

# Salisbury Campus Scheme - Elective Care Centre Briefing to the Wiltshire Overview and Scrutiny Committee

## 1. Introduction

- 1.1.1.Salisbury NHS Foundation Trust is seeking capital funding to reprovide its current day surgery unit (DSU) which is a time-limited building. Replacing the current facility with an elective care centre (ECC) will provide local people with access to high quality day surgical care in a purpose-built environment. It will allow SFT to deliver more effective ambulatory (with no overnight stay) care, to offer more procedures on a daycase basis than is currently the case and to increase the volume of surgical care offered to local people.
- 1.1.2. The Trust is progressing a strategic outline case (SOC) which is the first (of three) business cases required to be produced. The current estimates of the capital required is £41m and at the current time there is no agreed funding route for this investment.
- 1.1.3.At this initial stage, we are seeking the views of the Wiltshire Health Select Committee on how they would want to be engaged in this scheme and the extent of consultation required given the level of change proposed in the scheme.

# 2. Case for Change

# 2.1. The Current Facility

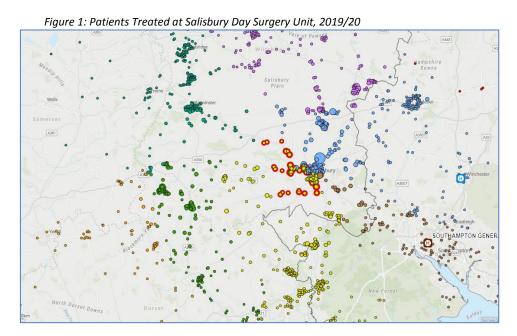
- 2.1.1.The Salisbury Hospital site is large at 21 hectares, but is sprawling and inefficient to run and has many buildings from the 1940's still being used for clinical services. The Trust has developed a long term vision to transform the site and use it much more effectively known as the campus programme.
- 2.1.2.The highest, most pressing, estates risk for the Trust is posed by the day surgery unit (DSU), a facility which is end of life and from which it is increasingly challenging to deliver high quality surgical care to local people. The immediate priority for the Trust is to replace the facility with an elective care centre (ECC) this would offer additional day surgery capacity within a ringfenced elective surgical centre providing planned surgery on the Salisbury site.
- 2.1.3.The current DSU comprises six theatres (four general anaesthetic, two local anaesthetic) and each year about eight thousand are treated each year. All the main surgical specialties are represented. The proposed new facility would continue to cover all these surgical specialties and would increase to six general anaesthetic theatres (no local anaesthetic theatres).
- 2.1.4.The ECC scheme is designed to meet the urgent need to replace the current, failing modular building which is already beyond its expected economic life and that does not comply with key standards. The resilience of the building is compromised and a replacement must be planned as a matter of urgency. This is essential to ensure the resilience of planned care services for the patients of south Wiltshire, north Dorset and west Hampshire.



- 2.1.5. The current layout and environment impacts on the staff and patient experience there are insufficient facilities for children, limited, and very small, side rooms, challenging spaces for bariatric patients and for spinal patients.
- 2.1.6. The new ECC will provide a high quality, high throughput environment, supporting the Trust in achieving higher performance for the proportion of daycase surgery and reducing waiting times. It will have the benefits of a standalone facility (separated from emergency pressures, with no overnight beds) yet will be linked to the acute hospital to allow clinical teams to extend the boundaries of daycase surgery. Such an approach is endorsed by the Getting it Right First Time (GIRFT) initiative and the British Association of Day Surgery (BADS).
- 2.1.7. The improved facilities will include children only environments and expanded rooms to meet the needs of patients.
- 2.1.8. Waiting lists have risen during the covid-19 pandemic crisis and increasingly there is, and will be, a system-wide approach to the management of how waiting lists are managed and waiting times are reduced. Within this system approach the requirement for high throughput, high quality daycase provision will drive reductions in waiting times for planned care as it offers highly scheduled operations which are protected from the impact of emergency care. Increasingly, patients find this method more reassuring, as well as appreciating the convenience of having their surgery and recovering at home.
- 2.1.9. The Trust is already undertaken substantial improvement work to enhance the delivery of planned care and meet the challenges of the elective backlog. The planning for a new ECC sits well alongside this.

# 2.2. SFT Catchment Area for Day Surgery

2.2.1. The figure below shows the catchment area for patients who were treated at the day surgery unit in the 2019/20 financial year accurately reflecting the wider catchment area for SFT.





2.2.2. The image below shows travel times to Salisbury Hospital at off peak travel times reflecting the challenges of accessing the hospital from some geographical areas.

Royal United Hospital

Basingstoke And North Hampshire Hospital

Salisbury District Hospital

Southampton General Hospital

Poole General Hospital

Poole General Hospital

Figure 2: Off Peak Travel Times to Salisbury Hospital

### 2.3. Strategic Context

- 2.3.1.The scheme fits well with NHS plans, both immediate and longer term. There is a strong intent to reduce waiting list and waiting times. Daycase surgery is an important element of that initiative, as it allows planned surgery to proceed even at a time of high emergency demand.
- 2.3.2.Linked to this, there is a focus on what is called high volume, low complexity (HVLC) cases which stresses the opportunity that many procedures can be performed without a patient having to stay in hospital overnight.
- 2.3.3. The scheme is emerging at a time when there is a strong focus on system working with an emphasis on collaboration at scale with integration at place. This is reflected in the Trust's strategy and through the Acute Hospital Alliance (AHA) the Trust is working with other secondary care providers in BSW to produce a truly collaborative approach to system wide issues.
- 2.3.4.Throughout the development of the business case, we have engaged with BSW and the local Wiltshire locality and the Trust has received considerable support for the project. Formal approval for the business case has not been sought from commissioners in advance of agreement on funding.
- 2.3.5. The scheme is an established part of the BSW estates strategy since the resilience of the Salisbury DSU is well understood by partners.
- 2.3.6. The scheme will assist with the Trust's sustainability aspirations the current building is not able to meet modern standards of insulation.



#### 3. The Proposed Scheme

#### 3.1. Elective Care Centre (ECC)

3.1.1. The scheme in development to replace the day surgery unit will create an elective care centre in the north east of the site on the current car park number eight. It will have a link over the hospital road into the main hospital site, for the movement of staff, equipment and, more rarely, patients, but will essentially be a standalone building as per figure 3 below.

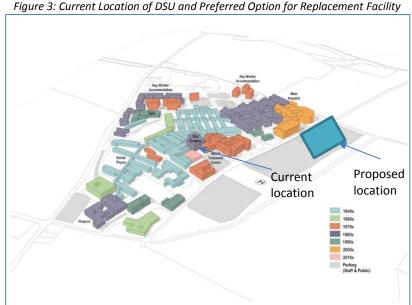


Figure 3: Current Location of DSU and Preferred Option for Replacement Facility

3.1.2. The current cost estimate for the scheme is £41m and at the current time there is no line of sight on sources of funding.

#### 3.2. Wider Campus Project

- 3.2.1. The elective care centre is part of a wider campus programme which looks to make substantial improvements to the whole site, as well as making wider changes that will involve other services potentially coming on site. This is called the campus project.
- 3.2.2. The campus programme is a hospital-led project that plans to combine new education, training and research capacity, in addition to the new hospital facilities, and embracing the best of modern technology
- 3.2.3.As an anchor institution Salisbury Hospital can create additional educational, economic, social, infrastructure and environmental benefits as well as health. As one of the city's largest employers, with over 4,000 directly employed and a further 2,000 in the supply chain, the hospital is pivotal to the local and regional economy.
- 3.2.4. The Trust, and its partners, are currently in pre-app discussions with Wiltshire planners and have kept the Council briefed on their wider plans.

#### 4. Public Engagement To Date

4.1.1. The Trust has undertaken two engagement events with local residents on the wider campus programme, of which the day surgery unit replacement forms a part. In March



2019 the Trust undertook two days of consultation with local people about the need for change and the areas being considered to make better use of the Salisbury hospital site. The response was overwhelmingly positive and supportive, with a real desire to see change. Although early on in the process, the support from those who attended the two events was universal, with the most common reasons for supporting the project being:

- education opportunities
- modernising the hospital,
- · community and city benefits
- sustainability and future proofing
- 4.1.2.In response to that feedback, the Trust has prepared a masterplan view of how the hospital site might develop. That vision was described in a further public engagement event in August 2020, which again received an extremely positive response.
- 4.1.3. The Trust will continue to fully engage and involve local people, key stakeholders and the local planning organisations in the next steps to deliver the proposed future model for planned care. The aim of the engagement activity will be to ensure the project continues to engage and involve local people, and key stakeholders as more detailed plans are developed and to highlight any potential differential impact on any protected groups for further consideration.
- 4.1.4. The approach to engagement will be inclusive and will include a range of opportunities for the public and stakeholder groups to provide their input and insight. Patient involvement and co-design in the development of the elective care centre will be absolutely vital to ensure that the emerging design of the building reflects public expectations. This work in relation to the elective care centre will begin at the very earliest stages of the scheme so that the input received will influence the emerging design from the outset.
- 4.1.5. The public engagement will extend beyond the building in terms of access, and transport to the site as well as parking arrangements. It will also continue with the wider engagement with local people on the development of the whole campus scheme and the planning consents that will need to be formally consulted on.

### 5. Conclusion

- 5.1.1.From a development perspective, the Trust is at a fairly early stage. We are developing the best possible business case in order to be well placed should funding become available which the business case would be deployed to bid for. As part of that process, we would like to seek a view from the Wiltshire Health Select Committee on the future engagement it would like to see from Salisbury NHS Foundation Trust as the scheme evolves.
- 5.1.2.In particular, we would like to see an initial view from the Health Select Committee on whether this scheme would constitute a substantial reconfiguration and therefore would require the Trust, and the health system, undertaking formal consultation on the changes proposed.

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