

The Future of Chase Community Hospital



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Current use of Chase Hospital



The current use of Chase Hospital is:

- Out Patients –Average use of rooms is 40.5%
- Office Bases for clinical staff –not fit for purpose
- Inpatient beds – 12 beds funded but only 7.5 utilised per week

There is an adjacent GP surgery occupying the north east corner of the site.

The hospital was built in 1991, it is relatively modern and in good condition

There are 3 other community hospitals within a 9 mile radius from Chase Hospital:

Petersfield, Alton and Haslemere



Current use continued

Inpatients

1. 'step up' beds, to prevent patients needing to be admitted to an acute hospital
 2. 'step down' rehabilitation for patients who have been in an acute hospital
 3. end-of-life care for patients who choose to die in a community hospital setting
- Challenges
 - Workforce skills and capacity
 - Occupancy bed rates on average 62%
 - New models of care mean greater choice and more relevant to patient needs



Our aims

- To ensure the future of Chase Community Hospital as a sustainable healthcare facility to serve the local population.
- To ensure a long-term future for the site by delivering clinical and cost effectiveness through full utilisation of the site.
- To offer services which are appropriate for and wanted by residents.
- To provide services that won't destabilise other community hospitals in the surrounding areas.
- To ensure Chase Hospital development contributes to the Eco Town Master plan
 - increasing the range of services available to local residents within walking or cycling distance
 - improving the energy efficiency of the building.

Whitehill and Bordon Profile



- Population approximately 14,000 - may increase to 25,000 by 2031
- The population of Whitehill and Bordon need a health care facility:
 - The health of residents is generally not as good as that of residents in surrounding wards
 - People living in rural areas are more deprived than town residents in accessing NHS services
 - Higher proportions of under 16s and older people than the English average

The current usage of Chase Community Hospital does not provide for the health needs of the population of Whitehill and Bordon.

- Up to the 2020s the healthcare impact of the eco-town is likely to be limited meaning time to develop services as needed
- There are transport challenges for local population

Engagement to date

Continual engagement with the following Chase Community Hospital stakeholders has taken place since 2009 to look at how the hospital could be used differently:

- Local GPs
- County Council Representative
- Town Council Representative
- District Council Representative
- League of Friends
- Community Providers
- Patient and Public Representatives
- LINK
- Commissioning Representatives
- Secretary of Badgerswood and Forest PPG
- Public Health
- Capital Planning
- Clinical Commissioning
- Adult Mental Health
- Occupational Therapists / Physio Therapists
- Older People's Mental Health
- BME communities
- Children's and Adolescent Mental Health
- Voluntary Sector
- Social Services
- Whitehill and Bordon Town Partnership
- Pinehill Practice Representative
- Woolmer Practice Representative
- Local voluntary transport providers and HCC



Engagement continued

- Since the summer of 2011, this has included:
- a six-week engagement period (16.05.2011-24.06.2011)
 - plans for engagement were developed with the Stakeholder group – info stands, survey
 - an online survey with more than 200 responses, nearly 80% of which were from Whitehill and Bordon residents
 - five drop-in sessions in the Whitehill and Bordon area
 - 26 May to 16 June 2011
 - 104 people were spoken to and took surveys to complete
 - 58 completed surveys at the session
- Presentations to discuss potential ideas for services at the hospital to:
 - Whitehill Bordon Eco Town Community Facilities and Amenities
 - The Health and Wellbeing Partnership
 - Blackmore and Whitehill Women's Institute
 - Chase Children's Centre



Engagement continued

- Meetings with GPs to discuss bed model and outpatient services
- Stakeholder Engagement Event
 - October 2011 - identify options and agree criteria for evaluating options, information sharing and questions and answers
 - January 2012 - report back on progress since the previous event to illustrate potential feasible options, to shape the options and to listen to people's views
 - March 2012- report back on work undertaken since January, to present findings and outline proposals for new models of care and comment on the shape of the services.
- Meetings with:
 - Councillors and MPs
 - Chase Community Hospital Redevelopment group
 - Whitehill and Bordon Town Partnership and Infrastructure, Transport and Education (Eco-Town)
 - Health and Well Being Partnership Council Meeting
- In depth analysis of local transport providers / services and accessibility to the local population



What did we learn?

1. Leave Chase Community Hospital as it is - which is wasteful and not sustainable for its long-term future
2. Close Chase Community Hospital
3. Re-design services to fully utilise the hospital and put Chase Community Hospital on a firm and sustainable footing

At the March 2012 Stakeholder Engagement event the general consensus was:

- **Re-design services to fully utilise the hospital and put Chase Community Hospital on a firm and sustainable footing.**

Agreements reached with stakeholders



- To ensure stakeholder engagement at the Steering Group
- To reutilise Chase Community Hospital
- Provide services for the local population in the Whitehill and Bordon and surrounding villages as opposed to seeking to import patients
- Not to de-stabilise the surrounding community hospitals in Alton, Petersfield and Haslemere
- Local options for 24 hour nursing care
- End of life care to be provided locally
- Virtual Wards and 24 hour care to be established before the re-provision of bed based care
- Relocation of GP practice on site
- To commission a minor injuries service

Development of the Hospital Site



Outpatients

- Maximise usage of the Outpatients Department providing a range of services:

Current services

- Diabetes clinics
- Podiatry/chiropractic/orthotics
- Mental Health
- Audiology
- Leg Ulcer clinics
- Antenatal/Midwifery Occupational therapy
- Physiotherapy
- Eye clinic
- Rheumatology
- Retinal screening
- Dietician Services for children and teenagers
- Oxygen assessment

Services to be extended

- Contraception and Sexual Health
- Substance Misuse
- Pain
- Wider range of acute services

New services

- Dermatology
- Orthopaedics
- Nephrology (renal)
- Age Related Macular degeneration (AMD)
- Mental Health and Older People's Mental Health clinics
- GP services
- Minor Injuries Service
- Community Clinics including IV antibiotics

Development of the Hospital Site



- Commission a Minor Injuries Service
- Elizabeth Dibben
 - Relocation of Mental Health and Older Peoples' Mental Health teams on site
 - Co-location of Mental Health and community teams for patients with multiple conditions
- Attract a GP on site to enable provision of services such as IV antibiotics

Provision of new model of bed based care



Patients who can be cared for in home environment:

- “Virtual wards” using community teams, occupational therapy, GPs, physiotherapy and nurses will ensure a patient can be cared for in their own home.
- The virtual ward does not require any additional staffing resource to ensure sustainability is achieved.
- Over the last 8 months there has been additional recruitment in alignment with the clinical model

Provision of new model of bed based care



Virtual Wards will be developed:

- all senior staff will attend advanced clinical skills courses
- access to independent prescribing will be provided for the community matron to enhance patient care
- consultant input into the virtual ward to ensure rapid access to appropriate patient care out of hospital
- development of an integrated model of care which is inclusive of primary care, social care, mental health and learning disabilities
- senior nurses will work with local GPs to gain their views on how the virtual wards have worked to date
 - gain a shared understanding of the aims and purpose of the wards
 - aid their continued development

Provision of new model of bed based care



Patients who need 24 hour care outside home environment:

- Community beds are available at Petersfield
 - only a small number expected to be needed
 - for a short period of time whilst a patient is stabilised
 - to allow for equipment and social care packages to be put in place

- Beds in nursing homes as and when required and if appropriate

- End of Life patients will be cared for at home, in a nursing home or hospice.

Development of a new Nursing Home



- The need for a nursing home has been included in the Eco-Town Development Principles.
- There is not sufficient space on the Chase Community Hospital site for development of a Nursing Home.
 - Stakeholders have identified 3 potential sites suitable for a new nursing home:
 - Quebec
 - Viking Park
 - Louisburg
 - All 3 sites are close to the hospital and none of these have been ruled out by the planners.
 - Interest from the private sector in the development of a nursing home in Bordon; this is being taken forward through NHS Hampshire's LIFT partner.

Planned further engagement

- November 2012
 - Public events/drop-in sessions at:
 - Tesco Express
 - Liphook Millennium Hall
 - Forest Community Centre
 - Woodlark pub
 - Liss / Bordon care shop

Planned further engagement



- A new set of display – or story – boards will be developed in consultation with key stakeholders.
- Information flyers and an updated Question/Answer sheet will be developed.
- There will be increased frequency of the Chase *Times* – the online newsletter available to anyone interested in the future of the hospital.
- The local media, which receive the Chase *Times*, will be briefed and regularly updated on major developments to help them keep their readers informed of factual information.
- Briefings to interested parties – individuals and groups – will continue as and when required.
- A designed web page will be set up to keep interested parties informed of any developments on Chase. At present, different documents are held on different websites – and the public need to have a ‘one-stop shop’ for their information.



Next steps and timescales

- Sept 2012 Briefing to HOSC
- Oct 2012 Approval of Outline Business Case
- Nov 2012 Develop Final Business Case and submit planning permission
- Feb 2013 Approve Final Business Case
- Mar 2013 Construction commences at Chase Community Hospital
- Aug 2014 Construction complete
- Nov 2014 Services fully operational at Chase Community Hospital

Summary



There will be:

- a new model of services to be provided at Chase Community Hospital and the development and resourcing of a wider range of community services;
 - increased usage of outpatient services
 - the development and resourcing of the virtual ward model
 - commissioning services from a nursing home in Liss in the short term until a nursing home solution is provided in Whitehill and Bordon
 - the use of a local residential facility in Whitehill and Bordon
- investment in the redevelopment of the hospital building