

Meeting Title	Board of Directors		
Date	21 September 2023	Agenda item	Bo.9.23.16

Shipley Hospital update: Review of outpatient physiotherapy and community therapy services - for information

Presented by	Helen Farmer, Director for Access to Care, Bradford District and Craven Health and Care Partnership / Shak Rafiq, Associate Director for Communications and Involvement, Bradford District and Craven Health and Care Partnership		
Author	Helen Farmer and Shak Rafiq (as above) and Victoria Simmons, Senior Head of Communications and Involvement, Bradford District and Craven Health and Care Partnership		
Lead Director	Professor Mel Pickup, Chief Executive		
Purpose of the paper	This paper provides an updated position on Shipley Hospital and the review of outpatient and community physiotherapy services following a process that has been followed in line with statutory expectations and the instructions and directions provided by NHS England at two Stage Two Assurance Panel meetings. This paper includes a summary of the key points highlighted during the patient involvement exercise and steps that had already been taken and/or will be taken to mitigate against the potential impacts identified through the involvement and through detailed impact assessments.		
Key control	N/A		
Action required	For information		
Previously discussed at/ informed by	A previous update was provided to the partnership leadership team, partnership leadership executive and the Bradford District and Craven Health and Care Partnership Board. The previous updates gave an overview of the service review process, how we would look to involve patients, carers and the wider public as well as our colleagues and how this would form part of the wider programme that is proposing a move of outpatient and community physiotherapy services that are based at Shipley Hospital.		
Previously approved at:	Committee/Group	Date	
	Board of Directors	19.01.23	
Key Options, Issues and Risks			
<p>This paper now provides an update based on what we have heard from our local communities, other key stakeholders and includes updates on areas that we highlighted as needing further investigation, such as the possible existence of a covenant on the site.</p> <p>Our proposed next steps would see us move services from Shipley Hospital to our preferred sites at Westbourne Green and Eccleshill Hospital, as well as offering outpatient physiotherapy from GP practices where viable to do so. This is based on the report from the public involvement exercise, our ongoing dialogue with NHS England and other key partners, our work with the local MP (Philip Davies), our impact assessments and our local/regional governance processes.</p> <p>Our key points for discussion are:</p> <ul style="list-style-type: none">- the next steps from a governance and decision-making process- reflections on local people’s feedback, areas highlighted as having an impact when accessing services and agreement on mitigating actions- an updated position on capital departmental expenditure (CDEL) with feedback from NHS England- an agreement on our next phase, working closely with the local MP, to make the Shipley hospital site available for sale with monies being released for a local health and wellbeing campus in Shipley (subject to necessary approvals / public conversation)			

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Analysis

Built over 100 years ago, Shipley Hospital is a large, converted house. Over time, it became a maternity home and a community hospital. Sadly, the age and structure of the building mean the cost to maintain it at a standard of a modern healthcare facility have increased over time. The first-floor inpatient ward was closed in May 2010 because of significant fire safety issues. Currently, only outpatient and community physiotherapy services are provided in the building on the ground floor. Although it is safe to provide services to patients on the ground floor just now, 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 internal and external structure of the building.

Additional background is provided in section 2 of the report.

The conclusion was that keeping the hospital open in any form did not represent value for money, therefore the only viable options were relocation, either to a building within the NHS' portfolio or to a public/private building.

Recommendation

The Board is asked to:

- Note the proposed next steps, discuss and agree that these are in line with our strategic vision and offer the level of sustainability needed for our services; and
- Reflect on the feedback we've had from local people and provide assurance that we have factored in people's views and mitigated against any impacts highlighted.

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Risk assessment						
Strategic Objective	Appetite (G)					
	Avoid	Minimal	Cautious	Open	Seek	Mature
To provide outstanding care for our patients, delivered with kindness				g		
To deliver our financial plan and key performance targets				g		
To be one of the best NHS employers, prioritising the health and wellbeing of our people and embracing equality, diversity and inclusion					g	
To be a continually learning organisation and recognised as leaders in research, education and innovation				g		
To collaborate effectively with local and regional partners, to reduce health inequalities and achieve shared goals					g	
The level of risk against each objective should be indicated. Where more than one option is available the level of risk of each option against each element should be indicated by numbering each option and showing numbers in the boxes.	Low		Moderate	High	Significant	
	Risk (*)					
Explanation of variance from Board of Directors Agreed General risk appetite (G)						

Benchmarking implications (see section 4 for details)	Yes	No	N/A
Is there Model Hospital data relevant to the content of this paper?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is there any other national benchmarking data relevant to the content of this paper?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is the Trust an outlier (positive or negative) for any benchmarking data relevant to the content of this paper?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Risk Implications (see section 5 for details)	Yes	No
High Level Risk Register and / or Board Assurance Framework Amendments	<input type="checkbox"/>	<input type="checkbox"/>
Quality implications	<input type="checkbox"/>	<input type="checkbox"/>
Resource implications	<input type="checkbox"/>	<input type="checkbox"/>
Legal/regulatory implications	<input type="checkbox"/>	<input type="checkbox"/>
Equality Diversity and Inclusion implications	<input type="checkbox"/>	<input type="checkbox"/>
Performance Implications	<input type="checkbox"/>	<input type="checkbox"/>

Regulation, Legislation and Compliance relevance
NHS England: (please tick those that are relevant) <input type="checkbox"/> Risk Assessment Framework <input type="checkbox"/> Quality Governance Framework <input type="checkbox"/> Code of Governance <input type="checkbox"/> Annual Reporting Manual
Care Quality Commission Domain: Choose an item.
Care Quality Commission Fundamental Standard: Choose an item.
NHS England Effective Use of Resources: Choose an item.
Other (please state):

Relevance to other Board of Director's academies: (please select all that apply)			
People	Quality & Patient Safety	Finance & Performance	Other (please state)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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1 PURPOSE/ AIM

This paper provides a summary of the position with regards to the next steps on Shipley Hospital following a recent public involvement exercise that asked for people's views on proposals to move outpatient physiotherapy and community therapy services out of the site. This paper, shares the outcomes from the involvement work carried out and outlines the next steps that concern the future of the Shipley Hospital site, including plans for any further community involvement.

To ensure we, through our Bradford District and Craven Health and Care Partnership Board as a committee of NHS West Yorkshire Integrated Care Board (ICB), have followed the statutory process for service change. We have taken on this responsibility through agreement and with delegated authority from NHS West Yorkshire ICB. This includes ensuring we follow all legal and statutory guidance including, but not limited to, [Planning, assuring and delivering service change for patients](#) and [Working in partnership with people and communities](#).

Our regulatory engagement has taken place through regular dialogue with NHS England, including two Stage Two Assurance Panel meetings that has helped determine how we involve stakeholders including patients, carers and the wider public. The assurance panel at the two meetings cover a range of key functions and ensure we have carried out all necessary impact assessments. These are an Equality and Quality Impact Assessment, a Travel and Transport Impact Assessment and an Environmental Impact Assessment. In addition we need to demonstrate that our plans considered place-based and ICB-wide strategic direction, factored in any financial impacts and we could demonstrate that all necessary political engagement has taken place as well as providing an overview of the governance and decision making process we have and will follow.

2 BACKGROUND/CONTEXT

Built over 100 years ago, Shipley Hospital is a large, converted house. Over time, it became a maternity home and a community hospital. Sadly, the age and structure of the building mean the cost to maintain it at a standard of a modern healthcare facility have increased over time. The first-floor inpatient ward was closed in May 2010 because of significant fire safety issues. Currently, only outpatient and community physiotherapy services are provided in the building on the ground floor. Although it is safe to provide services to patients on the ground floor just now, 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 internal and external structure of the building.

The technical appraisal has shown that it is better for patients and staff if the services currently provided at the hospital are moved to another location. This is because of the poor state of the building, and the costs involved in a major refurbishment do not represent value for money and we would not be able to access national funding such as the New Hospitals Programme as the site does not meet the criteria for the programme.

The age and structure of the building mean that it is increasingly difficult to maintain or improve the building to the standard of a modern, purpose built, health facility. The technical appraisal, carried out in January 2022, concluded that keeping services at Shipley Hospital was not a viable option which means it is in the best interest of patients and staff that services provided from there should be relocated.

In December 2022, NHS Property Services commissioned a condition survey. The survey identified high risk areas that needed priority were the main roof, internal fittings and energy performance. It concluded that a full refurbishment of the ground floor would cost £1.5m with the cost of refurbishing the complete building to be between £2.6m and £3m.

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This does not provide value for money for the taxpayer from a capital perspective and such a project would not fit the criteria to apply for funding from the Government's New Hospitals Programme. The condition report also concluded the heating system is at end of life and needs imminent investment.

The conclusion was that keeping the hospital open in any form did not represent value for money, therefore the only viable options were relocation, either to a building within the NHS' portfolio or to a public/private building.

3 PROPOSAL

Our current governance timelines are as follows:

- Wednesday 16 August: Update for partnership leadership team (verbal)
- Friday 25 August: Update, discussion and agreement to proceed from partnership leadership executive
- Friday 1 September: Agreement to proceed - based on final decision at partnership leadership executive - from Bradford District and Craven Health and Care Partnership Board (committee of NHS West Yorkshire ICB)
- Thursday 21 September: Presentation at Bradford Teaching Hospitals NHS Foundation Trust Board meeting
- Thursday 28 September: Update at Health Overview and Scrutiny Committee
- NHS England assurance: we will continue to work with NHS England and will keep partnership leadership executive as well as other local and regional committees and boards updated as needed
- Service move: timelines to be determined based on the governance processes and further public and patient involvement as part of the conversation on the proceed of sale of site. However service moves are unlikely to happen before 31 December 2023.

We have actively involved, updated and engaged our Health Overview and Scrutiny Committee. This includes presenting a paper in December 2022 that included, at that time, our proposed consultation process and timeline. Our offer of a tour of Shipley Hospital and our preferred site of Westbourne Green for community physiotherapy services was warmly received by members, allowing for people to have conversations with people delivering the services, colleagues from NHS Property Services (landlord for Shipley Hospital) and from Community Health Partnerships (head tenant for Westbourne Green).

We have then provided subsequent updates through meetings and briefings with the Chair of Health Overview and Scrutiny Committee including getting agreement on the revised approach to community involvement based on the advice, steer and guidance from NHS England following our two assurance meetings. Our close work with Health Overview and Scrutiny Committee has ensured that we have continued to receive support, including when we have to revise our plans and timelines. As a result we have secured written support from the Chair of Health Overview and Scrutiny Committee which provided assurance to colleagues from NHS England involved in the assurance process.

In addition, we have met with Philip Davies MP for Shipley in February with this meeting being aided by one of the elected members who took part in the tour of Shipley Hospital and Westbourne Green. Based on current national policy, when the building is sold half of the money that NHS Property Services receive from the sale would be retained locally. During our meeting with Philip Davies MP, we have secured support for an involvement exercise and a follow up community-level conversation that we anticipate will be led jointly

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with Philip Davies MP to test the thinking of reinvesting any monies to the health and wellbeing campus in Shipley (Projects (ourtownshipley.co.uk)).

Finally, we have ensured ward councillors and members of Shipley Town Council have been briefed.

4 RISK ASSESSMENT

Impact assessments

To ensure we considered the needs of our communities and colleagues as well as ensuring we could demonstrate that we have factored in sustainability, equality and environmental concerns as part of our NHS England assurance process, we have undertaken a number of impact assessments. These impact assessments have helped us consider how we mitigate against any negative impacts identified, as well as capturing the actions we are taking as part of our public involvement exercise - this includes our narrative document and frequently asked questions as well as any briefings during any public-facing drop-in events.

Perceived covenant for the site

As part of the involvement work we did in late 2022 and the work we did in 2019, we were made aware that there may be a covenant on the building.

Having done extensive research with colleagues at Bradford Council, they have confirmed that they do not have any record of any covenant on the building. The NHS Act of 1946 enabled the transfer of hospital buildings to the NHS and effectively rescinded all previous covenants, rights or reservations linked to the individual properties.

We requested all files relating to Shipley Hospital from the West Yorkshire Archive Service and have completed our review of these which again supports the view that any covenant on the site had effectively been cancelled and the hospital was transferred over “clean” to the NHS, all as part of the NHS Act of 1946.

During our public involvement exercise we asked people if they had information on the Norman Rae covenant to share this with us. We have not received any information through this route.

Our public involvement exercise

We have outlined the key headline themes that have emerged from our public involvement exercise (taken from the full involvement report which is included in the appendices). These themes are as below. From the themes below we had already anticipated the impacts people would highlight as these were picked up through a combination of our impact assessments, themes from previous involvement relating to Shipley Hospital and feedback we receive through other routes such as our Listen In programme.

In total, 217 survey responses were received and gathered both qualitative and quantitative information. The involvement document was downloaded from the website by 81 people and the frequently asked questions document was downloaded by 15 people. This suggests that most people responding to the survey did so without reading all the published information about the changes. As a result, some of the themes and feedback we have received was covered in the involvement document and frequently asked questions that described the options we have or will make available to people to reduce the impact any changes will have on them accessing services.

Our analysis of the responses shows that we have had very little responses from people in the BD8 and BD9 areas who would be positively impacted by the change but are less likely to take part in involvement exercise. This is because the demographic breakdown of these areas shows that people living in these postcodes are often those that we would describe as ‘seldom heard’.

People’s comments in the survey highlighted the following key themes.

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Areas of concern

- Public transport routes**
 We will ensure people are aware of patient transport services and how they can access these. In addition, we will highlight patient choice and the opportunity for people to access outpatient physiotherapy in community settings such as GP practices.
- Increased distance for Shipley residents and cost of travel to new locations**
 We will promote access to patient transport services for those eligible, as well as alternative locations which may reduce or minimise travel or cost of travel especially if using public transport.
- Loss of local services from Shipley**
 As part of our public conversation delivered jointly with the local MP we will share our proposal to lobby for the 50% proceed from the sale of the site to be re-invested in local services with the local MP expressing a strong preference for this to contribute to the Shipley health and wellbeing campus
- Concerns about impact on capacity and waiting times**
 We are not anticipating any negative impact on waiting times or capacity, while the services will be provided at different locations there will be no changes to staffing resource.
- Environmental impact of longer journeys**
 This has to be set against the significant challenges posed by the current estate at Shipley Hospital, the investment required to offer better energy efficiency and the age and construction of the building limiting the options for a broader programme of works that offer a sustainable solution.
- Potential increased demand for patient transport service**
 We are aware that some people may have to travel further to access services however this will be offset by the number of people who will have reduced travel times and no longer require access to patient transport services.

Areas of support

- Providing physiotherapy in GP practices is positive for patients**
 We are keen to ensure people are aware of the different access routes to outpatient physiotherapy services and the flexibility available to them.
- New locations may improve facilities**
 Our impact assessments and estate feasibility studies have helped ensure we can factor in a range of current and future needs so that we choose sites that offer sustainable and flexible solutions.
- Parking at new locations should be free and easy**
 Parking at Westbourne Green has been assessed and based on current and future projected patient attendance, there are enough parking options on site with some on street parking nearby too.
- Importance of good communication, especially regarding patient choice**
 As part of our involvement exercise, we will carry out an information giving exercise so that people are informed of our decision and know about how they can access services, including exercising patient choice and making use of patient transport services.

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- **Disabled access will be improved at new locations**
This has been recognised in our impact assessments and this highlights the limitations at Shipley Hospital for adaptation works.

5 RECOMMENDATIONS

The Board is asked to:

- Note the proposed next steps, discuss and agree that these are in line with our strategic vision and offer the level of sustainability needed for our services; and
- Reflect on the feedback we've had from local people and provide assurance that we have factored in people's views and mitigated against any impacts highlighted.

6 Appendices

Appendices

1. Involvement report including analysis and key themes (including public facing narrative and FAQs that formed part of the involvement exercise) - note the embedded documents described in the involvement report are attached with the Board papers.

A new location for physiotherapy and community therapy services

Involvement report August 2023

Author: Victoria Simmons, senior head of communications and involvement

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Introduction

Bradford District and Craven Health and Care Partnership, with delegated authority from the NHS West Yorkshire Integrated Care Board, are planning to move outpatient physiotherapy and community therapy services from Shipley Hospital to alternative sites in and around north Bradford. This is so we can provide modern, fit for purpose facilities for our patients and an improved working environment for our staff. We also want to move these services to locations that will be able to meet future demand.

We started looking at the options for relocating the services and what would happen to the Shipley Hospital building back in 2019. The review was put on hold because of the COVID-19 pandemic in 2020.

We then restarted the review in late 2022 when we asked people about their experience of using Shipley Hospital and what was important to them when services were moved to another location. We wanted to make sure that we had an up-to-date understanding of people's views and experiences of using these services.

In line with guidance from NHS England, we carried out a further period of involvement activity from June to August to hear from patients and carers about the potential impacts of moving the services to the proposed new locations.

Our involvement narrative, with supporting frequently asked questions, highlighted that the involvement exercise was about the proposed changes to where outpatient physiotherapy and community therapy services are delivered from in the future. The documents confirmed that Shipley Hospital is no longer viable as a site to provide the required standard of accommodation while ensuring we could provide value for money and a sustainable solution.

This report summarises the insight gathered through this involvement.

Background

We need to move services from Shipley Hospital as it can no longer offer a safe, affordable and sustainable facility for modern health and care services.

NHS Property Services have carried out a technical appraisal of the building which concluded that the cost to repair and refurbish the building to provide the required standard of accommodation did not represent value for money.

By moving services out of Shipley Hospital into modern facilities, we can future proof these services in locations that provide improved facilities for patients and staff.

During the latest involvement period, detailed information was provided to the public about the reasons why services needed to move and the proposed new locations. A summary of the proposed changes is set out in the table below; a copy of the involvement document which includes more detailed information can be found at Appendix 2.

Service	Current location	Future location	Distance from Shipley Hospital	Other locations available
Outpatient physiotherapy	Shipley Hospital	Eccleshill Community Hospital	4.67 miles	GP practices Westwood Park Community Hospital St Luke's Hospital, Bradford Royal Infirmary
Community therapy	Shipley Hospital	Westbourne Green Community Hospital	1.85 miles	Services provided in people's homes as needed.

Our responsibilities, including legal requirements

Involving people is not just about fulfilling a statutory duty or ticking boxes, it is about understanding and valuing the benefits of listening to patients and the public in the commissioning process as well as when delivering services.

There are a number of requirements that must be met when decisions are being made about the development of services, particularly if any of these will impact on the way these services can be accessed by patients.

Public involvement legal duties

The legal duties on public involvement require organisations to make arrangements to secure that people are appropriately 'involved' in planning, proposals and decisions regarding NHS services.

NHS England's new [statutory guidance](#) provides the detail on these legal duties, when they are likely to apply and how they can be met. Key requirements of Integrated Care Boards (ICBs), trusts and NHS England include that they:

- assess the need for public involvement and plan and carry out involvement activity
- clearly document at all stages how involvement activity has informed decision-making and the rationale for decisions
- have systems to assure themselves that they are meeting their legal duty to involve and report on how they meet it in their annual reports.

Integrated Care Partnerships (ICPs), place-based partnerships and provider collaboratives also have specific responsibilities towards participation. There are statutory requirements for ICBs and ICPs to produce strategies and plans for health and social care, each with minimum requirements for how people and communities should be involved.

At a regional level this is done through the NHS West Yorkshire Integrated Care Board. NHS West Yorkshire Integrated Care Board has given delegated authority given to place committees of the Integrated Care Board for involvement activities that cover the geography of a place-based partnership and not the wider West Yorkshire region. For us locally, this is the Bradford District and Craven Health and Care Partnership Board.

A significant change introduced by the Health and Care Act 2022 is that, in respect of NHS England and ICBs, the description of people we must make arrangements to involve has been extended from 'individuals to whom the services are being or may be provided' to also include 'their carers and representatives (if any)'.

The triple aim duty

NHS England, ICBs, NHS trusts and NHS foundation trusts are subject to the new 'triple aim' duty in the Health and Care Act 2022 (sections 13NA, 14Z43, 26A and 63A respectively). This requires these bodies to have regard to 'all likely effects' of their decisions in relation to three areas:

1. health and wellbeing for people, including its effects in relation to inequalities
2. quality of health services for all individuals, including the effects of inequalities in relation to the benefits that people can obtain from those services
3. the sustainable use of NHS resources.

Effective working with people and communities is essential to deliver the triple aim.

Involvement duties on commissioners and providers

To reinforce the importance and positive impact of working with people and communities, NHS England, ICBs and trusts all have legal duties to make arrangements to involve the public in their decision-making about NHS services.

The main duties on NHS bodies to make arrangements to involve the public are all set out in the National Health Services Act 2006, as amended by the Health and Care Act 2022:

- [section 13Q](#) for NHS England
- [section 14Z45](#) for ICBs
- [section 242](#)(1B) for NHS trusts and NHS foundation trusts.

A requirement to involve the public is also included as a service condition in the [NHS Standard Contract](#) for providers.

Each of the organisations listed above is accountable and liable for compliance with their public involvement obligations. However, that does not mean that each organisation should carry out its public involvement activities in isolation from others within the ICC and beyond.

Plans, proposals or decisions will often involve more than one organisation, particularly in respect of integration and service reconfiguration (when we are looking to encourage closer working across different services or making changes to the way services are provided), in which case it is usually desirable to carry this out in a joined up and co-ordinated way, reducing the burden on both the public and the organisations themselves.

The legal duties require arrangements to secure that people are 'involved'. This can be achieved by consulting people, providing people with information, or in other ways.

Our involvement approach

An eight-page involvement document was produced with detailed information about why services need to move from Shipley Hospital, explanations of the current services provided, details about the proposed new locations and information about patient choice. This information was also produced in Easy Read and BSL video.

Our involvement approach enabled people to share their views in several ways:

- Online survey was live from 28 June to 4 August on our involvement platform at <https://engagebdc.com/shipley-hospital>, we ensured we allowed enough flexibility for any comments that came through by traditional post if they arrived shortly after the survey deadline
- Community outreach was supported by our voluntary, community and social enterprise (VCSE) involvement partners Here4BDCC who attended existing events and groups in the local area to gather people's views and encourage people to take part.
- Information sessions were held for people to talk to representatives from the health and care partnership, NHS Property Services, Bradford Teaching Hospitals Foundation Trust, and Community Health Partnerships about the changes and share their views.
 - 12 July 2pm to 4pm, Shipley Library
 - 14 July 10am to 12pm, Westbourne Green Community Hospital
 - 14 July 2pm to 4pm, Eccleshill Community Hospital
 - 25 July 6pm to 7.30pm, Online
 - 1 August 10-11.30am, Shipley Library
- Posters and leaflets promoting the drop-in sessions and the online survey were distributed in local community settings and businesses.
- Dedicated phone line available for people to call or text us to share views or to request information in different languages or formats.
- Printed copies of the survey were available for people to return by post to our freepost address.
- Easy Read information, an audio recording and BSL was available online at <https://engagebdc.com/shipley-hospital>

Responses to our involvement

In total, 217 survey responses were received and gathered both qualitative and quantitative information.

Some questions were skipped and the number of responses for each question varied. A summary report of the responses is detailed at Appendix 1.

- 152 people answered the survey for themselves (70%) and 66 people answered the survey on behalf of someone else (30%)
- 101 people had used or were currently using outpatient physiotherapy services at Shipley Hospital
- 78 people had not used outpatient physiotherapy or community therapy
- 37 people had used or were currently using outpatient physiotherapy services at a different location

- 14 people had used or were currently using community therapy services at Shipley Hospital
- 7 people had used or were currently using community therapy services at a different location

The involvement document was downloaded from the website by 81 people and the Frequently Asked Questions document was downloaded by 15 people. This suggests that most people responding to the survey did so without reading all the published information about the changes, reflecting in the small number of comments that focused on the future of the Shipley Hospital site.

Our analysis of the responses shows that we have had limited responses from people in the BD8 and BD9 areas who would be positively impacted by the change but are less likely to take part in involvement exercise. This is because the demographic breakdown of these areas shows that people living in these postcodes are often those that we could describe as 'seldom heard'.

Feedback from the engagement team suggests that, as might be expected, there was a higher level of interest among people who had recently used services at Shipley Hospital than amongst the general public. The engagement team found that many people they spoke to from the wider general public were unaware that Shipley Hospital existed or thought it had already been closed and did not want to share their views in the survey. The team also note that when actively reaching out beyond the BD17 and BD18 areas to engage a broader representation across the North Bradford area, people were less likely to want to share their views.

The Here4BDCC engagement team captured some of the comments they received when visiting community groups and from speaking to people who didn't want to go on to complete the survey. Some example notes from the engagement activity log are included below:

Older people's community hub, Idle:

Most people were ok with the decision as haven't used the hospital for years - most received physiotherapy at St Luke's and some within their own GP practice.

Group of disabled people from across Bradford District:

Majority have had physiotherapy treatment but have never used Shipley Hospital. Understood that building is not fit for purpose and as physiotherapy was still being offered at places near to them, they understood and supported the move of services. Members of the group received physiotherapy at Airedale Hospital, St Luke's Hospital or their GP practices.

Westbourne Green Community Hospital:

"After to speaking to by-passers around the area, no one was aware of the services that were in Shipley Hospital and didn't want to share any views about the change."

Men's support group Rockwell and Wrose Community Centre:

"The relocation of services had no impact as they do not use the services at Shipley Hospital."

Baildon Link community group:

"Mixed feedback - main negatives were due to transport issues."

BD9 Church group

“Some people were concerned about services moving to Eccleshill Hospital but most people were happy about the move to Westbourne Green.”

Demographics

A full breakdown of the demographics of those who responded is available in the accompanying report at Appendix 1.

Some headline demographic information:

- As expected, a significant majority of responses came from people in BD18 (37%) and BD17 (27%), which are the postcodes closest to Shipley Hospital. There were a lower number of responses from areas closest to Westbourne Green, such as BD9 (9%), BD8 (7%) and Eccleshill Community Hospital, BD10 (6%). Our involvement received small numbers of responses from across other postcode areas (15% in total)
- 135 respondents were female (65% of those who answered this question)
- 147 people described themselves as White British (69%) and 31 people described themselves as Pakistani (15%)
- 36 people identified themselves as unpaid carers (17%)
- 73 people considered themselves to have a disability (34%)
- Almost half of the respondents are over 60 (45%)

Headlines from the involvement

People's comments in the survey highlighted the following key themes*:

- Public transport routes
- Increased distance for Shipley residents and cost of travel to new locations
- Loss of local services from Shipley
- Providing physiotherapy in GP practices is positive for patients
- New locations may improve facilities
- Parking at new locations should be free and easy
- Importance of good communication, especially regarding patient choice
- Disabled access will be improved at new locations
- Concerns about impact on capacity & waiting times
- Environmental impact of longer journeys
- Potential increased demand for patient transport service

*listed in order of frequency.

Emerging themes - what matters most to people?

Three open text questions were asked in the survey:

- **Please tell us how you would be impacted by the changes and what could help make this a positive change?**
142 people answered this question.
- **Having read the themes from public engagement and the information about the potential locations, are there any other factors we should consider when making our decision?**
77 people answered this question.
- **Please tell us any additional information we should take into account.**
63 people answered this question.

Open text responses have been analysed to identify commonly occurring themes and identify questions or issues that may need to be addressed when services move.

Travel, public transport, patient transport service and parking

Around a third of people who provided comments expressed concern about travel to the new locations.

“Unless you can drive, this would be a lot of bother to catch public transport, taking health, age, and weather into consideration.”

“Locals to Shipley area will have to travel further for treatment. Most people seeking treatment might not have means of their own transport making it harder to get around.”

However, some people commented that the proposed new location would be more convenient, easier to get to from their home or workplace, have better parking facilities or improved access for people with disabilities.

“The change from Shipley to Westbourne Green would be beneficial as it closer to my home and within walking distance.”

“Eccleshill Hospital is closer to home with better parking facilities.”

“Closer to home, hopefully better disabled parking and access.”

Some people were specifically concerned about the additional cost of travelling further to access services.

“Eccleshill Hospital for BD18 and BD17 patients that don't have a car is 2 buses or taxi - simply not affordable would have to say no to appointment impacting my health further.”

“Both of the alternatives are in difficult areas to get for non-driving outpatients. Public transport is pathetic for both and on a fixed income travelling by taxi is unaffordable.”

“Neither site is on a direct bus route meaning this could have a financial implication for those on low income. Reimbursement of travel expenses is available but only if in receipt of certain benefits and this has to be issued at the cash office in the BRI.”

People described a lack of public transport options which could negatively impact on people's access to services, specifically in relation to a steep walk from the bus route that would take people from Shipley to Westbourne Green – a suggestion was made to consider changes to the bus route to be more direct to the hospital.

“BRI is considerably nearer to my community. Access to Westbourne would be much harder as bus services along the Keighley-Bradford Road leave a significant uphill walk when alighting near Oak Lane”

“Would it be sensible to divert some of the Keighley - Bradford buses so they stop a lot closer to Westbourne? Some joined up thinking within the Local Authority may be required here!”

More generally, some people described uncertainty about travelling to unfamiliar locations, and expressed concern about how this might impact older people or disabled people.

“People always assume people can get to these new places. If there was a service to get people there, it may be better.”

“It is not always easy for elderly or disabled to travel to locations that are unfamiliar to them. For instance, I do not know where Westbourne Green is.”

Some people commented on potential increased pressure on the patient transport service.

“Due to my disability it is difficult to use public transport. NHS transport will be difficult due to high demand”

“Hospital transport is not always available and can leave people hanging around for long periods.”

There were many comments about the need to ensure ease of parking at the new locations, the particular importance of disabled parking, and a suggestion that for physiotherapy and community therapy services access to disabled parking spaces should not be restricted to those with a blue badge.

“As long as car parking is not an issue the moves would not have a negative impact for me.”

“Enough parking is essential for any change of facility.”

“Parking needs to be taken into consideration as not everyone in need of physio has a blue badge for parking close enough to the entrance.”

Perceived loss of local services

A large proportion of people who responded said that there would be no direct impact to themselves or their family, but they were concerned about the move of services as part of a perceived reduction in local services. This loss of local services was not restricted to health and care services, but included lack of public transport, empty shops in the local high street and a general sense of decline in the area.

“Shipley as a whole is getting worse due to services being withdrawn from OUR local area.”

“This is a resource for Shipley and the surrounding areas, moving its to Eccleshill, which is out of the way, will be detrimental for the community.”

“Shipley is dying, and it's so sad.”

Physiotherapy services in general practice and in community

Many comments in the survey suggested that physiotherapy services could be retained in the Shipley area by being provided in local GP practices. The involvement document included information about outpatient physiotherapy continuing to be available in a range of locations including GP practices, however these responses indicate not everyone understood this before answering the survey.

“As there's no clear commitment to which 'other local sites' would provide physio or what % of the service and type of care (thinking about physio that needs equipment) would or could be provided e.g. in GP surgeries so I will assume that may not materialise or be very limited). Why can't physio be provided at Westbourne Green too? That would be an improvement.”

“Or at some of the larger GP premises in Shipley or Baildon or even Bingley - but with a clear commitment to this a plan for it and a published level of service there.”

“Make these services even more available within GP surgeries, even if it's just the bigger surgeries so it's easier to access.”

Some people also commented on the need for services to be available in the community and in people's homes if needed.

“Whilst it is good to have centres specifically for physio it would be good to see physiotherapists, it would be good to see physiotherapists also working in the community.”

“Home visits from physios and occupational therapists should be available.”

“Visits the patients at home so doesn't matter where the staff are based.”

Improved facilities and accessibility

People commented on the opportunity to provide improved facilities when moving services, and in particular to ensure good accessibility for disabled people.

“Shipleigh Hospital is very outdated with poor signage, no staff directing you inside where you need to go on arrival.”
“Hopefully better disabled parking and access.”
“All provision should be removed from the dated building.”
“The change will be positive for patient, staff, and NHS. It will save money and give better health services.”

Communication and patient choice

Many people, particularly those not currently using services, commented about the importance of having a choice of location for treatment. Others commented about the importance of raising awareness of the different services available, where they are located – this is supported by the low awareness highlighted in some communities during this and previous involvement exercises.

“I have had no need for physiotherapy, not yet, but may do in the future. I would like to then think these would be a choice of where to go if I have to use said services.”
“Maybe communicating with people, where the new services will be allocated and how to best access them.”
“Raise more awareness of the services.”

Demand on services and waiting times

People were concerned about long waiting times and the increasing pressure on services. Some people were concerned that the relocation of services would lead to an overall reduction in service or increased pressure elsewhere in the system.

“Also think you need to invest in more physio as I'm on a 42-week waiting list.”
“Surgeries are already busy and may cause problems with existing GP appointments which is a struggle to get through as it is.”
“Location will likely be oversubscribed as insufficient capacity resulting in increased waiting times.”

Environmental considerations

People expressed concern that moving services away from Shipleigh Hospital would mean that people were unable to walk or use public transport to attend their appointments, leading to an increase in traffic.

“More cars on an already busy commuter route - environmental impact.”
“You're building a car culture, are we not supposed to be in a climate emergency, should these facilities not be within 15 minutes WALKING distance!”

Quantitative responses

When asked about the proposed new locations for services, for both outpatient physiotherapy and community therapy almost half of people said these were either poor or very poor options.

We propose to move outpatient physiotherapy services from Shipley Hospital to our preferred new location of Eccleshill Community Hospital, as well as these services remaining available at GP practices and other sites in the local area. After reading the information we have shared with you, would you describe this as:		
Very good option	14%	30
Good option	21.5%	46
Neither good nor poor	16.4%	35
Poor option	16.4%	35
Very poor option	31.8%	68

We propose to move community physiotherapy services from Shipley Hospital to our preferred new location of Westbourne Green Community Hospital. After reading the information we have shared with you, would you describe this as:		
Very good option	11.9%	25
Good option	16.5%	36
Neither good nor poor	22%	48
Poor option	17.4%	38
Very poor option	32.1%	70

When asked about the impact of the proposed changes for on themselves or their family, roughly a third of people said there would be no impact.

How would the proposal to provide outpatient physiotherapy services from Shipley Hospital to our preferred location of Eccleshill Community Hospital as well as local GP practices and hospital locations affect you and your family?		
Significant positive impact	11.7%	25
Slight positive impact	11.3%	24
No impact	27.2%	58
Slight negative impact	18.8%	40
Significant negative impact	31%	66

How would the proposal to provide outpatient physiotherapy services from Shipley Hospital to our preferred location of Westbourne Green Community Hospital affect you and your family?		
Significant positive impact	9.7%	21
Slight positive impact	7.8%	17
No impact	34.1%	74
Slight negative impact	17.5%	38
Significant negative impact	30.9%	67

Equality analysis

The survey data was analysed to establish whether any protected groups had responded significantly differently to the survey questions. Where differences have emerged, they are detailed below:

People from ethnic backgrounds other than White British were more likely to report no impact from the move of services to Eccleshill.

How would the proposal to provide outpatient physiotherapy services from Shipley Hospital to our preferred location of Eccleshill Community Hospital as well as local GP practices and hospital locations affect you and your family? (Filtered responses – exclude White British)		
Significant positive impact	7.1%	4
Slight positive impact	8.9%	5
No impact	48.2%	27
Slight negative impact	12.5%	7
Significant negative impact	23.2%	13

People from ethnic backgrounds other than White British were more likely to report a positive impact from the move of services to Westbourne Green.

How would the proposal to provide community therapy services to Westbourne Green affect you and your family? (Filtered responses – exclude White British)		
Significant positive impact	24.6%	16
Slight positive impact	23.1%	15
No impact	27.7%	18
Slight negative impact	10.8%	7
Significant negative impact	13.8%	9

Comments from media and social media coverage

In line with our communications and involvement plan, we issued press releases to local media resulting in news articles both online and in print. We also promoted the involvement with both organic and paid social media posts, encouraging people to attend the drop-in sessions and complete the survey. During the engagement period we kept a log of coverage and actively responded to social media comments to encourage people to share their views.

A detailed log of social media activity can be found within Appendix 4.

Some example comments from online news articles and on social media:

“They may as well start closing the doctors too as you have a hell of a job getting an appointment and if you have to get to a hospital and are too old to drive it cost a lot of money in taxis or you have to try and get on more than one bus. Being disabled is a very painful thing to travel and stand waiting. They may think things are for the better but believe me they are not. They don’t have any trouble putting our poll tax up every year do they. I could go on about it but in the end they will do just what they want.”

“Such a nice hospital and was handy for x-rays and physio appointments. It is a lot harder for people to travel. To hospitals which are sometimes the other side of Bradford.”

“Do give them your views as currently proposing Eccleshill or BRI to replace the physio that Shipley provided”

“A lovely hospital, definitely should stay open.”

“Will be a great loss...Norman Rae will be turning in his grave.”

“How does that benefit people centralising services. More traffic into Bradford I am assuming that's where it will end up.”

Previous engagement

Patient and public involvement and the opportunity to share what is important to people has been at the heart of the review of Shipley Hospital since it began.

In 2019, we held a series of events where people told us about what was important to them. At that time, x-ray, outpatient clinics, a counselling service as well as physiotherapy occupied the building.

In November 2022, after the COVID-19 pandemic, we restarted the review and an online survey ran for four weeks during December 2022 and January this year. This was important because the services provided from the hospital had changed. The survey gave us a chance to ask people to share their experience of using the physiotherapy and community therapy services at Shipley Hospital and check what was important to them.

In 2019 and in 2023, people told us that the most important things to them when moving a service to new location were:

- The high quality of the current service should continue.
- Not to lose the personalised service/staff relationships that people value.
- The changes should aim to reduce waiting times and improve availability.
- Services should stay in the local area wherever possible.
- Getting to the new location could be difficult for some people, not everyone has a car so public transport should be easy and patient transport services should continue to be available for those who need it.
- The new location should not disadvantage people who have a disability or additional accessibility needs.
- Shipley Hospital is a much-loved local facility and part of the local community.

Detailed reports on this involvement work can be read at <https://engagebdc.com/shipley-hospital>

Next steps

This involvement report will form part of the information presented to our Bradford District and Craven Health and Care Partnership Board in order to make a decision about the proposed new location of services. The decision making will also look at any actions we can take or have already taken to mitigate against some of the concerns and issues highlighted by people sharing their views.

The information will also be shared with Bradford Teaching Hospitals NHS Foundation Trust Board, our local Health Overview and Scrutiny Committee, West Yorkshire Integrated Care Board, and NHS England for assurance.

The report will be shared with everyone who provided their contact information as part of the involvement; we will keep people informed of decisions about the future of services and how they can continue to be involved.

Appendices to the involvement report - shared as PDFs within the Board papers

6a. Summary report of survey responses including demographics

6b. Involvement document

6c. Involvement survey

6d. FAQ document

6e. Here4BDCC involvement activity log

6f. Social media log