

BRACKNELL FOREST COUNCIL

Decision Committee:	Overview and Scrutiny Commission
Date:	29 February 2024
Title:	A new hospital to replace Frimley Park Hospital
Report From:	Frimley Health NHS Foundation Trust

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Purpose of this Report

1. The purpose of this report is to update the Commission on the recent public engagement undertaken by Frimley Health NHS Foundation Trust and the Frimley Integrated Care System (known as NHS Frimley) on the development of criteria to evaluate a shortlist of possible sites for a new hospital.

Recommendation(s)

2. Members are asked to note the need for a new site location for the replacement Frimley Park Hospital and the key findings in the new hospital public engagement report.

Executive Summary

3. Frimley Park Hospital needs to be replaced by 2030 because it was built in the 1970s using Reinforced Autoclaved Aerated Concrete (RAAC), which makes up around 65 per cent of the current hospital.
4. Building on the current site is not a viable option. It would require a phased demolition and rebuild on an already congested site, causing significant disruption to our patients, staff, and hospital services, as well as being more expensive. Most importantly, however, it would be impossible to complete a phased build by the 2030 deadline.
5. We are actively looking at alternative locations for a replacement for Frimley Park Hospital.

6. The Trust developed draft site evaluation criteria and has sought the views of patients, staff, volunteers, local communities and other stakeholders on what is important about the site for the new hospital, and why.
7. The Trust opened this initial public engagement period on Thursday 24 November 2023 and closed it at midnight on Sunday 7 January 2024.
8. Recognising that the location and/or time of in-person events may not be convenient for everyone, particularly those who travel further to visit the hospital, virtual Q&A events were arranged. In addition, communications activities throughout the engagement period directed people towards an online survey to provide their views and feedback, which were also captured during in-person engagement events. A total of **3,399** online responses were received.
9. The majority of people responding to the online survey were members of the public (72%), followed by Frimley Health NHS Foundation Trust staff (25%). There was a good cross section of demographics responding to the survey, broadly representative of the local area.
10. The Trust commissioned a local research agency to produce an independent report on the findings of the public engagement and to highlight key themes.
11. Information about how the feedback has been considered and next steps for the new hospital project will be summarised in a public document and published in the spring.
12. In recognition of FHFT's main catchment covering three local authority areas, it is for the local scrutiny committees to decide to form a Joint Health Overview and Scrutiny Committee in line with The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 – regulation 23 (1) and 30(5).

Contextual information

13. We are delighted that we have been included in the government's New Hospital Programme, which will see us build a new state-of-the-art replacement for Frimley Park Hospital by 2030.
14. Frimley Park Hospital needs to be replaced because it was built in the 1970s using Reinforced Autoclaved Aerated Concrete (RAAC), which makes up around 65 per cent of the current hospital.
15. The Department of Health and Social Care requires the NHS to stop using hospital buildings constructed from RAAC by 2035 but has set a deadline of 2030 for the seven most affected hospitals, which includes Frimley Park.
16. This is an incredibly challenging timescale and we are progressing a number of workstreams at significant pace, working closely with our NHS partners, local

authorities, patients, communities and staff to ensure that the new hospital is ready by 2030.

A new site for the new hospital

17. Our current hospital has around 7,000 RAAC planks, including in some of our most critical areas: operating theatres, the intensive care unit, wards, and corridors. These are constantly monitored and safety works undertaken to ensure that we maintain a safe environment.
18. Alongside our clinical teams and advisors, we considered whether attempting to build a new hospital on our current site was a viable option. However, it would require a phased demolition and rebuild on a site which is already congested, causing significant disruption to our patients, staff, and hospital services, as well as being more expensive. Most importantly, however, it would be impossible to complete a phased build by our deadline of 2030.
19. Due to the safety imperative to rebuild the hospital, we identified a 'preferred way forward' which is to have a new hospital on a new (yet to be identified) site that can deliver improved patient care and experience and meet the future health and care needs of the local and wider population.
20. In addition to the issues with our infrastructure, our current site does not meet the modern standards in hospital design. Moreover, we cannot provide the standard of care for our communities that we want to.
21. We know that we can improve these areas through a new development:
 - separating the flow of people through the building where possible: this will help patients and staff get where they need to be, as quickly and easily as possible
 - operating unplanned emergency services and planned services on the same site, but separately, which helps us to maintain capacity for planned care
 - significantly increasing the number of single rooms, which will meet modern hospital standards and improve privacy and dignity for our patients and take on board learnings from the COVID-19 pandemic around improved infection prevention and control
 - reducing infection prevention and control risks caused by our current high number of bedded bays which don't meet the modern requirements for bed spacing
 - consolidating our outpatient areas to make the best use of the space available to us, which will also minimise the amount of unnecessary walking around the site for our patients and staff

- locating all our planned surgery in the same place, making our services more efficient
- making sure appropriate clinical services are located next to each other to support the sharing of expertise and streamlining joint working to provide the highest quality clinical care, for example making sure vascular, cardiology and stroke services are adjacent to each other
- ensuring our offices and other supporting accommodation are located in the most appropriate space to support our clinical services
- improving all our environments for our patients, their visitors, and our staff and volunteers
- improving our digital infrastructure, including providing services virtually for those patients who do not need to attend an appointment in person
- improving energy efficiency and sustainability through supporting the ambition to deliver 'net zero carbon' for the replacement hospital
- create efficiencies in procurement and construction through use of modern methods of construction.

22. NHS capacity and demand modelling shows that the new hospital will need to have more beds and a footprint twice as large as the current hospital to accommodate more single rooms – developing a new hospital on a new site also allows for growth in the future and would enable us to improve integrated working by potentially enabling some of our partners to join us on the site.

Evaluating possible sites for the location of a new hospital

23. The Trust undertook a period of public engagement on the development of the site evaluation criteria.
24. The aim of the engagement was to collect a wide range of views on how to best evaluate potential sites, whether the identified criteria required further refinement and if anything was missing from them.
25. Information about how the feedback has been considered and next steps for the project will be summarised and published in the spring.

Promoting the engagement period

26. Throughout the engagement period, the Frimley Health and the NHS Frimley communications and engagement teams rolled out a thorough engagement plan to promote the engagement opportunities.
27. This included use of the full range of core networks and channels (such as press release, websites, social media, emails), as well as WhatsApp promotional messages and voice notes to community and faith leaders. Partner organisations and MPs were requested to promote the engagement through their channels, and information was emailed to Frimley Health's Foundation Trust membership. Collateral (flyers, posters and pull-up banners) was circulated within the local community - across Frimley Health site locations, community centres and local shops.
28. To ensure engagement activities reached as many people as possible, demographics that were less responsive to the survey were targeted with paid for social media adverts, and further engagement was undertaken with local community groups.

Engagement activities

29. An online survey on the draft criteria was developed to ensure the Trust heard from as many patients, communities, and staff as possible.

This comprised 16 questions in total – with 10 specifically about the criteria, which itself included seven free text questions.

The survey, information, FAQs and an online exhibition were hosted on an online portal provided by the NHS Frimley. It was also available on the Trust's website and internal intranet.

30. Various public in-person and virtual listening events were held:
 - Two in-person engagement events were held (one during the afternoon and one in the evening). Participants were given the opportunity to find out more about the project and join facilitated breakout sessions with scribes to note down all discussions related to the criteria.
 - Two virtual events (one at lunchtime and one in the early evening) were held with a presentation followed by a Q&A with the new hospital project's senior responsible officer (SRO) and director of communications and engagement.
 - An in-person drop-in session was also held in an evening, providing a chance for the public to find out more about the plans and draft criteria and ask questions, or raise concerns, directly with the project team.

31. The Trust engaged with existing groups and forums and ran pop-up information stands in key community locations:

- The Trust attended existing groups and forums to provide relevant and accessible information for discussion and dissemination, and to ensure opportunities to engage with the work was provided in key meetings.
- Eight pop-up information stands were set-up in foyers across NHS sites and in community hotspots (such as shopping centres, garden centres and leisure centres) in Bracknell, Surrey and Hampshire, providing opportunities to discuss the project and promote the online survey. The Trust's communications and engagement team was supported by governors at some of these pop-ups.

32. Two all staff events were held by the Trust and the project team joining numerous existing internal meetings:

- Frimley Health staff were invited to attend in-person and virtual events to support the development and refinement of the criteria and to hear more about the project. This included the opportunity to vote online on various aspects to do with the criteria using 'Mentimeter', an online platform that allows for real-time feedback.
- The project team joined numerous existing internal meetings and events to discuss the new hospital and to encourage people to complete the online survey.

Responses and findings: online survey

33. The Trust commissioned a local research agency to produce an independent report on the findings of the public engagement and to highlight key themes.

34. A total of **3,399** online responses were received between Friday 24 November 2023 and Monday 8 January 2024.

- The majority of people responding were members of the public (72%), followed by staff at Frimley Health NHS Foundation Trust (25%).
- There was a good cross section of demographics responding to the survey, broadly representative of the local area.
- Two-fifths of respondents lived in North East Hampshire and Farnham (39%), with three in 10 living in Surrey Heath (31%). One in five respondents lived in Bracknell (19%) and 3% in Royal Borough of Windsor and Maidenhead (RBWM). The remaining respondents lived elsewhere (8%).

- These proportions closely reflect the population that Frimley Park served in 2023: Hampshire: 41%, Surrey: 37%, Bracknell Forest: 17%, RBWM: 4%
- The majority of respondents were white (94%). Recognising the importance of engaging all segments of the community, the Trust and NHS Frimley communications and engagement teams implemented targeted efforts to engage ethnic minorities. Proactive measures, such as reaching out to community and faith leaders via WhatsApp and engaging Chaplaincy teams, were employed. These leaders were asked for their support in sharing the online survey within their networks.
- In light of the feedback and recognising the imperative to further enhance equity in engagement, the Trust and NHS Frimley are dedicated to creating more opportunities for underserved communities to participate in the project. A set of guiding principles designed to guide the communication and engagement processes for equality, diversity and accessibility is currently in development. Comprehensive local population health data, encompassing factors such as ethnicity, gender, geography, deprivation, and health status, forms the basis of our data driven approach. This ensures that our engagement efforts are tailored to the unique needs of the diverse Frimley population.
- Future initiatives include inviting community and faith leaders to one-to-one briefings, fostering a deeper and more personal connection with these communities and working with well-established community groups and charities. This commitment underlines ongoing efforts to ensure that the voices of all members of our community are listened to and considered as part of the development of the new Frimley Park Hospital.

35. Site location – key findings include:

Respondents from all areas said that access by car was the most important criteria when considering site location. This was followed by distance from the current site and access by public transport. One quarter said that all criteria listed were equally important. For NE Hants/Farnham, access by public transport (33%) was more important than distance from the current site (31%).

The main reasons given for saying each of the listed site location criteria were important centred mainly around accessibility. When asked what site location criteria was missing from the list provided, the main ones were about car parking – even though it was part of the criteria listed, respondents thought it was worth mentioning as its own separate entity.

36. **Planning and restrictions – key findings include:**

Half of respondents from all areas (47-51%) said that all the listed criteria were equally important when considering planning and restrictions around the new site. Of those providing a specific criterion, most from all areas said the expansion potential (35% - 45%).

The main reason why criteria was mentioned as most important regarding planning and restrictions concerned the thought of future proofing the new site given population demands.

Car parking was thought to be missing from the list of key criteria when considering planning and restrictions for the new site, followed by the availability of appropriate land.

Purchasing the site – key findings include:

Two-thirds of respondents from all areas thought that all the site purchase criteria listed were equally important.

When asked for reasons why they had rated specific purchase criteria important, the main reason from all areas was to consider appropriate land.

Responses and findings: Engagement sessions

37. A number of formal and informal engagement sessions were conducted with staff and stakeholders, members of the public and the local community. We have listed the key points and themes that arose from those sessions.

38. 562 people joined the all-staff engagement sessions, and 106 joined the public online and in-person sessions.

39. Key themes from the engagement with members of the public include:

- **Access to key highways:** Distance from the site for both ambulance access and the impact the surrounding area may have on journey times, therefore the distance from key highways to improve access and journey times is key.
- **Parking:** People want to see more investment in parking and car parking circuits; bus companies should be partnered with to improve park and ride if parking nearby is an issue.
- **Road infrastructure:** The road infrastructure needs to be considered to ensure that accessing the hospital does not cause excessive traffic for residents and the surrounding area.

- **Sustainability:** Consideration on the impact of pollution by the new hospital; this included pollution from increased traffic in the area, and increased noise/light pollution from more traffic in the area.
- **Building structure:** Questions on the height of the building; some were concerned that the hospital may be built too high and would like to see more clarity on the proposed plans.

40. Key themes from the engagement with staff members include:

- **Sustainability:** Ensuring the new site will focus on being sustainable in terms of net zero and its transportation links and active travel.
- **Parking:** There should be a park and ride to reduce traffic, but adequate staff parking should also be reiterated as it should be available for all staff, not just a proportion.
- **Access:** multiple access points so that delivery trucks, ambulances, staff and patients are not utilising the same access point.

Next steps

41. Information about how the feedback has been considered and next steps for the new hospital project will be summarised in a public document and published in the spring.
42. The Trust and NHS Frimley will support the Joint Health Overview and Scrutiny Committee, that is being proposed elsewhere on this meeting's agenda, to ensure it is able to begin scrutinising the new Frimley Park hospital processes and plans as soon as feasible.

Conclusions

43. Potential sites are being identified based on the final evaluation criteria.
44. The Trust will continue to engage with the public, patients and staff to ensure its communities remain up-to-date with the latest news and updates on the new hospital project.
45. Recognising the Trust needs to move forward with plans to identify a preferred site swiftly, it will continue to engage with overview and scrutiny committees separately until the Joint Health Overview and Scrutiny Committee has been formed.