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INTRODUCTION

A hospital holds a special place in the hearts and minds of the community it serves. No-one wants to be ill or injured enough to go there – but everyone wants it to be there for them when they need it. The challenge for the NHS today is to transform the pattern of care that hospitals have traditionally provided, in order to meet the future needs of a population that is growing, getting older, and has increasing expectations from medicine.

Whipps Cross occupies that special place for the people of Waltham Forest and Redbridge. The hospital existed long before the NHS was created, and its Victorian buildings and long corridor are distinctive parts of the local landscape. It is one of the biggest local employers, and every day almost 1,800 patients pass through its doors – as well as numerous relatives, friends and other visitors.

Those patients overwhelmingly say they are happy with the care provided by our staff. They commend the compassion, friendliness and emotional support offered by our doctors, nurses and other professionals. Yet they are also well aware of the limitations of the ageing, sprawling estate, and their feedback on facilities is understandably negative. These mixed feelings underpin the ground swell of public support for a brand new Whipps Cross hospital. Over 3,000 people signed up to Waltham Forest Council’s campaign in 2018. The Government has now committed investment to make this happen between 2020 and 2025 in a first wave of hospital building.

The redevelopment of Whipps Cross is a once-in-a-lifetime opportunity to design a new hospital from scratch. It is also a unique chance to be at the forefront of national efforts to transform how healthcare is provided for local people, as set out in the NHS Long-Term Plan. Our vision is for a new hospital within a wider health and wellbeing setting, alongside new homes, leisure, culture and other community facilities.

The Barts Health group and its local partners are sharing some early ideas about the potential site of a new hospital, the services it will provide, and the scope of the building. We want to hear what staff, patients, residents, community groups and members of the public think about them. Your feedback will help us develop a robust business case for a new hospital to bring our vision to life.

Alastair Finney
Whipps Cross Redevelopment Director
Whipps Cross Hospital is a cherished part of the local community it serves, and has been for over 100 years. As a result it has some of the oldest hospital buildings still in use in London, spread across a large area. Neither the buildings nor their layout are suitable for delivering the modern services that patients, staff and the public deserve.

Over 40% of the estate pre-dates the NHS, more than double the national average. We would need to spend £88million just to maintain the buildings in an acceptable condition (one of the biggest maintenance backlogs in the country). The 18-hectare site is the size of 25 football pitches, and facilities on it have grown piecemeal over the years.

A new hospital will bring services together, reducing the area of land needed and releasing a large amount of land for other purposes, providing benefits to the local community. That’s why the Barts Health group, Waltham Forest Council and other local partners issued a concordat in 2016 setting out our joint vision for the future.

We agreed to work together for a new state-of-the-art hospital, providing all the core services it does today – such as A&E and maternity – within a wider health and wellbeing setting alongside hundreds of new homes, leisure, cultural facilities and more. Developing the whole site is important because a new hospital would not be affordable without making better use of land that is not needed for it. This vision underpinned an initial strategic case for a combined development in 2017, and has led to discussions with the NHS about how it could be realised.

In 2018 our plans were endorsed by the East London Health and Care Partnership (ELHCP), the strategic NHS body that brings together local boroughs, trusts and clinical commissioning groups. It made the redevelopment of Whipps Cross its top priority for capital investment. The NHS nationally gave the go-ahead to continue developing a business case for Treasury approval.

A project team based at Whipps Cross has commissioned expert advice, consulted clinicians and other staff, and engaged with interested parties (including community groups) about our plans. Now in 2019 the Government has backed the case for investment. This is an ideal point to share the progress we have made so far and further engage local people in the next stage of this exciting journey.

1 This concordat was renewed in May 2019. It is included on page 16.
A theme of the NHS Long-Term Plan is for local areas to work together to provide integrated services spanning hospital and community settings, so patients can receive more joined-up care closer to home. Local organisations are responding to this vision through the ELHCP.

The partners believe the redevelopment of Whipps Cross will be the catalyst for different teams to work together on delivering holistic care to the local population. It will enable them to design new clinical pathways in response to patients’ needs, to develop a diverse range of support for patients, carers and families, and deliver all this through innovative workforce models that draw on the strengths of all our organisations.

In Waltham Forest itself, clinical commissioners and the local authority are finalising an integrated care strategy that challenges local organisations to work together to enable 275,500 residents to start well, live well, stay well and age well. For GP and other primary and community services this means:

- Enabling generally-well people to stay healthy, understand risks to their health, and obtain prompt clinical support for urgent same-day concerns
- Helping those with long-term conditions manage their care, enjoy a full and active life, and not deteriorate
- Supporting those with the most complex needs or disability to stay out of hospital; but when that is unavoidable, support them to return home as soon as possible

Important common elements are to ensure care is consistent, simple to access, and provided at the appropriate level. Work is under way to develop these new models of care in more detail and transform people’s experience of primary and community care in the borough. This will translate into specific proposals for developing additional out-of-hospital capacity, in terms of both buildings and workforce.

Our collective aim is that people feel supported by their local NHS and social care providers, and are visited by friendly faces familiar with their needs. They will be involved with all decisions made about their care. They will have one phone number to call, and be confident that it gets the help they need. Their wider health and social needs will be understood and they can easily access community support. And they will be assessed by an expert and get a specialist opinion or diagnostic results without having to go to hospital.
Whipps Cross is a busy, popular local hospital with a full range of acute services. The Barts Health group is committed to ensuring that a new hospital will continue to provide emergency and maternity care for the local population.

We took the opportunity of the redevelopment to work with clinicians, GPs and other local health and care partners on a health and care services strategy for the hospital. This was a chance to look afresh at how best to provide healthcare in the future, in line with the aspirations of the national NHS Long-Term Plan. Working alongside our local health and care partners, we looked at how best to meet the future needs of our population in a way that facilitates care closer to home and reduces unnecessary overnight stays in hospital.

We took into account projections that the local population in the area served by Whipps Cross is due to grow by 11% over the next decade. Within that overall growth, the number of people aged over 65 is expected to increase by a quarter. Our clinicians believe that modern advances in medicine, care and technology mean fewer people need to visit hospital, or spend so long there in future. Nevertheless, we also need to plan for a substantially larger number of older people than today.

Our emerging conclusion is that a brand new modern hospital should have the same range of acute services as now, yet provide improvements in the quality of care, with faster and more convenient access for patients. A new Whipps Cross hospital will therefore continue to provide all the core services currently offered, including A&E and consultant-led maternity care.

However, many of these services could be delivered differently from the ways they are now. Our clinicians have agreed to adopt a new model of care as standard across different clinical pathways. Implementing that would mean:

- faster access to appropriate and specialist treatment
- rapid diagnostic tests and same-day results
- better care co-ordination, with more care closer to home

The idea is that at the point of entry to hospital, a senior clinician would assess patients and direct them towards the right treatment, with appropriate diagnostics. People with particularly complex needs would be identified early and assigned a care co-
ordinator. Multi-disciplinary teams within the hospital would work with GPs, mental health practitioners and others in the community to ensure care is joined up. And every pathway would adopt digital solutions such as shared care records and virtual appointments.

Although the strategy was devised for a new hospital, it equally applies to the old one too. Elements of the new way of working are already happening. For example, our Forest Assessment Unit identifies older patients with frailty when they attend the Emergency Department and works closely with colleagues in the community to allow an early return home with adequate support.

Change will continue to spread through services even before the new hospital opens its doors, and the new buildings and facilities will allow a step change in the quality of care we can provide. By working in this way, we believe we can better manage the growing demand for urgent care, reduce the amount of time that people spend in hospital beds, and transform the experience of outpatients.

We also propose that Whipps Cross becomes a centre of expertise for the care of frail patients, particularly older people. This fits with separate proposals by Barts Health surgeons to develop a specialist centre of excellence at the hospital in the treatment of fragility fractures. In due course the hospital would become the provider of choice for expert services on fragility, mobility, vision, hearing and balance for patients across the Barts Health group.
Our work has uncovered some uncomfortable findings about the current hospital. For example, each original inpatient ward is half the size that experts now recommend to ensure privacy, dignity and infection control for patients. The physical layout of wards means doctors, porters and cleaners have to travel further to do their rounds, causing lower productivity and higher staffing. We estimate such inefficiencies in the estate layout cost the hospital £13 million a year that we would all prefer to spend on patient care.

At the same time, we don’t have enough facilities on the estate. For example, the limited physical capacity for diagnostic tests means patients in hospital beds have priority for scans. Unfortunately, that sometimes means patients are admitted and kept in hospital unnecessarily, simply so they can access diagnostics quickly.

So we asked health planning experts to take the emerging outputs of our strategy, and establish what facilities – and the scale of them – would be needed in a new hospital. This exercise involves clinicians and managers from key departments across the hospital, and will take some time to reach a conclusion.

Designing a hospital from scratch means we can work out which services need to be located close to each other for clinical efficiency and effectiveness. We can ensure the layout minimises patient journeys, and maximises patient privacy and dignity. We can embrace new and emerging technologies, employ novel and creative approaches to the workplace, and build in flexibility to anticipate future change. And of course we can ensure a new building meets modern NHS technical standards.

So, for example, NHS guidance is that for safety and efficiency, hospitals should operate on the basis of 92% bed occupancy. Fire regulations specify the most beds we could have in any ward is 32, and the minimum proportion of single rooms is set down nationally at 50%. We expect this work to show that a brand new fully-equipped modern hospital for Whipps Cross with a different physical layout could treat more patients, more quickly, and more conveniently.

The starting point in estimating the scope of a new hospital is the likely growth in the population, which is expected to rise over the next ten years. This growth is offset by trends in modern healthcare which treat people more quickly. With more integrated primary and community services, people won’t have to stay in hospital if they don’t need to. A lot of modern surgery doesn’t necessarily require patients to stay overnight. Video technology enables doctors to see outpatients remotely, through ‘virtual’ consultations.
We think that a new hospital at Whipps Cross could have a similar overall floor area to now but be configured quite differently over several storeys. In particular, it would have far more space devoted to clinical activity than today, and be able to undertake more clinical activity. We estimate:

- Procedures done in outpatients will increase by one-third
- Operations done as day cases will increase by a half
- More people will receive ‘same day emergency care’ instead of being admitted to a bed
- More people will be treated in the community instead of the hospital

This means:

- We must make more space for day case surgery, especially for children
- More space will be needed for ‘same day emergency care’ and diagnostics
- We can allocate more beds to maternity, children’s services and critical care
- We will not need quite as many overnight inpatient beds as before

This represents a significant shift from the traditional model of inpatient care to a more flexible approach that is more convenient for patients. Yet it is not a sudden change. When the NHS opened for business in 1948, its hospitals had almost half a million beds. Today the NHS has about one fifth of that number – although over the same period the population of the country has risen by one-third.

We think that the overall requirement for bed space at Whipps Cross in ten years’ time will remain broadly similar to today, with a mixture of emergency and inpatient beds for overnight stays, plus accommodation for day cases. However the balance between these categories will shift, with marginally fewer overnight inpatient beds and substantially more day case facilities (which are often reclining chairs rather than beds as we traditionally think of them).

Building a state-of-the-art hospital for Whipps Cross offers the prospect that our patients will benefit from the best possible medical, nursing and therapy care while also spending less time in the hospital environment. New technology means fewer people will need to wait in outpatient clinics as more consultations are provided virtually. Modern surgery means they will have routine operations done as day cases. Advances in A&E mean those who need urgent care can take advantage of ‘walk-in walk-out’ facilities. Projecting healthcare needs and trends 10 years into the future is not an exact science, and so we should incorporate a degree of flexibility for the future as we design the building and the wider site.
SELECTING A SITE FOR A NEW HOSPITAL

The original Whipps Cross hospital was constructed as a series of wards branching off a central spine, which affectionately become known as the longest hospital corridor in the NHS (if not in Europe). Over the years, a motley collection of standalone buildings and in-fill facilities grew up around this central core. The result, looked at from the air, is that the site today consists of about eight distinct blocks, with Hospital Road running through the middle.

In line with our vision to make better and more varied use of all the space available, we commissioned architects to explore the constraints and opportunities of the whole estate. Their brief was to consider where a new hospital could be built with minimum disruption to existing hospital services yet maximum benefit to the local community.

We agreed some principles to underpin this ‘masterplanning’ exercise. We wanted to keep as much green space as possible, and improve the ecology of the area. We asked ourselves whether we should retain the historic buildings. Accessibility was also a consideration for creating a new neighbourhood of hospital, community healthcare facilities and homes.

This work showed that a brand new hospital, with a full range of acute health services for a growing population, could be built on a fraction of the land now occupied at Whipps Cross. In fact, it is surprising to discover that a modest multi-storey building big enough for all our clinical needs – and with an almost identical floorspace to today – could have a ground footprint on no more than one-fifth of the site, releasing the remainder of the estate for development.

After taking extensive expert advice we believe there are three practical locations for a new hospital on the existing site:
a) The area where there is existing unused and derelict buildings, including the former nurses’ accommodation block alongside Peterborough Road

b) The 1930s extension (beyond junction 9 of the Victorian corridor) and adjacent land between Margaret Road and James Lane (currently occupied by the Margaret Centre, day units and an ambulance depot)

c) The Margaret Road/James Lane area connected by a bridge to the maternity site across Hospital Road.

All three locations include provision for new A&E and maternity units and some medium- to high-rise construction. Each has space for community health facilities next door to the hospital, and a separate multi-storey car park. The historic towers of the original Whipps Cross infirmary would be part of the land released for housing. And Hospital Road would become the High Street of a new community.

Each of these locations has different implications that we need to consider. Do they enable clinical services to be transformed to better meet patients’ needs? What are the impacts on affordability, accessibility and environmental concerns? Does this location affect how we might develop the rest of the estate? How long would it take to develop the location, and how much disruption would construction cause? What do local residents and users think?

Maps and descriptions of these locations are included on pages 13-15, and a more detailed description of the site masterplan is available at: www.bartshealth.nhs.uk/future-whipps. We are seeking feedback from staff, stakeholders, patients and the public on these emerging ideas while we prepare the next stage of the process towards a full business case.
NEXT STEPS

On 30 September 2019 the Department of Health and Social Care published its Health Infrastructure Plan. This listed Whipps Cross among six hospital projects “that are sufficiently developed in order to get the full go-ahead now, subject to business case approvals.” The plan indicated the six would be delivered by 2025.

The preparatory work we have done so far means we are on track to submit a revised Strategic Outline Case (SOC) around the turn of the year. The feedback we receive in response to the ideas set out here will help us finalise that document. We are keen to get input from all quarters, including our staff as well as members of the public.

Government guidelines for business cases require us to set out a number of options in the SOC, including two in which a new hospital is not built. These are known as the ‘business as usual’ and ‘do minimum’ scenarios and are required in order to ensure the case for investment is robust and gives value for money. Our three prospective locations for a new build will sit alongside them.

We are keen to hear your views on the options that are emerging and the issues that are most important to you. We have launched a short questionnaire to gain feedback from individuals, and arranged a public meeting. A series of staff conversations and updates with the redevelopment team are taking place across the hospital. Our Community Engagement Action Group is gathering views from among local audiences we often find hard to reach. We are also setting up a Patients and Public reference group to champion the community voice in the redevelopment programme. We want to maintain a dialogue with staff, local residents, our patients and all interested parties through regular meetings and using all the communications channels of the Barts Health group and its partner organisations.

No final decisions have yet been made, either about the shape of the new hospital or how the rest of the site could be used. When the SOC is approved, the next phase of detailed work will begin. At that stage we will want to continue to hear your views and ideas to support us in developing our proposals further.

Thank you for taking the time to read this. You can read more about how we are building a brighter future for Whipps Cross and have your say at www.bartshealth.nhs.uk/future-whipps
Option A: New build hospital on the ‘nurses’ site

A brand new state-of-the-art hospital built on the disused site of the former nurses’ accommodation. Significant land would become available for development.

Key features

- A new, state-of-the-art hospital on the disused site of the former nurses’ accommodation
- Quickest and least disruptive option as the site is disused and the building would be built in one phase
- Probably ‘mid-rise’ (6-8 storeys) with some taller elements
- A new multi-storey car park would probably be needed
- The Forest Site buildings could be demolished and new green space provided

Please note in these diagrams:
- The red line indicates the boundary of the land owned by the hospital
- The development blocks, site roads etc are illustrative only
Option B: New build hospital on 1930s and James Lane sites

A brand new state-of-the-art hospital built across the current 1930s site and James Lane site. This would need to be built in two phases. Significant land would become available for development.

Key features

- A new, state-of-the-art hospital built across the existing 1930s site and James Lane site
- Services would be moved from phase 1 site before work starts. Once phase 1 is built, services including A&E, intensive care, theatres and wards would move in; then a temporary bridge to existing outpatients would be installed whilst phase 2 is built
- Probably ‘high-rise’ (8-12 storeys)
- A new multi-storey car park would probably be needed
- The Forest Site buildings could be demolished and new green space provided
Option C: New build hospital on James Lane and Outpatient/Maternity sites

A brand new state-of-the-art hospital built over the current James Lane and Outpatient and Maternity sites. It would need to be built in two phases, with the two buildings permanently linked over a new ‘High Street’. Significant land would become available for development.

Key features
- A new, state-of-the-art hospital built as a split site across a new ‘High Street’
- Services would be moved from phase 1 site before work starts. Once phase 1 is built, services including outpatients and maternity would move in then a temporary bridge to A&E, intensive care, theatres and wards would be installed while phase 2 is built
- Probably ‘high-rise’ (8-12 storeys) with some ‘mid-rise’ (6-8 storeys)
- A new multi-storey car park would probably be needed
- The Forest Site buildings could be demolished and new green space provided

The existing ambulance depot would need to be relocated, subject to discussions with London Ambulance Service.
MAY 2019: PARTNERS REAFFIRM COMMITMENT TO WHIPPS CROSS VISION

The organisations who are working together on the Whipps Cross Redevelopment Programme have agreed a new ‘concordat’ which reaffirms how they will work together to deliver their shared vision. Alwen Williams, Group Chief Executive of Barts Health said: Whipps Cross is such a valued asset for our community, and the agreement we’ve signed shows that we are all committed to delivering a shared plan to make the best use of the site for generations to come.

Whipps Cross Redevelopment Programme Partnership Concordat

The redevelopment of Whipps Cross Hospital offers an unprecedented opportunity to regenerate a unique site and create an integrated health, care and wellbeing campus. This has the potential to bring together a wide range of services designed around the needs of the local population, including housing, leisure and culture. Through the Redevelopment Programme we can develop new clinical pathways and realise operational efficiencies within an integrated care system, whilst also supporting economic regeneration and growth in North East London. Achieving such an ambition requires a genuine partnership between local authorities, clinical commissioners, healthcare providers and others in the wider healthcare system.

This Concordat sets out our mutual commitment to collaborate for the benefit of the patients and communities we each serve, in accordance with agreed principles. We will:

• participate fully in the Programme by sharing ideas and options at all stages, and ensuring that all views within each organisation are gathered and represented;

• identify and agree ways of co-producing development work with staff and local communities, so existing and future service users are fully engaged in the process;

• regularly feedback insight from stakeholder involvement, so that proposals set out in the business case come as no surprise to those with an interest in the outcome;

• take an active role in decision making, and proactively assess the impact of any proposals either on existing services or the people most likely to be affected;

• inform each other of any issues or other work programmes that might affect the delivery of the Redevelopment Programme at the earliest possible stage;

• act as ambassadors for the Programme, by raising its profile, promoting wider understanding of its benefits, and encouraging the sharing of lessons learned.

Between us we have agreed areas where each partner is best qualified to lead. We will review this Concordat annually.

For more information about the redevelopment programme and to suggest ideas for future newsletters, visit www.bartshealth.nhs.uk/future-whipps, email FutureWhipps.BartsHealth@nhs.net or follow #FutureWhipps and @WhippsCrossHosp on Twitter

The original Whipps Cross Redevelopment Concordat was signed in 2016 and renewed in May 2019.

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