

# Public Document Pack



**Winchester**  
City Council

<b>Meeting</b>	Health and Environment Policy Committee
<b>Date and Time</b>	Wednesday, 31st January, 2024 at 6.30 pm.
<b>Venue</b>	Walton Suite, Guildhall Winchester and streamed live on YouTube at <a href="http://www.youtube.com/winchestercc">www.youtube.com/winchestercc</a>

## S U P P L E M E N T A R Y   A G E N D A

The following document was not available at the time the agenda was published and so has been published separately here.

Agenda Item.

5. Hampshire Together: Modernising our Hospitals and Health Services) - Presentation (Pages 3 - 28)

City Offices  
Colebrook Street  
Winchester  
SO23 9LJ

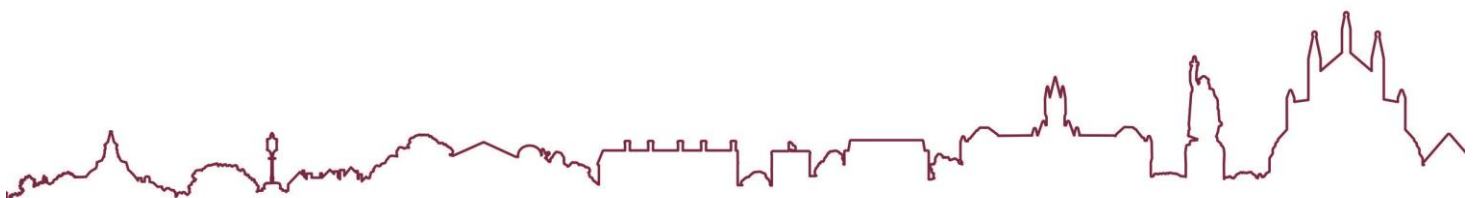
**Laura Taylor**  
Chief Executive

All of the Council's publicly available agendas, reports and minutes are available to view and download from the Council's [Website](#) and are also open to inspection at the offices of the council. As part of our drive to minimise our use of paper we do not provide paper copies of the full agenda pack at meetings. We do however, provide a number of copies of the agenda front sheet at the meeting which contains the QR Code opposite. Scanning this code enables members of the public to easily access all of the meeting papers on their own electronic device. Please hold your device's camera or QR code App over the QR Code so that it's clearly visible within your screen and you will be redirected to the agenda pack.



01 February 2024

Agenda Contact: Claire Buchanan, Senior Democratic Services Officer  
Tel: 01962 848 438 Email: [cbuchanan@winchester.gov.uk](mailto:cbuchanan@winchester.gov.uk)



This page is intentionally left blank

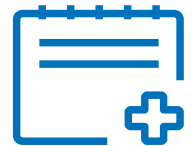
# Our proposals for investment in Hampshire's hospitals

Page 3

Winchester City Council  
Health Environment Policy  
Committee

31 January 2024

*Hampshire Together: Modernising our hospitals and health services* is a joint programme led by Hampshire and Isle of Wight Integrated Care Board and Hampshire Hospitals NHS Foundation Trust.



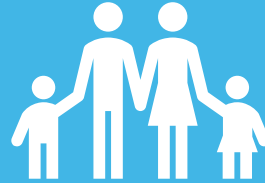
Agenda Item 5



## Introducing the panel



# We have a once-in-a-generation opportunity to improve hospital services for decades to come



Page 5

We are part of the government's New Hospital Programme. We have between £700m and £900m to build a new hospital for Hampshire and refurbish Winchester hospital by 2032

This is a once-in-a-generation opportunity to improve hospital facilities and services for decades to come

We want to use this opportunity to make sure hospital services can meet the needs of local people and attract and retain the best staff

Our proposals have patients, their families and staff at their heart and would benefit everyone in our area



## The case for change



# We are facing a number of challenges that mean we need to change the way services are delivered in Hampshire



Our population is growing and getting older, meaning healthcare needs are changing.



Duplicating services across two acute hospital sites means we can't always consistently deliver great care, because resources – particularly specialist staff – are spread too thinly. This isn't sustainable.



Many of our hospital buildings are approaching the end of their usable lives.



We are facing a worsening financial position. Money spent on duplicating services and patching up old buildings is money that can't be spent on improving patient care.

To address these challenges, we must make changes



# Our approach to developing and evaluating potential options for the future





# We followed a robust, clinically led process to develop our options for consultation



## Engagement with local people and staff

We have engaged with hundreds of staff and thousands of local people about what is important to them. Feedback has informed every step of the process.

## Wider context

Proposals are aligned with national policy and clinical best practice, and supported by other improvements across Hampshire and Isle of Wight to provide:

- more care out of hospital, closer to home
- better join up across health and care services
- faster access to urgent care and specialists when needed

## Clinical model of care for acute services

Sets out how acute hospital services could be better organised to meet future needs

Designed by clinicians with involvement of patients, staff and stakeholders

Rigorously tested by expert panel of external clinical leaders in southeast England

## Options evaluation and governance

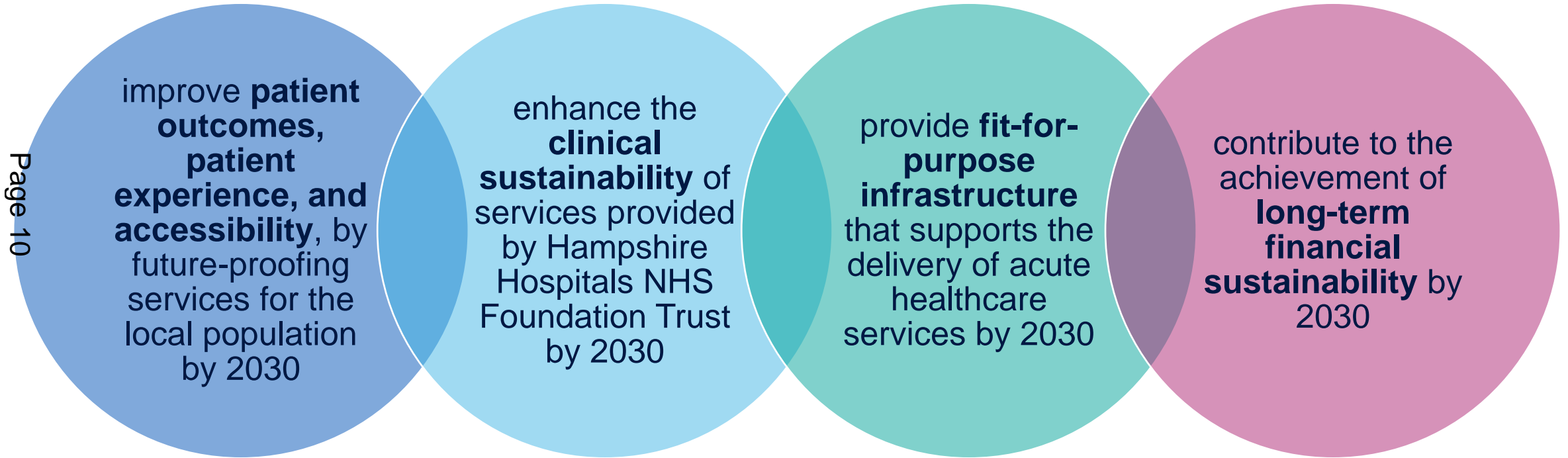
We assessed:

- how we could best implement the model of care
- where services could be located
- potential sites for a new hospital
- a number of options for the future to get to a shortlist for consultation

With a thorough assurance and scrutiny process throughout

# Having developed a model of care and identified potential sites we used consistent criteria to evaluate a long list of options

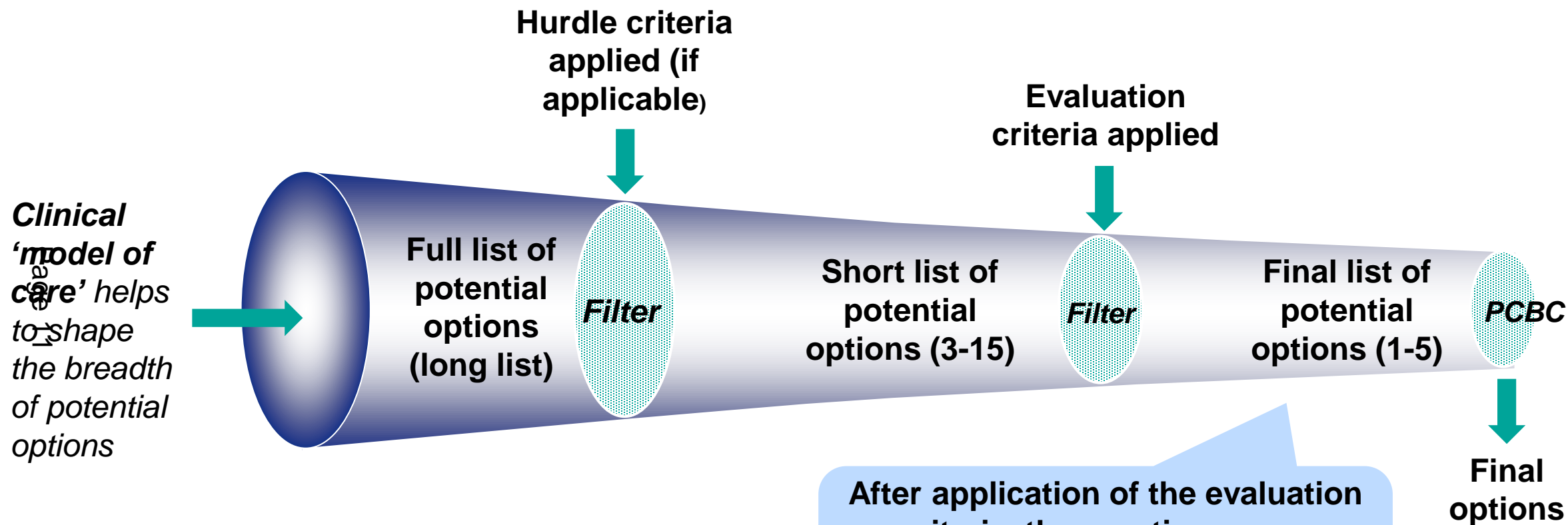
We considered how well each option would:



We also looked at whether the options would meet business needs, affordability, deliverability and value for money.

\* NB: Since the evaluation was done the national timeline has changed and we are now expecting to have a new hospital for Hampshire in the early 2030s

# We followed a robust process to go from a longlist of possible options, to the shortlist of options we are consulting on



You can read about this process in more detail in our Pre-Consultation Business Case (PCBC) which you can find at [www.hampshiretogether.nhs.uk](http://www.hampshiretogether.nhs.uk)

After application of the evaluation criteria, three options were identified as viable options for public consultation

# Our clinical 'model of care' describes how services should be grouped together and could be organised in the future to improve outcomes for patients



## One hospital providing specialist and emergency care - referred to as the specialist acute hospital

- emergency department with trauma unit and children's emergency department
- specialist emergency and inpatient care, e.g. for strokes and heart attacks (as well as other inpatient care)
- emergency and complex planned surgery
- obstetrician-led maternity care, with an alongside midwife-led birthing unit
- conditions to retain a level 2 neonatal unit
- inpatient children's services
- a cancer treatment centre
- outpatients, diagnostics and therapies

Page 12

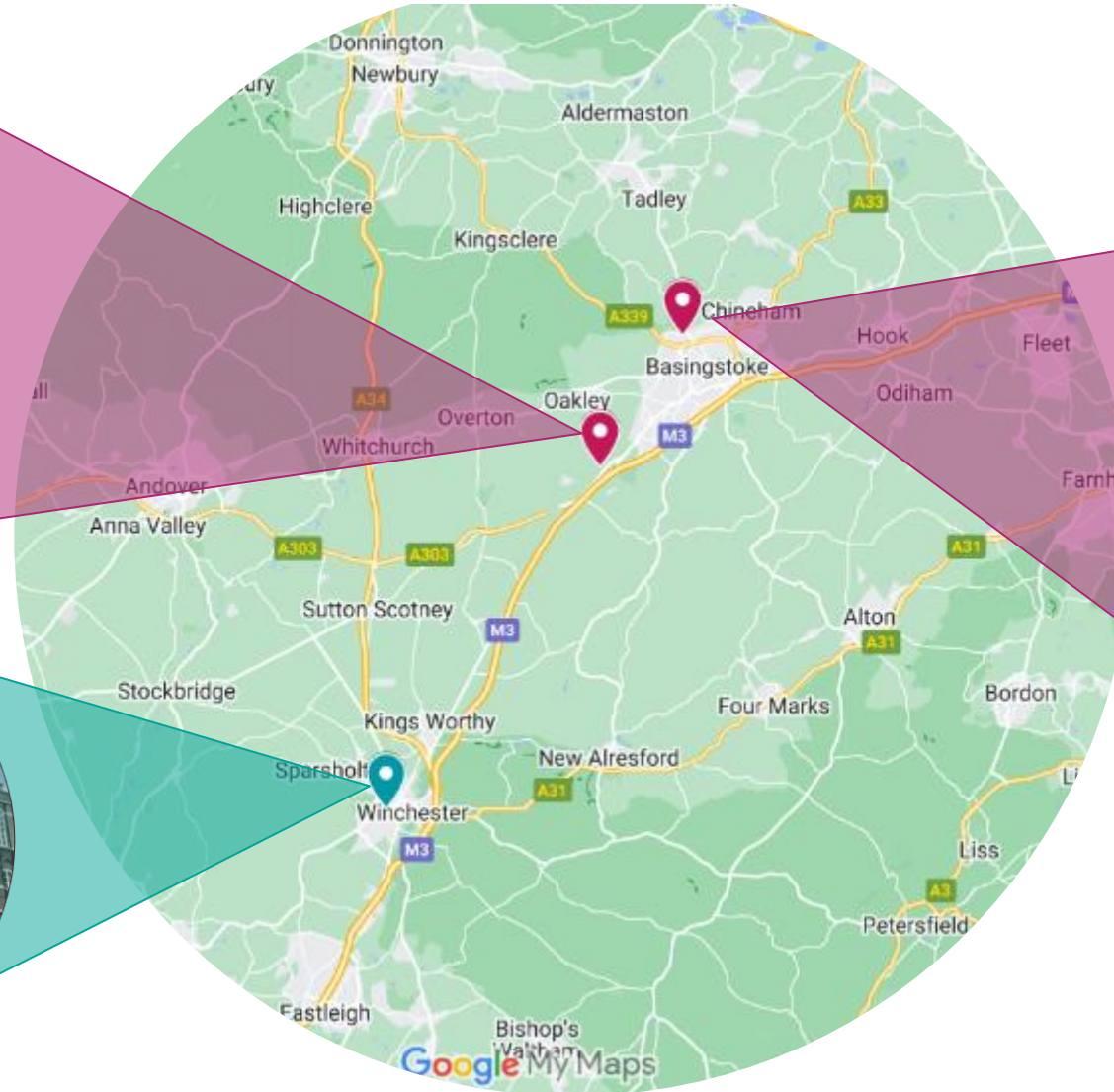
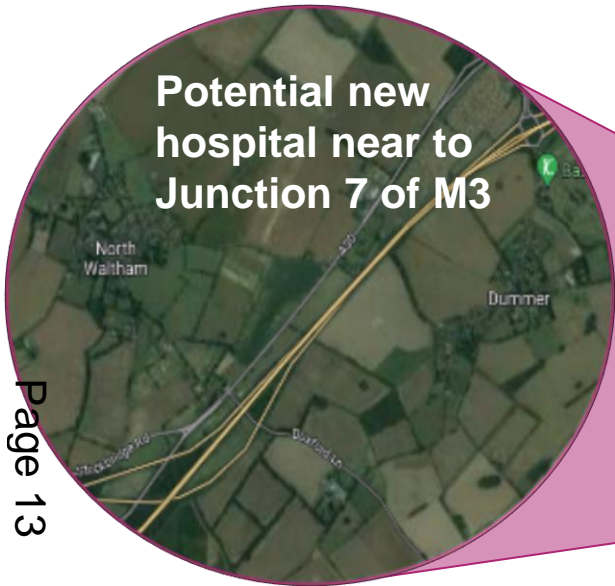


## One hospital with a dedicated planned surgery centre

- a doctor-led 24/7 urgent treatment centre with same day emergency care
- dedicated planned surgery centre providing low risk planned operations and procedures
- step-up and step-down inpatient beds for general medicine and care of the elderly
- a midwife-led birthing unit
- outpatients, diagnostics and therapies

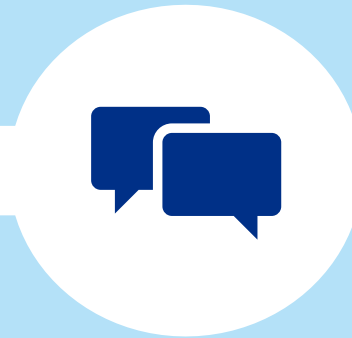


# There are two potential locations for the new hospital – either near to junction 7 of the M3 or on the current Basingstoke hospital site



# The options for consultation

Page 14



## Option 1

New specialist acute hospital on the **current Basingstoke hospital site** and refurbishment at Winchester hospital

## Option 2 (preferred option)

New specialist acute hospital near **Junction 7 of the M3** and refurbishment at Winchester hospital

## Option 3

New specialist acute hospital near **Junction 7 of the M3** and refurbishment at Winchester hospital

### Services at Winchester hospital in all options:

- Doctor-led 24/7 urgent treatment centre and same day emergency care
- Step-up and step-down inpatient beds for general medicine and care of the elderly
  - Dedicated planned surgery centre
  - Freestanding midwife-led birthing unit
  - Outpatients, diagnostics and therapies

### Services at the new specialist acute hospital in all options:

- Emergency department (ED) with trauma unit, children's ED, 24/7 urgent treatment centre and same day emergency care
- Specialist inpatient care e.g. stroke and heart attack and inpatient beds, including for general medicine and care of the elderly
  - Complex planned and emergency surgery
  - Obstetrician-led birthing unit and alongside midwife-led unit
    - Conditions for a level 2 neonatal care unit
      - Cancer treatment centre
  - Outpatients, diagnostics and therapies

### Services at the current Basingstoke hospital site:

- Outpatients, diagnostics and therapies
- Day-case surgery

### Services at the current Basingstoke hospital site:

- Outpatients, diagnostics and therapies
- Day-case surgery
- Nurse-led step-down reablement and rehabilitation beds

# There are common advantages of all three options



Bringing together some specialist services would **improve patient outcomes**, help drive up **safety and quality** and address **workforce challenges**

A new hospital would be built to deliver **modern healthcare**, making the most of **new technology** and **supporting the NHS to achieve its ambition of net zero**

Would **enable new services and facilities**, including a **children's emergency department**, a **planned surgery centre**, a **cancer treatment centre** and two **midwife-led birthing units** (as well as obstetric-led care), and create the conditions to retain **level two neonatal care**

**Separating planned surgery** from emergency care would **help reduce waiting lists and cancellations**

We would continue to provide **outpatient appointments and other day-to-day services at the current hospital sites** (and the new hospital in options 2 and 3)



# Each option has its advantages and disadvantages

## Option 1

New specialist acute hospital on the **current Basingstoke hospital site** and refurbishment at Winchester hospital

- No need to purchase new land
- Has established public transport links
- Less impact on travel times for some people living in deprived areas

- Higher likelihood of people going to closer neighbouring hospitals
- Greater impact on average travel times than option 2 and 3
- Complex build would disrupt current services
- Less opportunity for expansion in the future
- Highest capital cost

## Option 2 (preferred option)

New specialist acute hospital near **Junction 7 of the M3** and refurbishment at Winchester hospital

- No disruption to current care and services
- More opportunity to expand in the future
- Less likely to see patients going to other hospitals
- Less impact on average travel times by car

- Would need to purchase land
- Greater impact on travel times for some people living in deprived areas
- New public transport infrastructure would be needed

## Option 3

New specialist acute hospital near **Junction 7 of the M3** and refurbishment at Winchester hospital

- Same as option 2, plus
- Offers step-down reablement and rehabilitation beds for people living near Basingstoke

- Same as option 2, plus
- Would split nursing workforce across additional site due to beds proposed at current Basingstoke site
- Would need more refurbishment of current Basingstoke site

# Patients will continue to access most services in the same place or closer to home



A significant proportion of appointments and treatments, including for urgent care, would continue to be available in the same place as now, or even closer to home, for example:

Page 18

There are around **570,000 outpatient appointments** each year – these will be in the **same place as now** or closer to home, including via video consultation

Around **81,500 A&E attendances** each year (60% of our total current A&E attendances) could be seen by an **urgent treatment centre** – this includes for children

Around **18,000 people** who regularly attend hospital for **treatments like chemotherapy** would continue to be treated in the same place as now, or even closer to home

While most planned operations would take place at Winchester hospital, **outpatient appointments and pre- and post-surgery care** would continue to be provided locally or virtually

Evidence shows that longer journey times would be outweighed by improved services and faster access to treatment on arrival at hospital

# We know travel times are important to people and we have looked carefully at the impact of the options on travel and access



- Many of the most life and limb threatening services (stroke, cardiac, trauma) are already centralised at a single site and travel times would be similar to now
- Some specialist and emergency services would centralise onto a single site. Now, the maximum travel time for people to access these services is ~45 minutes by ambulance/off-peak car. This would change to ~60 minutes for option 1 and ~50 minutes for option 2
- Travel by car at peak travel times would be slightly longer
- Parking would be available

	Current	Option 1	Option 2 and 3
<b>Average (approximate)</b>	20 minutes	30 minutes	30 minutes
<b>Maximum (approximate)</b>	45 minutes	60 minutes	50 minutes
<b>Percentage of people who can reach the specialist acute hospital within...</b>			
<b>0-15 minutes</b>	26%	14%	5%
<b>15-30 minutes</b>	50%	25%	60%
<b>30-45 minutes</b>	23%	51%	31%
<b>45-60 minutes</b>	0%	10%	4%
<b>60+ minutes</b>	0%	0%	0%

Clinicians agree that longer journey times would be outweighed by improved services and faster access to treatment on arrival at hospital

# We have also looked at the impact on travel times to reach the proposed new planned surgery centre at Winchester



- Only the most complex planned surgery would take place at the specialist acute hospital
- Outpatient appointments and pre- and post-operative care would be provided as close to home as possible
- Some overnight and daycase planned surgery would be provided only at Winchester. Now, the maximum travel time for people to access these services is ~30 minutes by off-peak car. This would change to ~70 minutes under all options
- Services at Andover and Alton would remain as now
- Parking would be available

Page 20

	Current (off-peak)	All options (off-peak)	Current (peak)	All options (peak)
<b>Average (approximate)</b>	20 minutes	40 minutes	25 minutes	40 minutes
<b>Maximum (approximate)</b>	30 minutes	70 minutes	49 minutes	81 minutes
<b>Percentage of people who can reach the planned surgery centre within...</b>				
<b>0-15 minutes</b>	26%	11%	19%	10%
<b>15-30 minutes</b>	50%	26%	47%	22%
<b>30-45 minutes</b>	24%	45%	29%	32%
<b>45-60 minutes</b>	0%	16%	5%	25%
<b>60+ minutes</b>	0%	2%	0%	11%

Evidence from elsewhere shows that separating planned surgery from emergency surgery reduces cancellations, helping to speed up access to treatment and reducing waiting lists

## We are already considering public transport solutions



Currently there is very poor public transport access to current hospital sites from many areas in Hampshire



There is no public transport to the proposed site near Junction 7 of the M3 as currently there is little reason for people to travel there



Therefore, we are focusing on working with Hampshire County Council to look at what public transport solutions may be needed and could be developed in the future

# How to get involved and respond to the public consultation



# There are lots of ways to find out more, get involved and share your views



Visit our website

[www.hampshiretogether.nhs.uk](http://www.hampshiretogether.nhs.uk)



Read our consultation document



Invite us to your group or meeting



Talk to us at our events



Complete the consultation questionnaire



Contact us

## The areas we are asking people to think about

- Whether there are clear reasons to make changes to hospital services in Hampshire
- What you think of our proposed model of care
- Which of the potential locations you think would be best – if either of them - for the new hospital for Hampshire
- What you think about the options we are consulting on
- What you think the advantages and disadvantages could be and how could we reduce any negative impact
- If there any other options, solutions, evidence, or information we should consider before making our final decision.





# What happens next?

Public consultation runs from 11 December 2023 for 14 weeks until midnight on Sunday 17 March 2024



Consideration of the responses to consultation alongside other evidence (clinical, workforce, estate, financial etc.)



Page 25

Development of a 'decision-making business case' later in 2024, and a decision on which option to implement



Construction of the new hospital and detailed implementation planning to make the agreed changes, with ongoing engagement with patients, carers, staff, stakeholders and local communities



We expect to open the doors to the new hospital in the early 2030s

Consultation  
closes at  
midnight on  
Sunday 17  
March 2024

- Email: [hiowicb-hsi.mohhs@nhs.net](mailto:hiowicb-hsi.mohhs@nhs.net)
- Phone: 0300 561 0905
- Post: Freepost HAMPSHIRE TOGETHER
- Website: [www.hampshiretogether.nhs.uk](http://www.hampshiretogether.nhs.uk)

# Questions and discussion

Page 27



This page is intentionally left blank