

Report of the Chief Operating Officer to the meeting of the Health and Social Care Overview & Scrutiny Committee to be held on 15th December 2022

Subject: Shipley Hospital Update

Summary statement: This paper provides a summary of the position with regards to the next steps on Shipley Hospital. This paper, in particular in relation to a public consultation, is based on an independent review of involvement in relation to Shipley Hospital. The independent review of involvement to date has been commissioned by the Bradford District and Craven Health and Care Partnership and delivered by an independent agency, Stand.

Helen Farmer, Programme Director
Access to Care
Shak Rafiq, Associate Director
Communications and Involvement
Report Contact:
Phone: (01274) 43
E-mail:

Portfolio:

Healthy People and Places

1. **Summary**

This report provides the Committee with information on an independent review that has been carried out in relation to the involvement work undertaken on Shipley Hospital, and outlines the required next steps. The independent review has been commissioned by the Bradford District and Craven Health and Care Partnership and delivered by an independent agency, Stand.

This independent review and its recommendations will support the restarting of involvement activities in relation to Shipley Hospital. The previous involvement activities had to be paused in March 2020 as our health and care system responded to COVID-19. The report reflects and recognises the period of time that has passed as a direct consequence of the COVID-19 global pandemic and the need to involve people before a final decision is made on any proposals.

The review has examined the involvement activities which took place in 2019 in the light of the subsequent pandemic in order to make recommendations on the next steps for involvement. The independent review, which is available as an appendix to this update paper, recommends that we will need to carry out a formal consultation on our proposal when considering legal and policy considerations.

HOSC received two papers on Shipley Hospital in August 2019 and February 2020.

In summary the key points to note are as below.

- A short consultation will take place in early 2023, with the intention of this starting shortly after the Christmas and New Year period comes to an end.
- The consultation will focus on the move of physiotherapy services provided by Bradford Teaching Hospitals NHS Foundation Trust that are delivered from the Shipley Hospital site. The consultation is asking people which site the service should be delivered from in the future as Shipley Hospital is no longer a viable option due to the age and condition of the building.
- Physiotherapy services are the final services now delivered from Shipley Hospital. The age and structure of the building mean it is not possible to improve the standard to that of a modern, purpose-built, health facility.
- The consultation will be open to all residents across the place served by Bradford District and Craven Health and Care Partnership and we will offer different opportunities for people to share their views.
- Please note there are two physiotherapy services provided from Shipley, community and outpatient. Outpatient physiotherapy would relocate to Eccleshill where this service is already provided from, in addition, pre-Covid 19, the service would provide clinics from GP practices across the district and this can be reinstated in line with

patient demand. This paper covers the arrangements for the community physiotherapy.

- A citizens panel is being recruited to provide an independent assessment of the feasibility study undertaken to date. This will help determine if Westbourne Green, our preferred location for the community physiotherapy services, is the most appropriate location for these services. We will use the views of the citizens panel to ensure people sharing their views in the consultation can consider sites that members of the citizens panel believe could offer a viable alternative site for physiotherapy services.
- Bradford District and Craven Health and Care Partnership Board is a committee of the NHS West Yorkshire Integrated Care Board, with delegated responsibilities. The consultation process will be overseen and assured by members of the Bradford District and Craven Health and Care Partnership Board and reported to the NHS West Yorkshire ICB.
- **We would like to offer members an opportunity to visit both Shipley Hospital and our current preferred site, Westbourne Green.**

2. Background

This independent review and its recommendations will support the restarting of involvement activities in relation to Shipley Hospital. The previous involvement activities had to be paused as our health and care system responded to COVID-19. The report reflects and recognises the period of time that has passed as a direct consequence of the COVID-19 global pandemic and the need to involve people before a final decision is made on any proposals.

The review has examined the involvement activities which took place in 2019 in the light of the subsequent pandemic in order to make recommendations on the next steps for involvement. The independent review, which is available as an appendix to this update paper, recommends that we will need to carry out a formal consultation on our proposal when considering legal and policy considerations

Built over 100 years ago, Shipley Hospital (at 98 Kirkgate, Shipley BD18 3LT) is a large, converted house. Over time, it was a maternity home and a community hospital. Today, physiotherapy services occupy the ground floor. The first-floor inpatient ward was closed in May 2010 because of fire safety issues.

Although it is safe to provide services to patients on the ground floor, the building continues to pose issues for staff and patients due to its age and condition. Frequently there are issues with the roof and the fabric of the building, with temporary remedial works needed on a regular basis.

Following the request by Bradford Teaching Hospitals NHS FT (BTHFT) Radiology department in 2019 to vacate Shipley Hospital, this prompted a review of services located there and subsequent engagement with the public. HOSC have received two papers on Shipley, and members of the committee have visited the site previously.

The age and structure of the building mean it is not possible to improve the standard to that of a modern, purpose-built, health facility. This is why the future of the hospital is under review. If the current service were to be moved to other locations, the hospital could be closed and proceeds from its sale returned to the NHS. Our understanding is that 50% of the proceeds from the sale can be reinvested by NHS West Yorkshire Integrated Care Board to improve the patient environment in one or more local services, with the other 50% going to the Department for Health and Social Care.

There have been reports from members of the public that there is a covenant on the hospital building, placed there as a condition of its donation by Norman Rae. Having conducted a review, Bradford Council has confirmed that they do not have any record of such a covenant existing, therefore the NHS is free to dispose of the site as it sees fit. Although one of our recommendations is that any subsequent involvement process asks people to share any evidence they have of such a covenant.

Working closely with NHS Property Services (NHSPS) and Community Health Partnerships (CHP) we have undertaken a site suitability survey and a feasibility study to identify sites that can offer a sustainable solution that ensure we can provide health and care in safe, modern and high-quality environments. As part of this study, we have carried out an assessment of Shipley Hospital that confirms that a complete redevelopment of the site would be needed due to the age and structure of the building.

Based on the site suitability assessment it is evident that a major refurbishment would be very expensive, therefore not providing value for money for the taxpayer from a capital perspective and such a project would not fit the criteria for the Government's New Hospitals Programme. The ongoing maintenance and remedial works that are regularly carried out at Shipley Hospital further demonstrate that the site is creating additional financial pressures. It has been agreed that immediate remedial actions will be undertaken to ensure that the site is water-tight over winter 2022 prior to the public consultation that will determine the future site to provide community physiotherapy services.

A detailed review by NHSPS has established that the existing condition of the building is deficient in meeting current Health Building Note and Health Technical Memorandum standards and has a significant backlog maintenance requirement that is unable to justify value-for-money. This has resulted in the delivery of the existing services from Shipley Hospital becoming unsustainable.

As part of a feasibility study undertaken by NHSPS and CHP, several local buildings in close adjacency to Shipley Hospital were considered as options for the relocation of the Community Physiotherapy team, and the conclusion of that Options Appraisal determined Westbourne Green Community Hospital (WBG) as being the preferred option. In total five sites were considered during this options appraisal which are as follows:

- I. Shipley Hospital (NHSPS)
- II. Eccleshill Hospital (NHSPS)
- III. Undercliffe Health Care Centre (CHP)
- IV. Westbourne Green (CHP)
- V. Canalside Health Centre (CHP)

The public consultation will ask people for their views on moving the service to Westbourne Green, while giving people an opportunity to influence this decision. This will be an open and transparent process and the reasons that Shipley Hospital is not being included as a site to host this service will be outlined as described above. We will ensure that people's views shape our final decision alongside any instructions from NHS England as part of the service change and assurance process.

Prior to going out to consultation, we will share the existing feasibility study carried out by NHSPS and CHP with our citizen forum so they can assess the work undertaken and review the sites that were considered as part of this process. Through patient and public involvement, evaluation criteria can be developed to provide a ranked list of factors of viable options for the relocation of services from Shipley Hospital. The previous steps, looking for possible solutions, have already been completed by NHS Property Services. This additional evaluation will provide an opportunity for citizen involvement in the feasibility study process.

It is worth noting that this is a public consultation open to anyone covered by our place-based partnership across Bradford District and Craven.

3. Report issues

Following discussions at previous HOSC meetings and the previous engagement work we undertook, we are developing an updated involvement plan based on the principles and framework of public consultation which includes:

- An issues document and narrative setting out the key information and outlining why Shipley Hospital is no longer a viable and affordable option. The narrative and consultation also contains a call for the public to provide information about Norman Rae's covenant if available as we have been unable to find such a covenant;

- Clear demonstration where our consultation process is open to public influence – in line with statutory guidance and the Gunning Principles - by providing a mechanism to allow the public to submit feedback on our proposals which are assessed in the same way;
- Involvement activities, timeline for reporting, decision making and how these fits with a public consultation.

Following this, we will then develop proposals in line with legislation and guidance using an open proposal development process involving stakeholders (citizen forum) and public representatives.

We are planning to undertake a public consultation on Shipley and we expect this to take no longer than six weeks based on the independent guidance we have received from Stand. Stand have also produced an independent review of involvement activities relating to Shipley Hospital and this report is being used to determine our planning for the consultation alongside all statutory guidance.

We are currently anticipating that – even in any worst-case scenario - the latest the consultation period will be concluded by is before the end of March 2023 which means we will not be affected by any pre-election guidance ahead of local elections. Our assumption is that a General Election will not be held before the scheduled local elections taking place in May 2023. We would like to invite members of HOSC to undertake a site visit to Shipley Hospital prior to the consultation commencing, this site visit would also include Westbourne Green.

We anticipate a total project timeline of minimum six and maximum nine months covering pre-consultation business case, final decision making and through to the first stage of implementation. However, we are aware that external factors could change our anticipated timelines.

We will continue to be guided by Stand to ensure we benefit from independent guidance and to develop technical capabilities across our place-based partnership to understand the revised processes to follow for service change following the recent legislative changes as per the Health and Care Act 2022.

There are some refurbishment works that are required at Westbourne Green whilst we have access to capital funding in 2022/23. We believe it appropriate to progress with these refurbishment works as there are a number of services that could utilise this space due to the flexibility it offers.

4. Options

Not applicable

5. **Contribution to corporate priorities**

Not applicable

6. **Recommendations**

Members are asked to note the proposed involvement and consultation work related to Shipley Hospital.

7. **Background documents**

Involvement Review Shipley Hospital

8. **Not for publication documents**

None

9. **Appendices**

Independent review of our involvement activities

APPENDIX A: Independent review of involvement activities

Shipley Hospital

An independent review of involvement activities

Prepared by Stand
September 2022

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Introduction

Purpose of the report

This report is an independent review of involvement in relation to Shipley Hospital. It has been commissioned by the Bradford District and Craven Health and Care Partnership. This independent review and its recommendations will support the restarting of involvement activities in relation to Shipley Hospital building on work that has taken place prior to the pandemic. The report reflects and recognises the time that has passed as a direct consequence of the COVID-19 global pandemic and the need to involve people before a final decision is made on any proposals. The review has examined the involvement activities which took place in 2019 in the light of the subsequent pandemic in order to make recommendations on the next steps for involvement.

Information about Stand

Stand is a specialist consultancy which focuses on NHS service change and brings together an expert community of engagement practitioners and service change leaders with substantial experience in engaging people to inform policy, strategy, service design and transformational change programmes. Stand's best-practice public engagement and consultation approaches bring the voices of local people into the heart of decision-making to meet the organisation's objectives and obligations. Stand has worked on some of the most challenging health and care projects in the UK.

Find out more: <https://wearestand.co.uk/>

Background to Shipley Hospital

Built over 100 years ago, Shipley Hospital (at 98 Kirkgate, Shipley BD18 3LT) is a large, converted house. Over time, it was a maternity home and a community hospital. Today, physiotherapy services occupy part of the ground floor. The first-floor inpatient ward was closed in May 2010 because of significant fire safety issues. Although it is safe to provide services to patients on the ground floor, the building continues to pose issues for staff and patients due to its age and condition. Frequently there are issues with the roof and the fabric of the building, with temporary remedial works needed on a regular basis.

Sadly, the age and structure of the building mean it is not possible to improve the standard to that of a modern, purpose-built, health facility.

This is why the future of the hospital is under review. If the current service were to be moved to other locations, the hospital could be closed and proceeds from its sale returned to the NHS. Our understanding is that 50% of the proceeds from the sale can be reinvested by NHS West Yorkshire Integrated Care Board to improve the patient environment in one or more local services, with the other 50% going to the Department for Health and Social Care.

There have been reports from members of the public that there is a covenant on the hospital building, placed there as a condition of its donation by Norman Rae.

Having conducted a review, Bradford Council has confirmed that they do not have any record of such a covenant existing, therefore the NHS is free to dispose of the site as it sees fit. Although one of our recommendations is that any subsequent involvement process asks people to share any evidence they have of such a covenant.

Involvement with stakeholders and the public

The most recent stakeholder involvement process began in mid-2019, with a visit to Shipley by members of the City of Bradford Metropolitan District Council's Health Overview and Scrutiny Committee (HOSC). Elected members viewed the building and the clinical commissioning group briefed them on the situation in relation to the deteriorating condition of Shipley Hospital.

Consequently, a report was presented to HOSC later in 2019 setting out discussions between the Trust and NHS Property Services (NHSPS) and outlined potential options, and recommendations to engage local people. At this stage, there was still the possibility of keeping the hospital open.

HOSC requested that a plan be formulated to involve the public, with a draft plan being completed in October 2019. The plans for engagement involved a survey, face-to-face conversations, press releases, a webpage, and a frequently asked questions document being prepared.

The activities in the plan were led by NHS Bradford District and Craven Clinical Commissioning Group (CCG) and supported by engagement activities through the community and voluntary sector.

In December 2019 the engagement phase concluded, and the final engagement report was prepared by the CCG's involvement lead. The report set out the view of people who had responded to the involvement activities.

Most people said that keeping services in the area would be preferable. However, they would accept proposals for an alternative site if the information given during any future involvement process provided honest explanations and detailed information about the options that were considered. This would form part of a transparent decision-making process which would reassure them that the right decisions were being made.

People also expressed concern about the impact on the local area if the site was redeveloped into for example housing.

A further summary of the feedback is contained as Appendix three.

Feedback from Health Overview and Scrutiny

In early March 2020, the engagement feedback report was presented to the City of Bradford Metropolitan District Council's Health Overview and Scrutiny Committee (HOSC), with the intention stated that there would be a public consultation.

The HOSC resolved that the CCG should go ahead and develop a business case for consultation, and commissioners should return to the HOSC to provide a report on the consultation process and its findings around any future proposed closure of Shipley Hospital, including details of travel planning to alternative provision.

They also agreed with the CCG's recommendation to involve the Clinical Senate which should be contacted to provide independent clinical advice on any future proposed options to close Shipley Hospital and relocate services. The committee also asked, should disposal of the Shipley Hospital site go ahead, that every consideration be given to the provision of lifetime homes or extra care housing. A public consultation was planned to begin in May 2020.

Impact of the pandemic

March 2020 saw the global COVID-19 pandemic, with a wide range of impacts, including the suspension of local elections and activity being paused to help the NHS and its partners to deal with the public health emergency. This included suspending the move towards a public consultation for Shipley Hospital that would include proposals for moving the final remaining service to another site.

As a direct consequence, there has been a delay in developing the business case for consultation. This delay has also seen the implementation of the Integrated Care Act (2022) which disestablished NHS Clinical Commissioning Groups and established Integrated Care Boards, transferring the statutory responsibilities for service change to the new bodies.

The proposal that will inform the consultation will be overseen by the Bradford District and Craven Health and Care Partnership Board, which is a committee of the NHS West Yorkshire Integrated Care Board. This will ensure that place-based leadership, governance and assurance is provided during the development of the business case and throughout the consultation.

Options development

In January 2022, nearly two years since the pandemic first reached the UK, NHS Property Services developed a technical options appraisal which concluded that there were two viable options for services at Shipley Hospital:

- Relocation to a public/private building: Repurpose of space for use as healthcare.
- Relocation to a building within the NHS portfolio: Repurpose of space (if necessary) for physio service.

The technical appraisal also concluded that keeping services in the hospital was not a viable course of action. The reason is primarily because the state of the building means that the site is not conducive to providing a modern healthcare service.

In addition, a major refurbishment would be exorbitantly expensive, therefore not providing value for money for the taxpayer from a capital perspective and such a project would not fit the criteria for the Government's New Hospitals Programme.

Their conclusion was that keeping the hospital open in any form did not represent value for money for the public in both revenue and capital terms, therefore the only viable options were relocation, either to a building within the NHS' portfolio (preferred) or to a public/private building.

While this has been a technical appraisal, in line with the legislation and the guidance set out in 'Planning and Assuring Service Change for Patients' our recommendation is that there should be wider stakeholder, patient and the public involvement in options development.

Legal and policy considerations

NHS bodies in England each have a duty to involve patients and the public (by means of providing information, consultation, or in other ways") in:

- a) Planning commissioning arrangements;
- b) In the development and consideration of proposals for changes services;
- c) Decisions they make

A complex balance of factors informs whether a public consultation is required. One of those factors takes into consideration whether a promise to consult has been made. A promise to consult stakeholders on a particular matter creates a legal requirement to conduct that consultation.

There have been repeated statements made that the engagement work that has already been conducted was in preparation for a formal public consultation. These statements were made in public, reported in the media, and made to the HOSC. It's highly likely these statements create a legitimate expectation that a public consultation will be conducted on this matter. Any decision to proceed without a public consultation should be informed by appropriate legal advice.

Recent amendments to the National Health Service Act mean West Yorkshire Integrated Care Board (ICB) has replaced NHS Bradford District and Craven Clinical Commissioning Group as the statutory decision maker for this matter. Guidance issued in support of the Act has signalled changes to HOSCs' powers to refer contested service reconfiguration proposals to the Secretary of State for Health and Social Care as regulations for the Secretary of State's new intervention powers are developed.

Standard service change practice in normal times gives involvement feedback a two-year shelf-life. This project is past that timeframe and there has been the COVID-19 pandemic in between. The COVID-19 pandemic can be seen as a fundamental

change of circumstances, therefore good practice considerations from the Consultation Institute recommend that pre-pandemic involvement is 'sense-checked'. These factors, and previous undertakings open the ICB to the risk of successful challenge if the programme proceeds to implement a change to services at Shipley Hospital without further patient and public involvement activity.

It's worth noting that citing *Nettleship v NHS South Tyneside CCG and Sunderland CCG* [2020] EWCA Civ 46, NHS England's guide to the legal duties for service change tells us: "*There is no duty to carry forward to public consultation, where it is required, proposals that in the view of the commissioners are unrealistic, unviable or unsustainable.*"

Recommendations

In the light of the issues highlighted above, the following recommendations would mitigate risks. These are:

1. Establish a team to mobilise resources, identify risks and oversee the project.
2. Develop an updated involvement plan based on the principles and framework of public consultation to:
 - Include a narrative setting out the key information. It should also contain a call for the public to provide information about Norman Rae's covenant if available or other ideas about moving services from Shipley Hospital.
 - Demonstrate that the process is open to influence by providing a mechanism to allow the public to submit ideas which are assessed in the same way
 - Include involvement activities, timeline for reporting, decision making and how these fits with a public consultation

A draft strategic involvement plan is included at Appendix one with indicative timescales to help outline key milestones, interdependencies and to assure statutory processes are followed.

3. Develop proposals in line with legislation and guidance using an open proposal development process involving stakeholders (citizen forum) and public representatives. A transparent process will go a long way to providing assurance to HOSC and the wider public.

The options development plan should:

- Include an options development process involving a balanced representation of people
- Develop a set of evaluation criteria based on what is important to patients from feedback which can be used to assess options – include weighting and scoring

A draft strategic options development plan is included at Appendix two.

Next steps

Agreement to support the recommendations as above by the relevant decision makers.

Once agreed, detailed work on the relevant plans and timescales as above and formal consultation with the HOSC to gain their input.

Appendices

To note: timings in the plans are subject to Bradford District and Craven Health and Care Partnership and its appointed suppliers and representatives providing required source materials, feedback and sign off in a timely manner.

- Appendix one - draft strategic involvement plan
- Appendix two - draft strategic options development plan
- Appendix three – desk and document review

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Appendix one - strategic involvement plan

*indicates interdependency with appendix two

Milestone	Actions	Narrative	Timing and interdependency
Governance 1	Detailed involvement plan	Draft fuller paper and include options development information* in appendix two used for governance purposes and shared with HOSC	Weeks 1 and 2
Governance 2	Strategic timetable	Map out key governance points and agree timescales for business case development *Map out interdependent activities from the options development phase in appendix 2	Weeks 1 and 2
Reducing inequalities	Review of impact assessments	Information used to inform audience targeting (along with stakeholder mapping) *Interdependent with recruitment for options appraisal and stakeholder mapping below	Weeks 3 and 4
Narrative development	Narrative document production	Key document to set out the background and all the issues around Shipley Hospital and what is happening	Weeks 5 and 6
Strategic communications 1	Stakeholder mapping	Review of key stakeholders to target to inform participation in the options development phase* appendix 2 – also include targeted participants from impact assessment review as above	Weeks 1 to 6

Milestone	Actions	Narrative	Timing and interdependency
Strategic communication s 2	Communication s plan	Plan for supportive communications activities to raise awareness and promote involvement including graphic design interdependent with narrative development as above	Weeks 5 and 6
Strategic involvement 1	Involvement mechanisms	Agreement on key questions to ask and mechanisms for feedback (eg survey) to inform evaluation criteria in phase 2 options development and assessment*	Weeks 5 and 6
Strategic involvement 2	Involvement operational activity	Agreement on operational activities and support for delivery of the plans	Weeks 8 to 12
Governance 3	Analysis and reporting	Agreement of resources for analysis and publication of draft report*interdependent for phase two	Weeks 12 to 14

Appendix two - strategic options development plan

*indicates interdependency with appendix one

Milestone	Actions	Narrative	Timing and interdependency
Evaluation criteria	Creation of evaluation criteria	Thematic review of insights from phase one to create draft evaluation criteria	Weeks 8 to 12
Options	Recruitment of	*Informed by stakeholder analysis and impact assessments from phase	Weeks 1 to 6

appraisal	participants	one Targeted to ensure a balance of stakeholders	
Evaluation criteria	Weighting	Activities with stakeholders to weight the criteria	Weeks 8 to12
Options appraisal	Scoring	Activities with stakeholders to applying the criteria to the options	Weeks 8 to 12
Governanc e	Analysis and reporting	*Data cleansing, coding of themes and reporting.	Weeks 12 to 14

Appendix three- desk and document review

Desk review – Shipley Hospital Involvement

This review provides a narrative based on a desk review of key documents in relation to the involvement of patients, public and stakeholders in considerations for the future of Shipley Hospital.

The document list is included at the end.

Background

Built over 100 years ago, Shipley Hospital (at 98 Kirkgate, Shipley BD18 3LT) is a large, converted house. Over time, it was a maternity home and a community hospital. Today, outpatient services and a support group occupy the ground floor. The first-floor inpatient ward was closed in May 2010 because of significant fire safety issues.

Although it is safe to provide services to patients on the ground floor, the building continues to pose issues for staff and patients due to its age and condition. Frequently there are issues with the roof and the fabric of the building.

Sadly, the age and structure of the building mean it is not possible to improve the standard to that of a modern, purpose-built, health facility.

This is why the future of the hospital is under review. If the current services move to other locations, the hospital could be closed and proceeds from its sale returned to the NHS.

Involvement so far

The stakeholder involvement process began in mid-2019, with a visit to Shipley by members of the City of Bradford Metropolitan District Council's Health Overview and Scrutiny Committee (HOSC). Elected members viewed the building and the clinical commissioning group briefed them on the situation in relation to the deteriorating condition of Shipley Hospital.

Consequently, a report was presented to HOSC later in 2019 setting out discussions between the Trust and NHS Property Services (NHSPS) and outlined potential options, and recommendations to engage local people. At this stage, there was still the possibility of keeping the hospital open.

HOSC requested that a plan be formulated to engage the public, with a draft plan being completed in October 2019. The plans for engagement involved a survey, face to face conversations, press releases, a webpage, and a frequently asked questions document being prepared.

The activities in the plan took place, led by Bradford CCG and supported by engagement activities through the community and voluntary sector.

What the people of Shipley think

In December 2019 the engagement phase concluded, and the final engagement report was prepared by Bradford CCG's involvement lead. The report set out the view of people who had responded to the involvement activities.

The majority of people who replied said they were supportive of Shipley Hospital remaining open, 77% of people wanted the NHS to explore repairing the building, and 45% wanted to look at moving services to local GP surgeries.

Most people said that keeping services in the area would be preferable. However, they would accept proposals for an alternative site if the information given during any future involvement process provided honest explanations and detailed information about the options that were considered. This would form part of a transparent decision-making process would reassure them that the right decisions were being made.

People also expressed concern about the impact on the local area if the site was fully redeveloped.

Feedback from local people was collected as part of the engagement report in 2019. Key summary points:

- Most people who responded were aware of the services provided at Shipley Hospital
- Around 70% of people who responded had some experience of Shipley Hospital
- Over half of other respondents said their experience of Shipley Hospital was longer than three years ago, with almost a third of respondents describing experiences longer than ten years ago
- Over half of people with recent experience of outpatient services had driven to access these services
- People's feedback about their experience of outpatient services was mostly positive, particularly around the attitude of staff working in these services
- When it comes to the future of outpatient services, almost a third of people talked about the importance of keeping outpatient services in the local area, in order to meet the needs of local people
- People also raised concerns about travel times, access to public transport and problems with parking at the main Bradford hospital sites
- Three quarters of people felt that we should explore the option to repair the building and retain services at Shipley Hospital
- Around half of people wanted to explore the option of moving services into local GP surgeries
- People wanted to be assured that local views and the impact on patients would be taken into account when making decisions.
- A significant amount of feedback from people made mention of either being born there, or having a family member born there, so Shipley's past as a maternity hospital may explain the emotional link that many local residents feel.

Business case development

In October 2019 a strategic sense check was prepared by Bradford CCG and NHS Property Services which further outlined the planned relocation and proposed closure for the first time which also included keeping the site open.

In early March 2020, the engagement feedback report was presented to the City of Bradford Metropolitan District Council's Health Overview and Scrutiny Committee (HOSC), with the intention stated that there would be a public consultation.

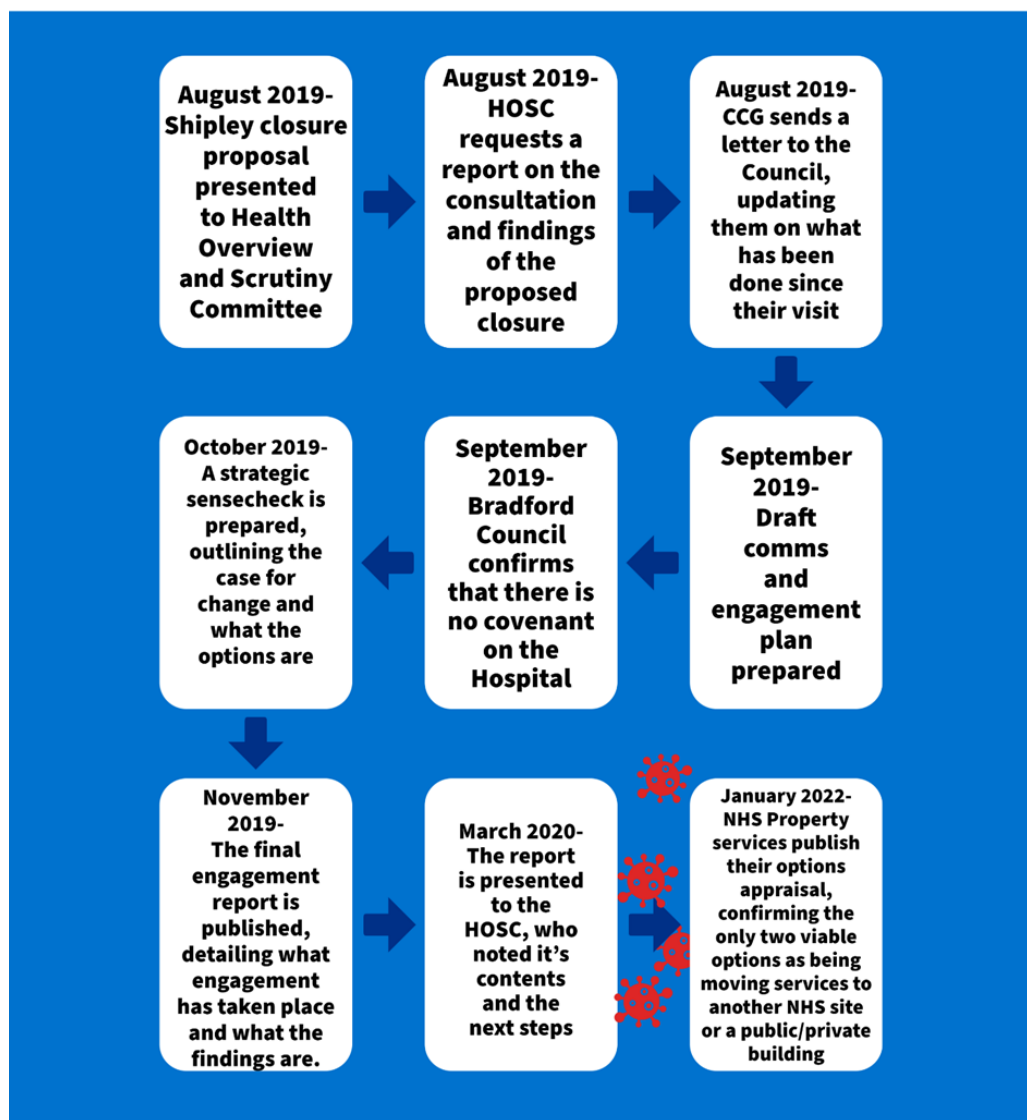
The HOSC resolved that the CCG should go ahead and develop a business case for consultation, and commissioners should return to the HOSC to provide a report on the consultation process and its findings around any future proposed closure of Shipley Hospital, including details of travel planning to alternative provision.

They also requested that the Clinical Senate should be contacted to provide independent clinical advice on any future proposed options to close Shipley Hospital and relocate services. The committee also asked, should disposal of the Shipley Hospital site go ahead, that every consideration be given to the provision of lifetime homes or extra care housing.

A public consultation was planned to begin in May 2020.

March 2020 saw the global COVID-19 pandemic, the suspension of local elections with involvement projects like Shipley Hospital reprioritised to free up capacity to deal with the developing public health emergency.

As a direct consequence, there has been a delay in developing the business case for consultation. Nearly two years later in January 2022 NHS Property Services developed an options appraisal for Shipley Hospital. Their conclusion was that keeping the hospital open in any form did not represent value for money for the public in both revenue and capital terms, therefore the only viable options were relocation, either to a building within the NHS portfolio (preferred) or to a public/private building.



Options

developed so far

As part of their options appraisal, NHS Property Services concluded that there were two viable options for services at Shipley Hospital:

- Relocation to a public/private building: Repurpose of space for use as healthcare.
- Relocation to a building within the NHS portfolio: Repurpose of space (if necessary) for physio service.

The options appraisal also concluded that keeping services in the hospital was not a viable course of action. This was primarily because the state of the building means that the site is not conducive to providing a modern healthcare service. In addition a major refurbishment would be exorbitantly expensive, therefore not providing value for money for the tax payer from a capital perspective.

Patient and public involvement requirements

NHS bodies in England each have a duty to involve patients and the public (by means of providing information, consultation, or in other ways") in:

- a) Planning commissioning arrangements;
- b) In the development and consideration of proposals for changes services;
- c) Decisions they make.

A complex balance of factors informs whether a public consultation is required. One of those factors takes into consideration whether a promise to consult has been made. A promise to consult stakeholders on a particular matter creates a legal requirement to conduct that consultation.

There have been repeated statements made that the engagement work that has already been conducted was in preparation for a formal public consultation. These statements were made in public, reported in the media, and made to the HOSC.

It's highly likely these statements create a legitimate expectation that a public consultation will be conducted on this matter. We recommend that any decision to proceed without a public consultation should be informed by appropriate legal advice.

Other issues to consider

There have been reports from members of the public that there is a covenant on the hospital building, placed there as a condition of its donation by Norman Rae.

Having conducted a review, Bradford Council confirmed that they do not have any record of such a covenant existing, and consequently the NHS is free to dispose of the site as it sees fit.