November, ahead of a Health Board decision in the new year.

Council members raised a wide range of questions and suggestions, reflecting strong local interest in the future of the facility. Key themes included the importance of local provision, concerns about bed-blocking and capacity, the need for joined-up working with other partners, and the potential for Penley to support rehabilitation, respite, and pre-operative care. There was interest in alternative models such as virtual wards, phlebotomy services, and partnerships with third-sector organisations. Members emphasised the need for inclusive engagement, careful consideration of branding, and a commitment to getting any decision right without rushing.