

Estates Master Plan

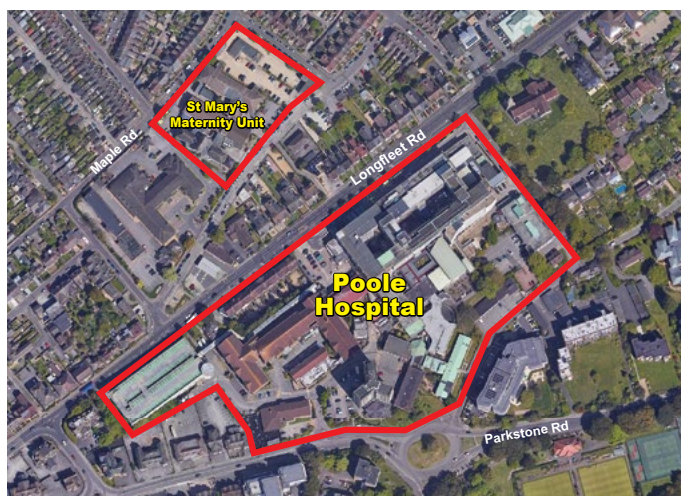
for
University
Hospitals Dorset
(UHD)

2022-27



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Poole Hospital

We are #TeamUHD



The Royal Bournemouth Hospital



Christchurch Hospital

1 Introduction

Serving our local population and reducing the need for healthcare informs the work of the Dorset Integrated Care System (ICS). When hospital services are needed the rightful expectations are that these are high quality, safe, convenient and caring.

To achieve the best outcomes from the excellent teams working in Dorset's NHS, an extensive review of the evidence, best practice, and widespread public and staff engagement generated Dorset Clinical Service Review (CSR) in 2017. Following Judicial Review and Independent Reconfiguration Panel recommendation it was supported by the Secretary of State for Health in 2019.

The CSR provides the clinical strategy to improve health outcomes and use the available skilled staff and partnerships to deliver the best care, within the resources available, for the public.

Key aspects of the CSR are:

- Developing prevention at scale to avoid ill health.
- Integrated community and primary care, to provide local, joined up health and social care, built around GP services in Primary Care Networks.
- Digital Healthcare, harnessing technology to support patients, streamline care and ensure the right information at the right time.
- Workforce development, to support and grow the health and social care workforce, develop new roles and adapting to the challenges of recruitment and retention.
- One Acute Network, joining up the hospital services to meet the challenges, with Poole Hospital becoming the major planned hospital and Royal Bournemouth Hospital becoming the major emergency hospital.
- Mental health acute care pathways (ACP) to ensure a similar approach is applied for improving these services.

The CSR reviewed health needs and trends including the growing and ageing population of Dorset, as well as health inequalities and access to care.

Since the CSR the clinical and wider strategies have been further developed, including the learning from the COVID-19 pandemic. The following key changes are also important factors in the site masterplans.

Firstly, the creation of Integrated Care Boards (ICB's) with the explicit purpose to:

- 1 Improve outcomes in population health and healthcare
- 2 Tackle inequalities in outcomes, experience and access
- 3 Enhance productivity and value for money
- 4 Support broader social and economic development

Other changes include:

- Infection Control and wider resilience in the face major changes and disruption to healthcare, some of which we cannot predict.
- Better diagnostics and early detection, following the Professor Richard's review and developing the Community Diagnostic Hubs.
- Last, but mostly importantly, climate change, with the need to recognise the climate emergency is also a health emergency, which is already causing the need to change how we live and work, while adapting to more extreme weather.

As well as hospital services being important to the community, the NHS is part of the community, as an “anchor institution” and impacts the community as an employer, purchasing of goods and services, provision of education, research and wellbeing, and as a partner in many issues including transport. The support of the public, in volunteering, donating to hospital charities and standing up for healthcare being free at the point of delivery, are never taken for granted.

All these important trends inform the clinical strategy of University Hospitals Dorset (UHD) and from that informs the Estates Masterplan, as set out in this document.

2 Clinical Strategy for UHD

Within the context set out in the introduction, the clinical strategy for UHD has numerous key aspects which shape the estates strategy. These include:

- a. Creation of the **Planned Hospital at Poole** with the construction of the new theatres block, extensive refurbishments, and removal of backlog maintenance. This allows all year-round elective services, not affected by emergency pressures. This reduces the risk of cancellation, and supports modern, productive healthcare environments.

In addition, Poole will retain many of its current services, including a 24/7 walk in emergency care, outpatients, therapies, diagnostics and cancer treatments which will all continue to be delivered from the Poole hospital site. Services will also include specialist inpatient rehabilitation, for trauma, neuro, and community hospital beds.

Due to the high volume of elective care, especially for day surgery and inpatient treatments Poole will remain a busy hospital, at the heart Dorset's NHS.

- b. The **Emergency Hospital at Royal Bournemouth** will bring together teams currently split across the conurbation, so as to provide better services, with greater resilience, allowing consultants and specialist staff to be available for more hours in the week, and providing quicker access to specialist teams and equipment, in fit for purpose facilities. This includes:
- New Maternity and Children's inpatient facilities, co-located.
 - New Emergency Department (ED) and Critical Care Unit (CrCu).
 - New pathology hub serving all of Dorset, in cutting edge facilities.
 - New and refurbished wards, with same day emergency care (SDEC) to provide prompt, expert care in a single day, avoiding the need to be admitted.
- c. **Christchurch Hospital** has already undergone significant investment to create a vibrant community hospital, as well as co-location with GP and pharmacy, care home and senior living. The ambition to fundraise and build a new Macmillan Specialist Palliative Care Unit and create a senior living village, remain the key aspects of Phase 2.
- d. UHD has an interest in **other services and locations**, including:
- Health Village at Beales, Dolphin Centre in Poole, providing flexible, high volume clinics and diagnostics, as well as supporting the high street and making access easier for patients.
 - Sterile Services based at Alderney Hospital serving UHD, with the need for significant refurbishment over the next few years.
 - Yeomans House and Canford House as offices for corporate office-based staff, including patient appointment bookings.
 - Linear accelerator for cancer treatments, based at Dorset County Hospital, providing greater access for patient in the West of Dorset.
- e. **Wessex Fields**, adjacent to RBH, represents a significant opportunity, working in partnership with BCP Council and other partners, including Bournemouth University, research and education sectors. This opens the way for creating med-tech, high value-adding jobs co-located with the hospital campus and linked into the Dorset ICS, with its well-developed informatics, and whole system working. In the long term developing a medical school, would further add to the critical mass for use of the unique location.

The location also has significant potential for further key worker accommodation, allowing walk to work and affordable housing to attract and retain staff to Dorset.

The completion of the road and cycle access linking to the hospital, reducing congestion on Deansleigh Road and Castle Lane East, is part of the wider green travel plan for promoting better bus, bike, carshare and work from home, as alternatives to single occupant car journeys.

3 Estates Strategy: Exec Summary

The estates strategy is based upon a masterplan for the 3 main UHD sites, which aim to:

- Delivery the clinical strategy for better patient care.
- Support the Green UHD plan, including carbon reduction, sustainable travel, climate adaptation and biodiversity.
- Offer value for money and best use of resources.
- Meet all the planning requirements and conditions set by the Council.

The last set of significant clinical and estate changes in UHD were in the late 1980's with the creation of the Royal Bournemouth Hospital and the Philip Arnold Unit at Poole and a range of other changes completing in the early 1990s. Since then Dorset has not had significant clinical service or estates changes, or the investment to make this possible.

This has changed as a result of the Clinical Services Review setting the blue-print, and allowing investment from three sources: The £201m HM Treasury fully-approved building works which are already underway; £205m of the New Hospital Programme which has been supported as a strategic outline case (SOC) in 2021, along with a linked plan for St Ann's and Dorset County Hospital schemes; thirdly UHD's own funding plus charitable support. Together this represents nearly half a billion-pound investment in the local NHS to create a once in a generation step change improvement.

Combined with developing our workforce, investment in technology and equipment and the wider CSR service improvements and work as an integrated care system, this represents not just catching up, but a nationally significant step up, setting new standards in healthcare.

Planning applications have been successful for both Poole and RBH to support the current set of works underway. The first phase of Christchurch Hospital is also completed.

The next set of significant changes by site are set out in more detail in the later sections of this strategy. In summary they are:

Poole: Significant internal refurbishments of wards, theatres and facilities, and removal of large amounts of backlog maintenance. This creates the planned and community hospital hub. The conversion of surplus outlying land and buildings can then create additional key worker housing.

RBH: A new build ward and theatre block, significant internal refurbishments, creation of a link road to the Wessex way with barrier controls. This completes the major emergency hospital. A masterplan for Wessex Fields will be developed but until then use of the UHD land will be used for contractors' compound, to reduce the pressure upon patient, visitors and staff use of the hospital grounds, as the site is seeing significant building works.

Christchurch: Creation of the new Macmillan Unit, which then releases land to expand the affordable senior living and community hub facilities on site.

A Green travel plan has already reduced traffic around the hospitals, and across the conurbation, whilst reducing air pollution and promoting healthier lifestyles. Significant further steps are planned and set below.

Supporting the masterplans are specific infrastructure plans, covering water, electricity, infection control, oxygen, ventilation, consequential improvements, and critical infrastructure requirements. These will include a de-carbonisation strategy.

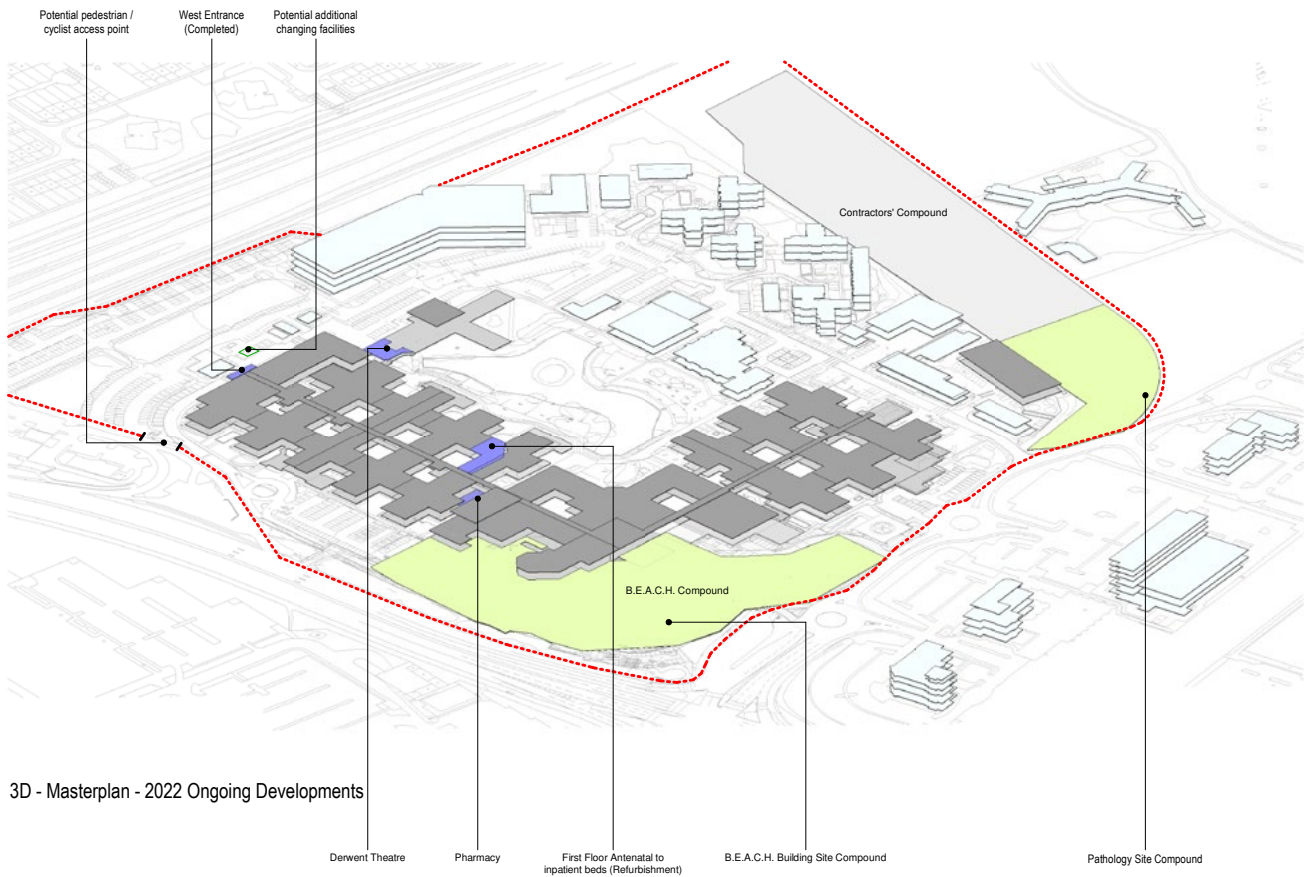
In developing a 5-year estates masterplan there is need for flexibility for the "unknown unknowns" - things that despite careful planning will still be required over the next 5 to 25 years. Therefore, reference is made to both firm plans and to potential opportunities, (the latter usually subject to funding and planning approval) and so some areas of each site are left for future master planning.

4 Royal Bournemouth Hospital

RBH site prior to start of building works in 2021



RBH site 2022



3D - Masterplan - 2022 Ongoing Developments

2022 - Construction Underway



Key features to note in 2022 are:

- Major site compound is at the front of the hospital.
- Pathology Hub construction is underway, with a separate compound.
- One-way traffic around the front of the site.

Zoned site plan

Most of the RBH site is directly providing patient care, based around the L-shaped main building. The wards are based on the nucleus designs in a cruciform shape, maximising light but providing some restrictions on layouts, which is a factor when areas are refurbished - a major part of the future plans for the site.

Other important clinical buildings on site include the Jigsaw Cancer & Women's Health building, the Derwent ward and theatres.

Ancillary buildings along the lake include the Education Centre, Dorset Heart Club Rehabilitation Centre and Tops Children's nursery.

There are over 200 residences, mostly made up of single rooms and shared living, for student/new to the area staff.

The waste incinerator provides heat to the site, and treats clinical waste, ensuring there is no waste to landfill.

Site access

Since opening, the RBH site has had a single access road, Deansleigh Road, from Castle Lane East. As further developments have been granted for offices, a hotel, law courts etc., so Deansleigh Road and the junction have got busier, putting pressure upon the road infrastructure.

RBH staff and visitors have had periods where traffic and roadworks on Castle Lane and onto Christchurch have created grid lock and slowed ambulances. As such a strict limit of permits for NHS staff parking now mean over half of UHD's staff arrive at work other than by car despite the limited public transport and cycle routes, compared to other city regions.

High volume services have also moved off site to reduce traffic and provide better access. These include 100,000 blood tests per year, 60,000 sexual health clinical appointments and 40,000 outpatient physio attendances (4,000 trips per week less). In addition, a significant number of clinic appointments are now undertaken “virtually.” Further information and future plans are discussed in the later section on transport.

Planning permissions

The approved planning permission granted by BCP Council in 2020 included:

- The Major new building at the front of the site, the BEACH building for Births, Emergency Department, Antenatal, Critical Care and Child Health. Next to this is the new Main Entrance, Patient and Visitor Centre (MEPV). Construction runs from 2021-2024.
- Dorset Pathology Hub, serving the whole county in a purpose-built facility on the corner of Wessex Fields.
- Improvements to cycle, bus and foot access to the site, and new changing facilities.
- The moving of most public, visitor and staff parking to the rear of the site, to prioritise ease of access for sustainable travel and drop offs and disabled access.
- Permission for a multi-storey carpark, and an additional building for clinical use.

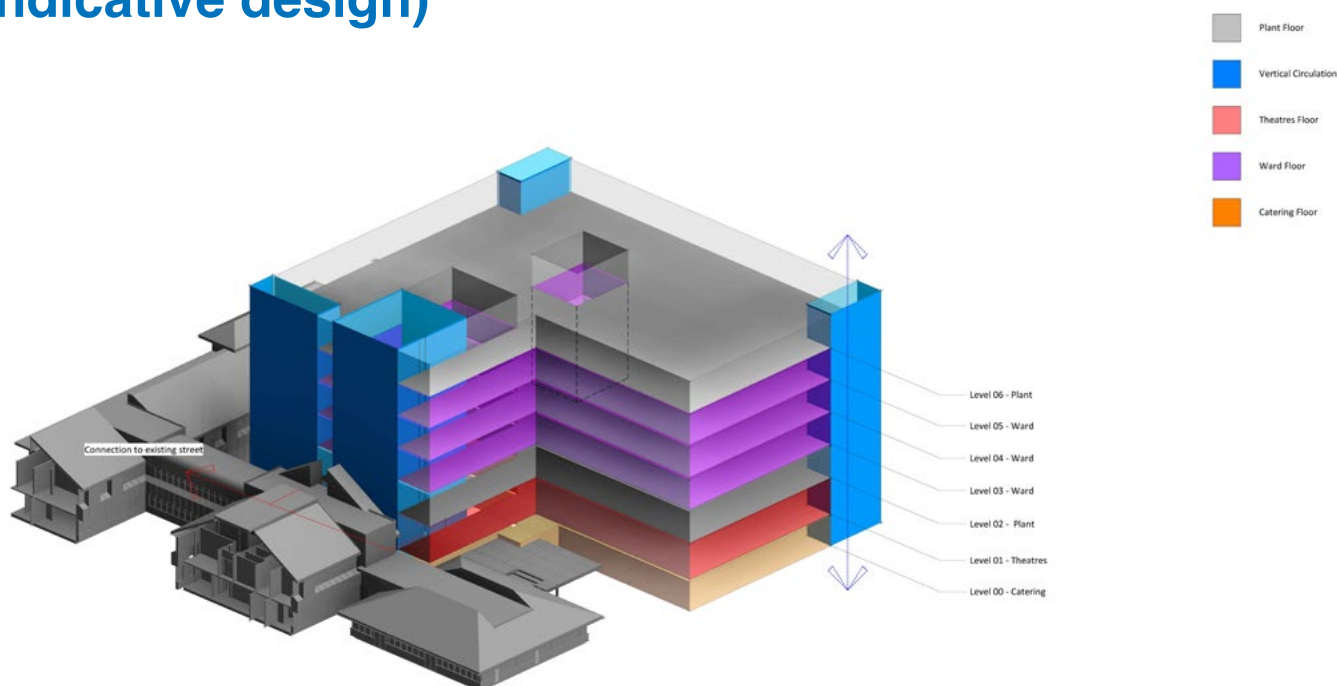
Since that approval two significant developments have occurred, necessitating an update to the masterplan and a new planning application. The first is new standards in healthcare space requirements, and the second is the purchase of 5 acres of Wessex Fields, adjacent to the site.

The **new NHS space standards** required as part of the national funding for NHS buildings has been updated. In particular the higher ratio of single rooms, plus clinical support and associated space, has required a larger footprint for the same level of services envisaged when the original planning application was submitted in 2019. Other areas requiring greater space include operating theatres and same day emergency care (SDEC) facilities. These larger spaces are a result of several factors, including infection prevention, which the pandemic has brought into sharp focus.

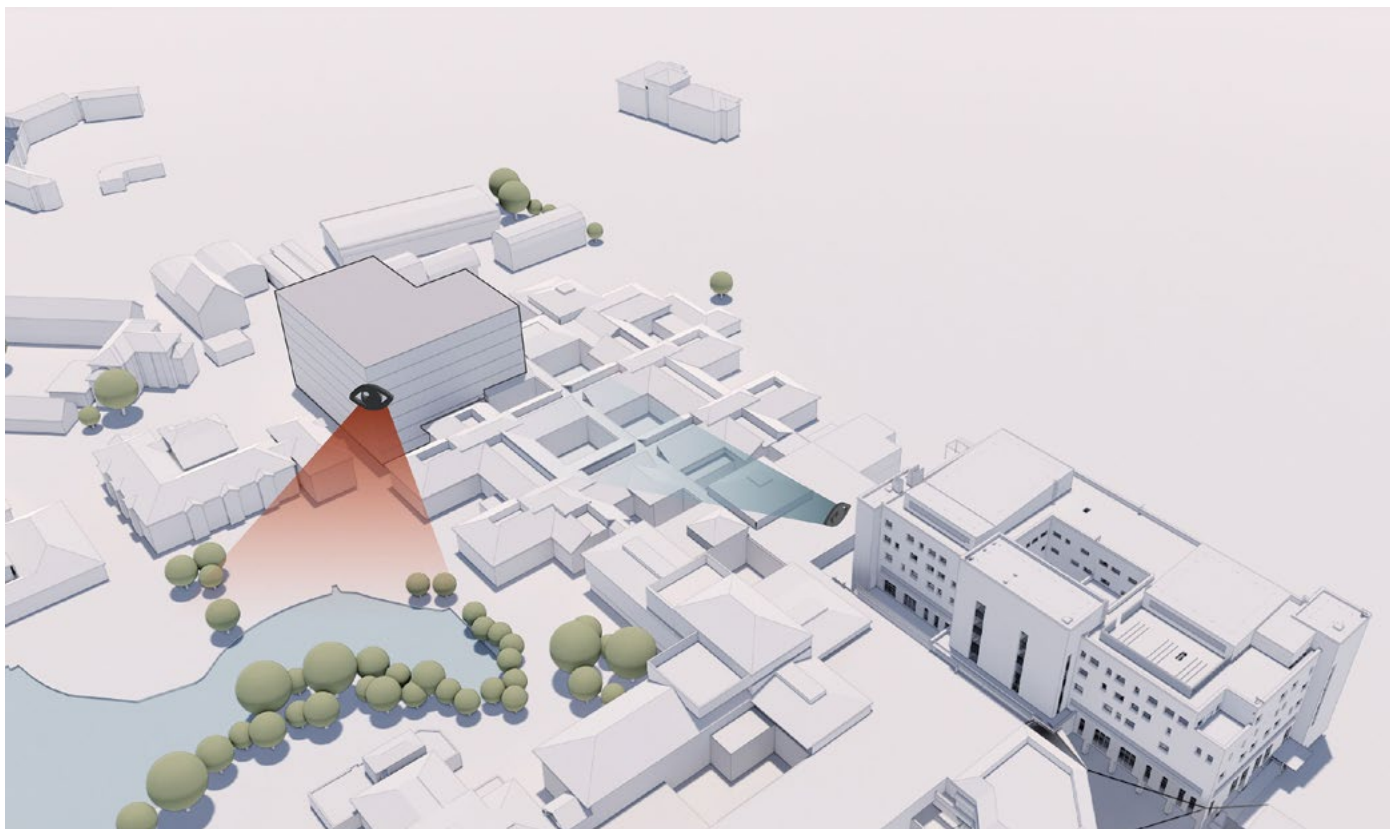
Single rooms will also enhance privacy and dignity.

The patient numbers, staff numbers and other planning assumptions remain the same, but the additional space required to house those services has increased significantly. Having undertaken a thorough options appraisal, the best solution is a new building on the current catering area.

Proposed new building on the current catering site (indicative design)



This also enables a modernisation of the kitchens serving the hospital, which will allow greater food choice for patients and staff. (The location of this is identified in the 2023 site plan below).



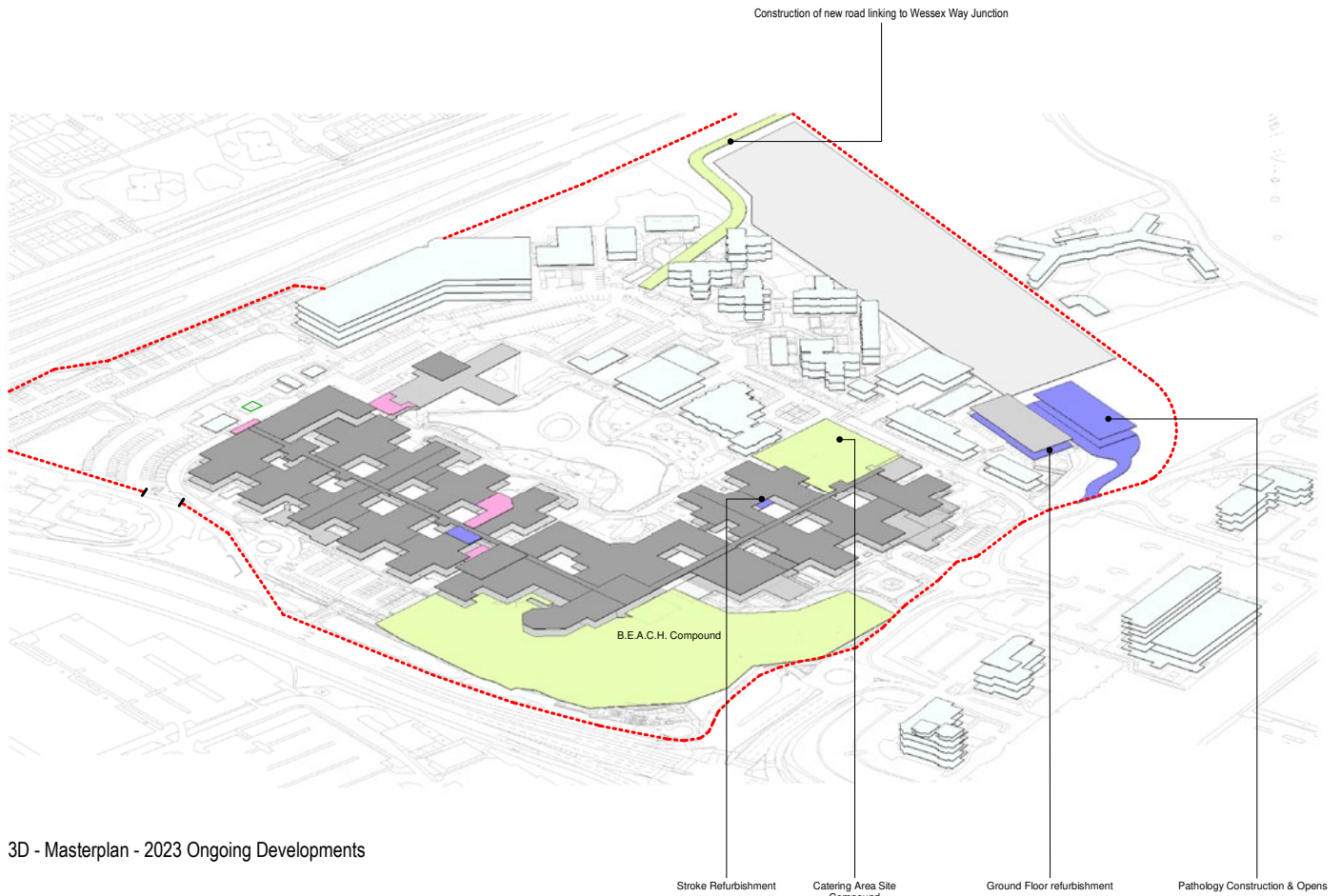
The inpatient wards will also have views onto the lake and grounds. It will complement the BEACH building having the same external materials and similar height.

The second main change is the **road junction and Wessex Fields**. The junction has been built (see inset photo) but does not yet connect to the RBH site. A cycle way and barrier-controlled road linking the junction to the hospital will reduce traffic congestion and avoid generating new demand or traffic cutting through the hospital site. Further information is in the section on transport.



Existing built junction

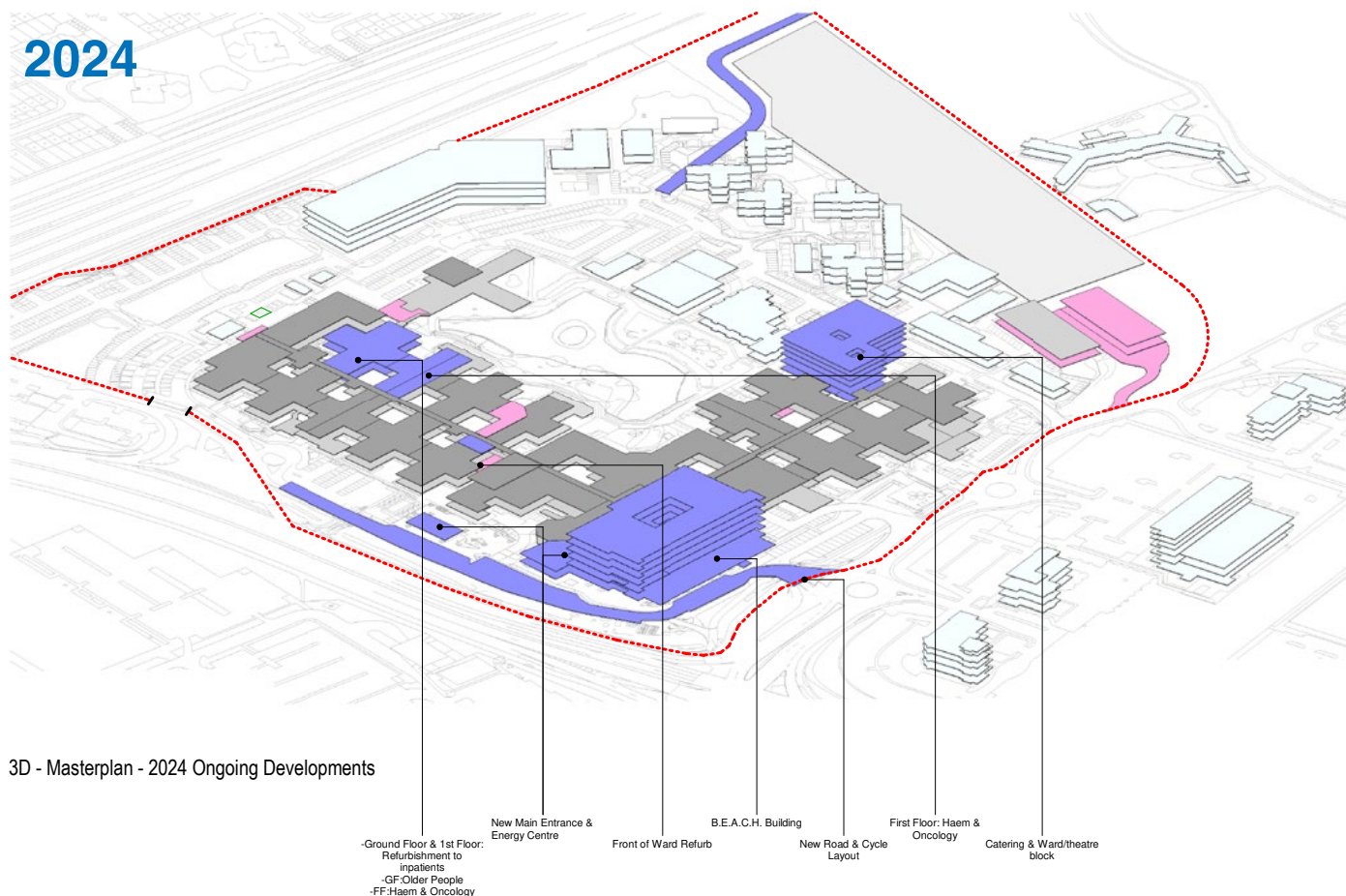
Cycleway and barrier controlled road providing second access onto the Royal Bournemouth Hospital site. (space indicative only and subject to design and planning).



Key points

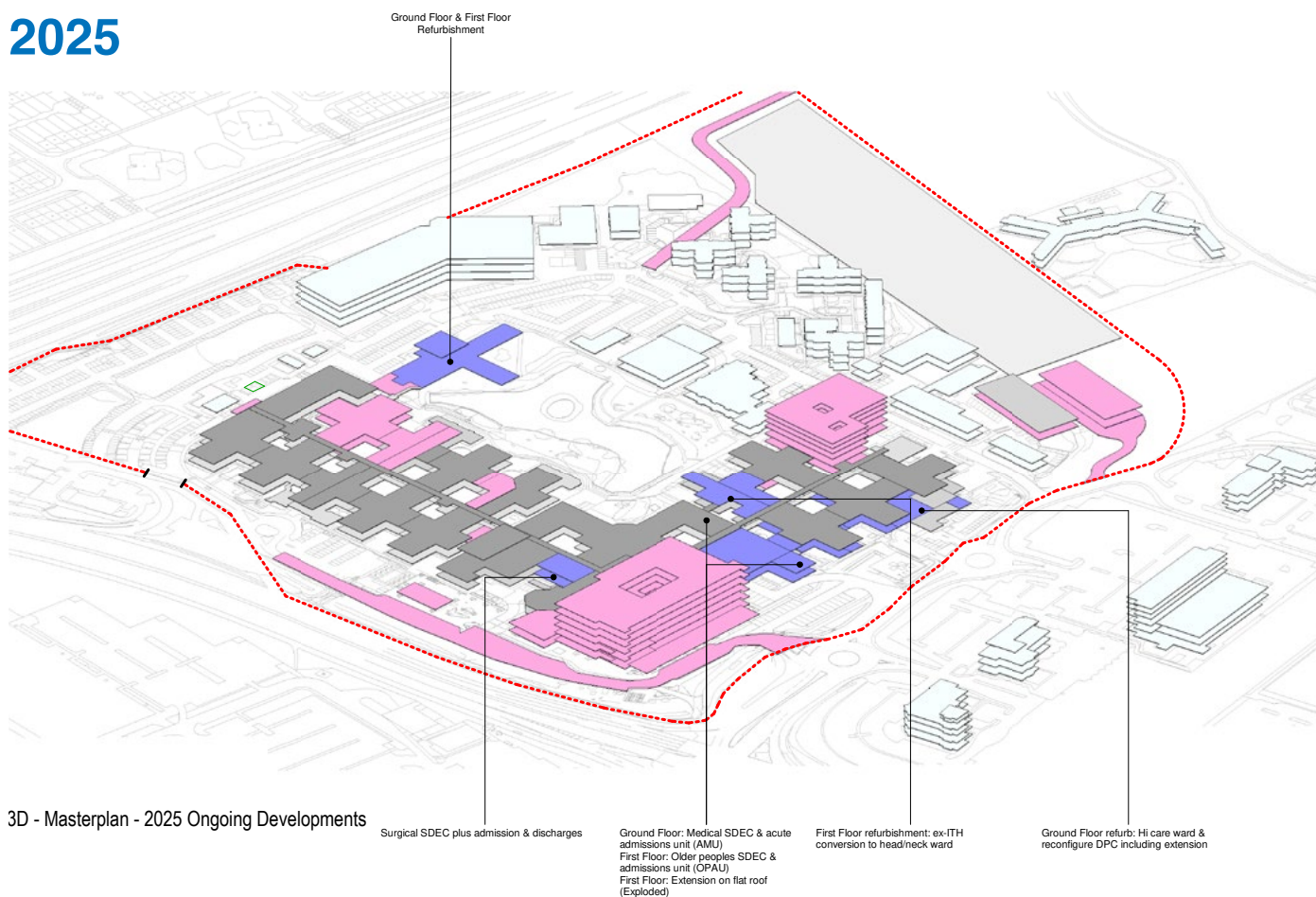
- BEACH and Pathology construction continues.
- Road access works to Wessex Way may start (subject to planning permission).
- Enabling works for “Lakeside” development (currently catering area).
- Numerous refurbishment projects (SAU/Stour/Wards etc.)
- Some minor enabling works (link to AMU and flat roofs/doctors mess).
- Pathology hub opens towards year end

2024

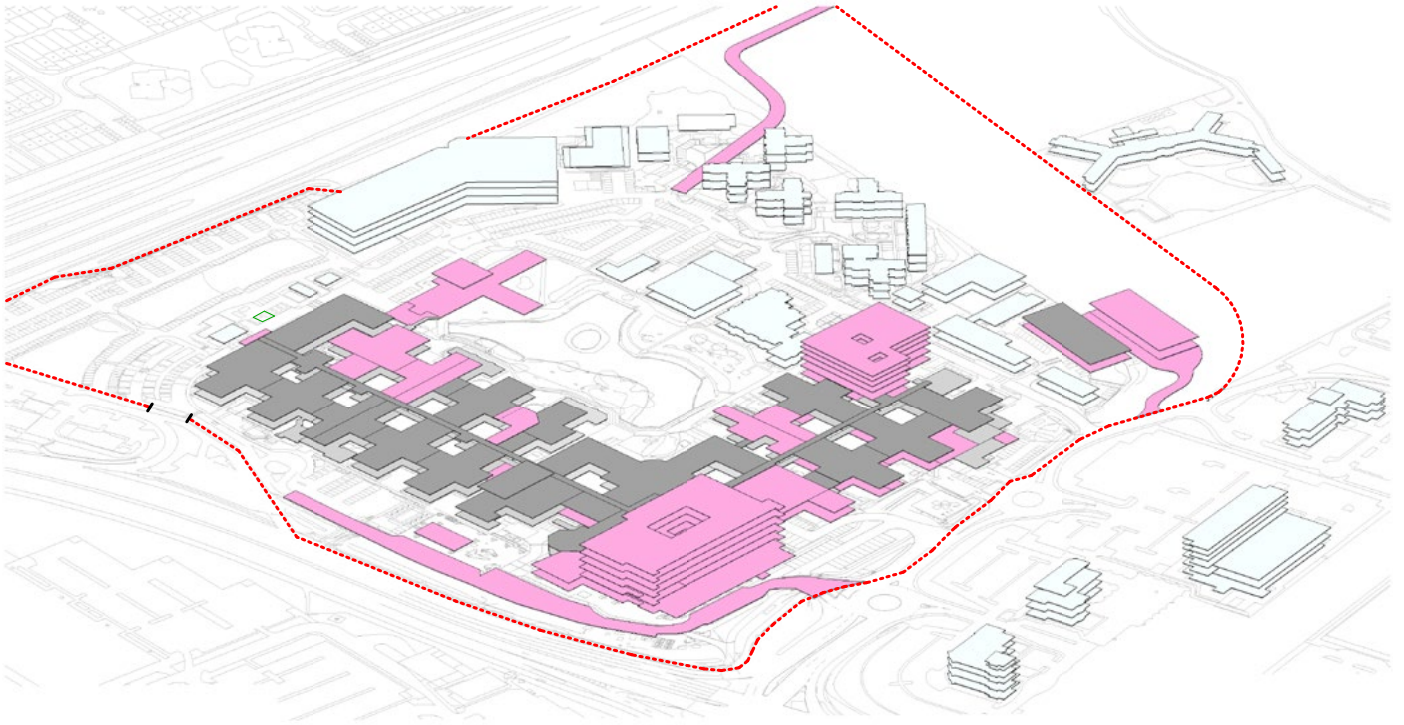


- BEACH building opens, main entrance patient and visitor centre (spring) clinical services (winter).
- Lakeside clinical services open in former catering area (winter).
- Numerous refurbishments start, including ex-pathology space into wards.

2025

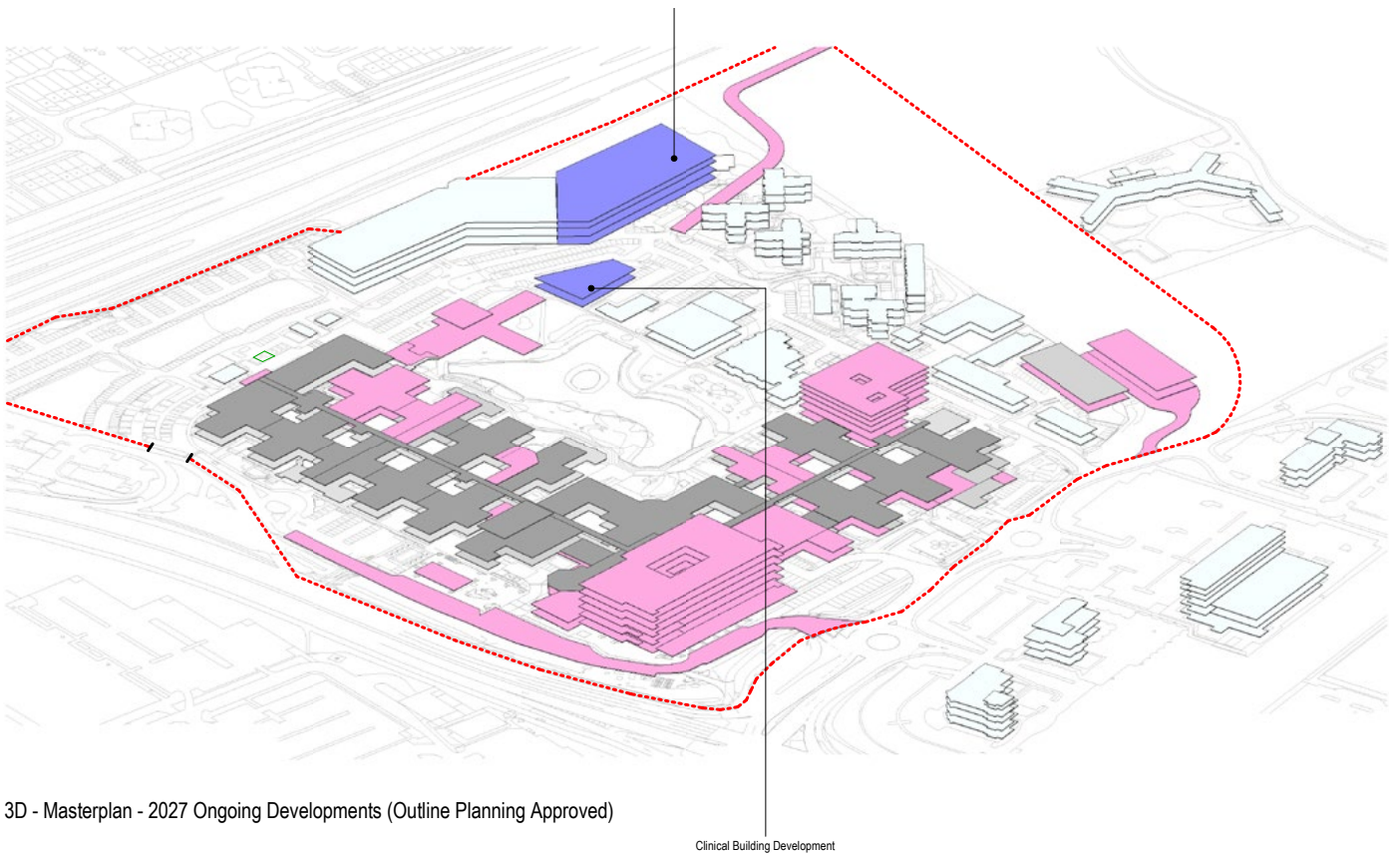


2026 end state of funded projects



3D - Masterplan - 2026 Current End State of Programme

Long-term (2025+) - existing outline planning permissions (but not funded)

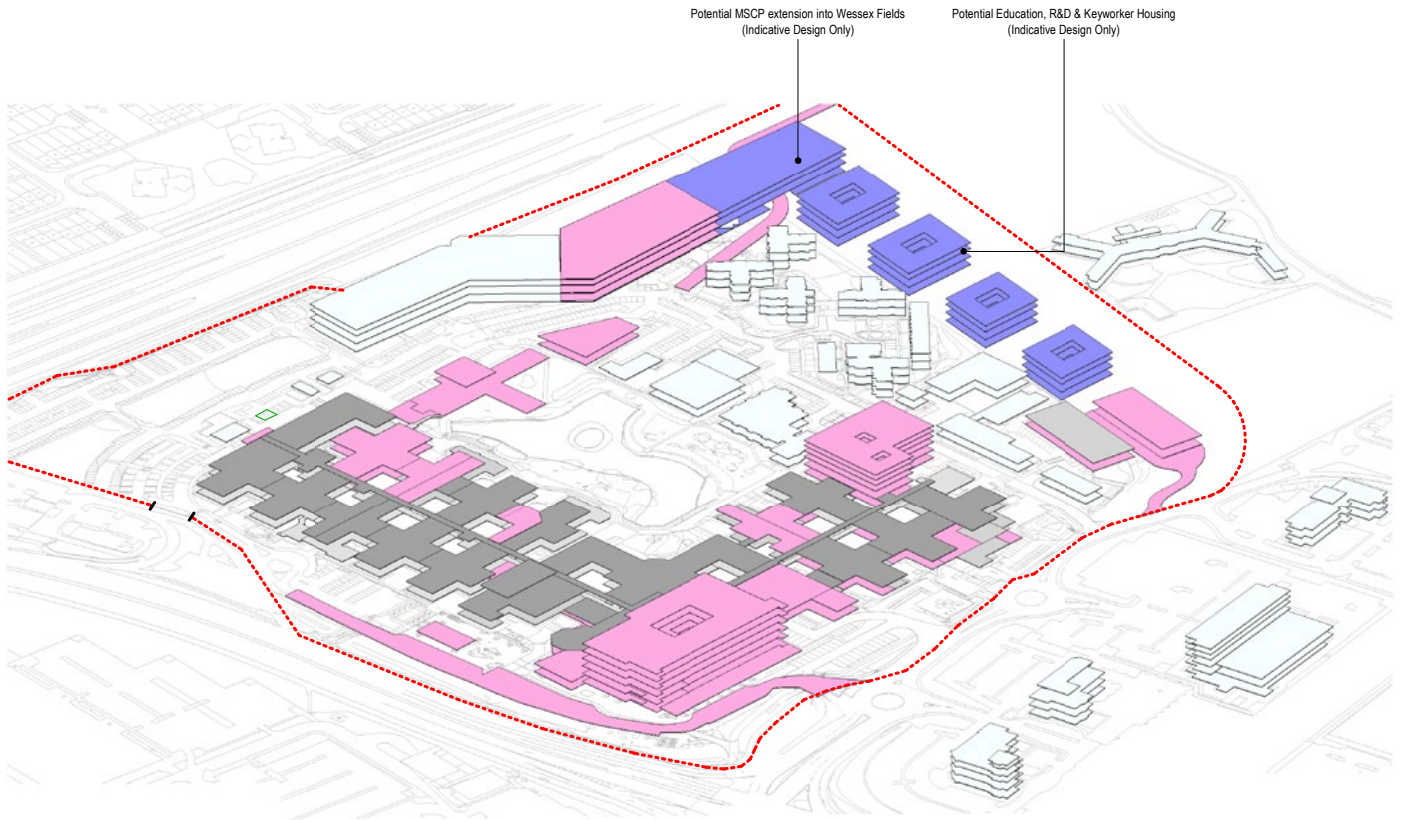


3D - Masterplan - 2027 Ongoing Developments (Outline Planning Approved)

Clinical Building Development

Longer-term - indicative only.

Wessex fields development of education, research and med-tech facilities on lower floors, and high-quality key worker housing on upper floors.



3D - Masterplan - 2027 Ongoing Developments (Possible Wessex Fields Master Plan)

Visuals

BEACH Building

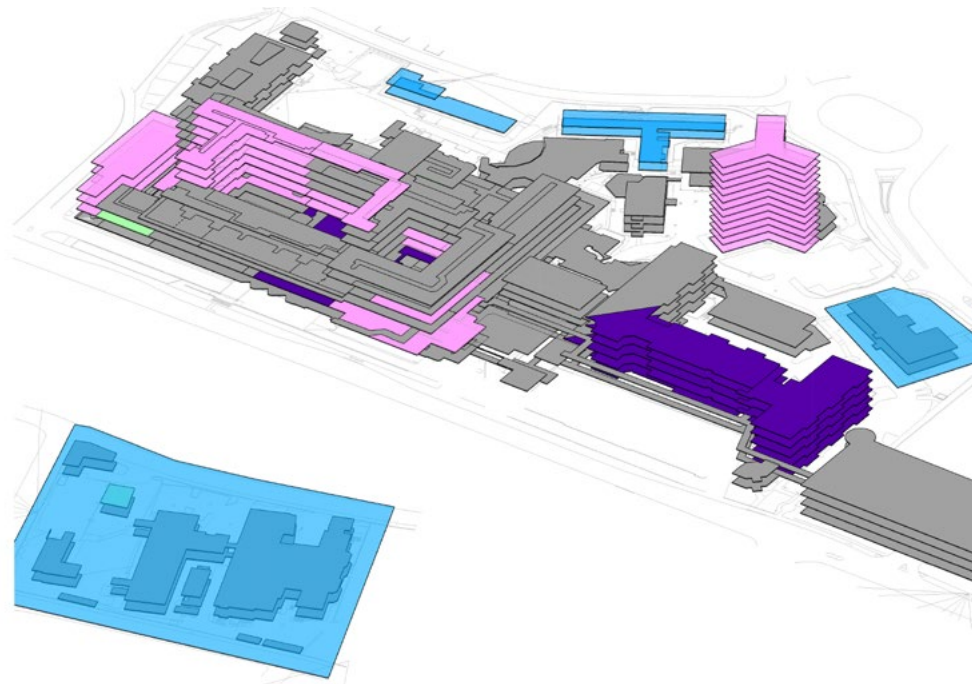


Pathology



5 Poole Hospital

The Poole developments are underway with major investment and change to become the major planned care elective hospital for Dorset. In addition, 24/7 walk in urgent care, outpatients, therapies, diagnostics, community services, rehabilitation and many other services will continue to be developed on site. Major estates investment and changes will continue until at least 2027, including reducing the significant estates maintenance backlog.



There has been a hospital on this site since 1908 and the 'new' hospital was designed in the 1950s and opened in 1962. The major additions have been extensions to St Mary's Maternity Hospital and the building of the Philip Arnold Unit which opened in the early 1990s.

Extensive refurbishments have occurred over the years, to wards, clinics and other services, including the Ladybird Centre for breast care, the Eddie Hawker wing, including rehabilitation, and various other changes. The building works planned include extensive refurbishment and replacement.

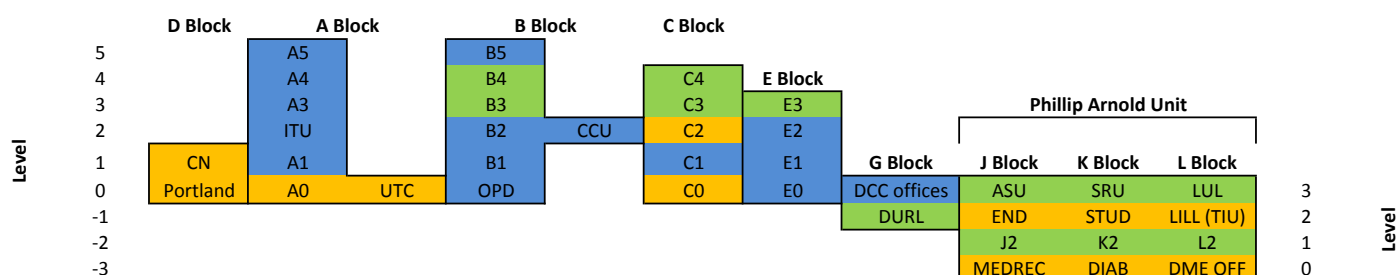
Poole Hospital comprises a high-rise building occupying about one quarter of the RBH site area but having only a slightly smaller internal area. Many of the facilities do not meet modern healthcare standards. There are over 250 key worker residences, most in the 13 storey Parkstone House and the rest in houses nearby. A multi-storey car park provides patient and visitor parking, whilst most staff parking is at the nearby Poole Stadium. Being a town centre location bus and rail links are nearby.

Whilst the number of patients treated at Poole will increase, their time in hospital will be shorter, as 85% of surgery is now day case. As such the physical space required will be smaller. This allows the existing space to be used for larger bed spaces and support areas, retrenchment of offices and ancillary buildings into the main building and spare space to be potentially offered to partners in health and social care.

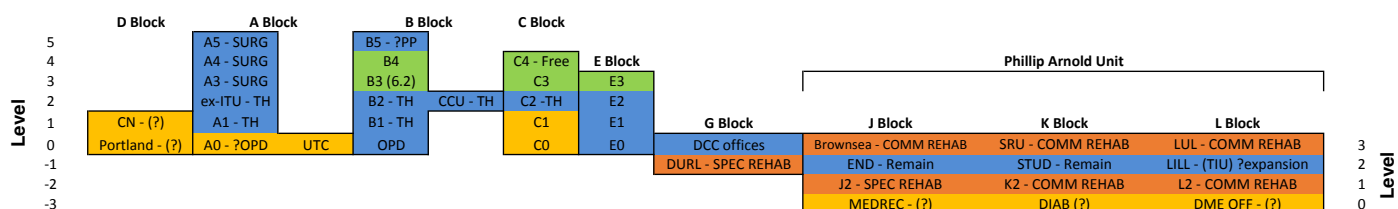
Rather than dispose of land that will become surplus, especially after the opening of the new Maternity and Child health units at RBH, UHD would seek to create key worker accommodation. The location close to town with good transport links and Poole Park should make these attractive. This fits with the planning strategy for the local authority.

Given the complexity of the site the simplified schematics below represent the current and potential future allocations, noting this is still being developed and space use and clinical strategies develop.

Current state



Potential Future site 2026/7

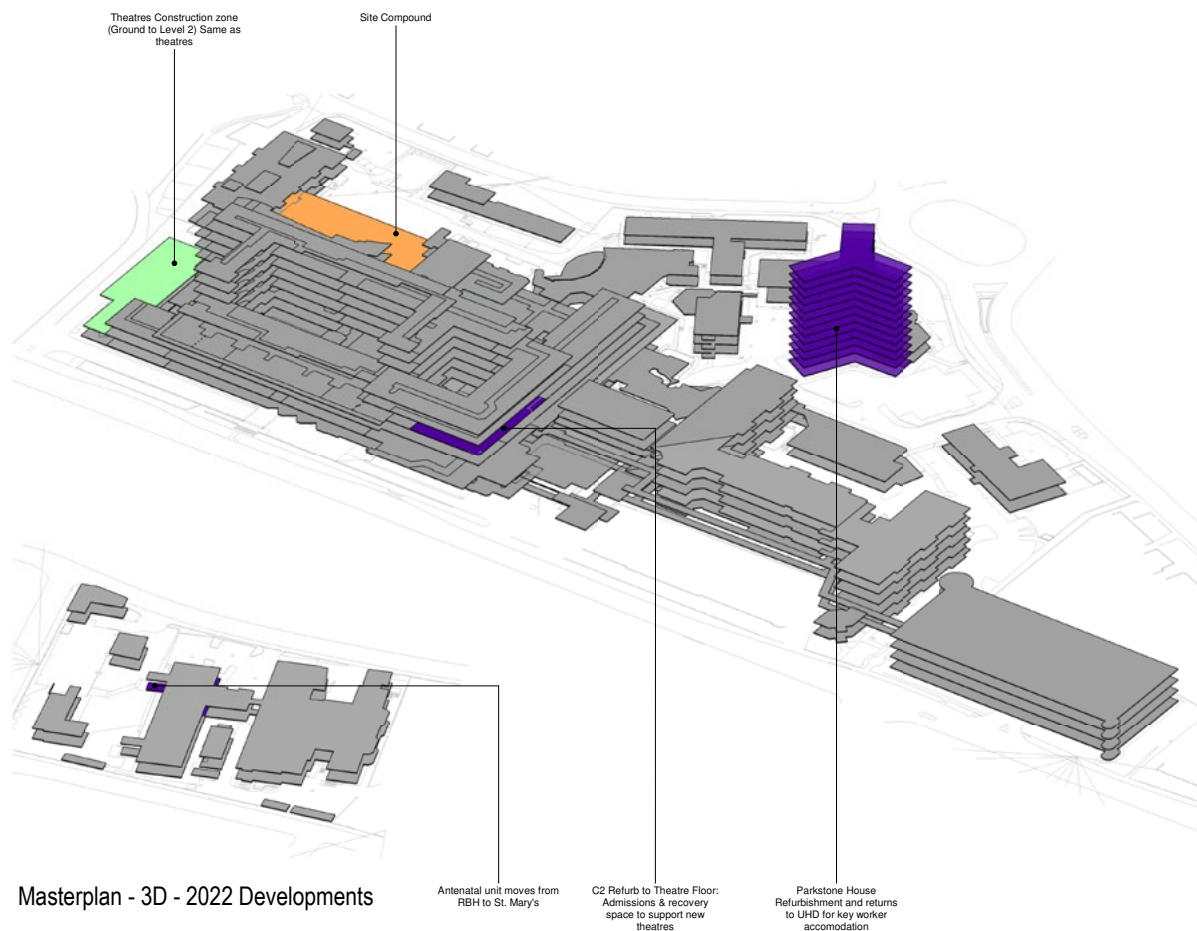


| Abbreviations | |
|---------------|---------------------------|
| SURG | Surgical |
| MED | Medical |
| TH | Theatres |
| OPD | Outpatients |
| PP | Private Patients |
| UTC | Urgent Treatment Centre |
| DCC | Dorset Cancer Centre |
| SPEC REHAB | Specialist Rehabilitation |
| COMM REHAB | Community Rehabilitation |
| CN | Clinical Neurophysiology |
| FREE | Free space |
| (?) | Unknown |

| KEY | |
|-----|-------------------------------------|
| | Provisionally Allocated |
| | Unanswered |
| | Free space |
| | Free space with intended use listed |

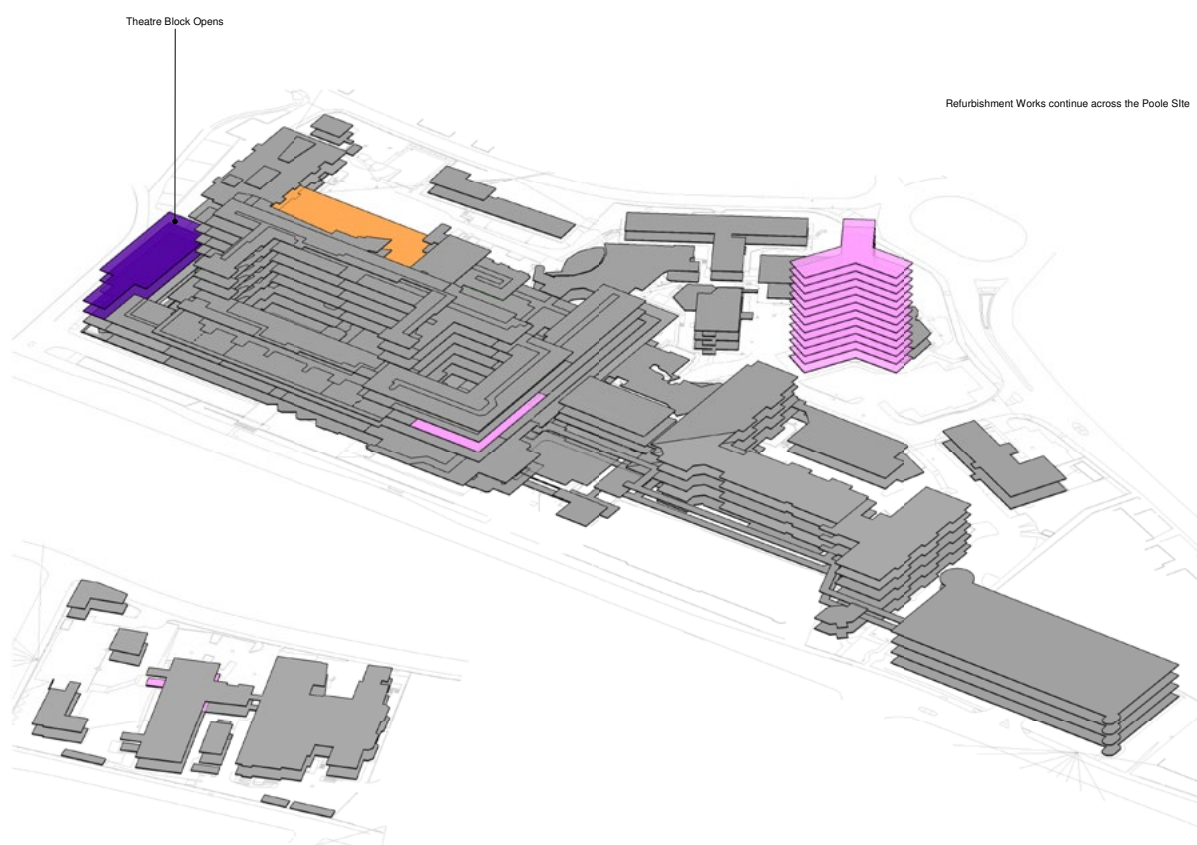
2022

- Theatre block construction underway. Targeted backlog maintenance.



2023

- Theatres open. Targeted backlog maintenance continues.



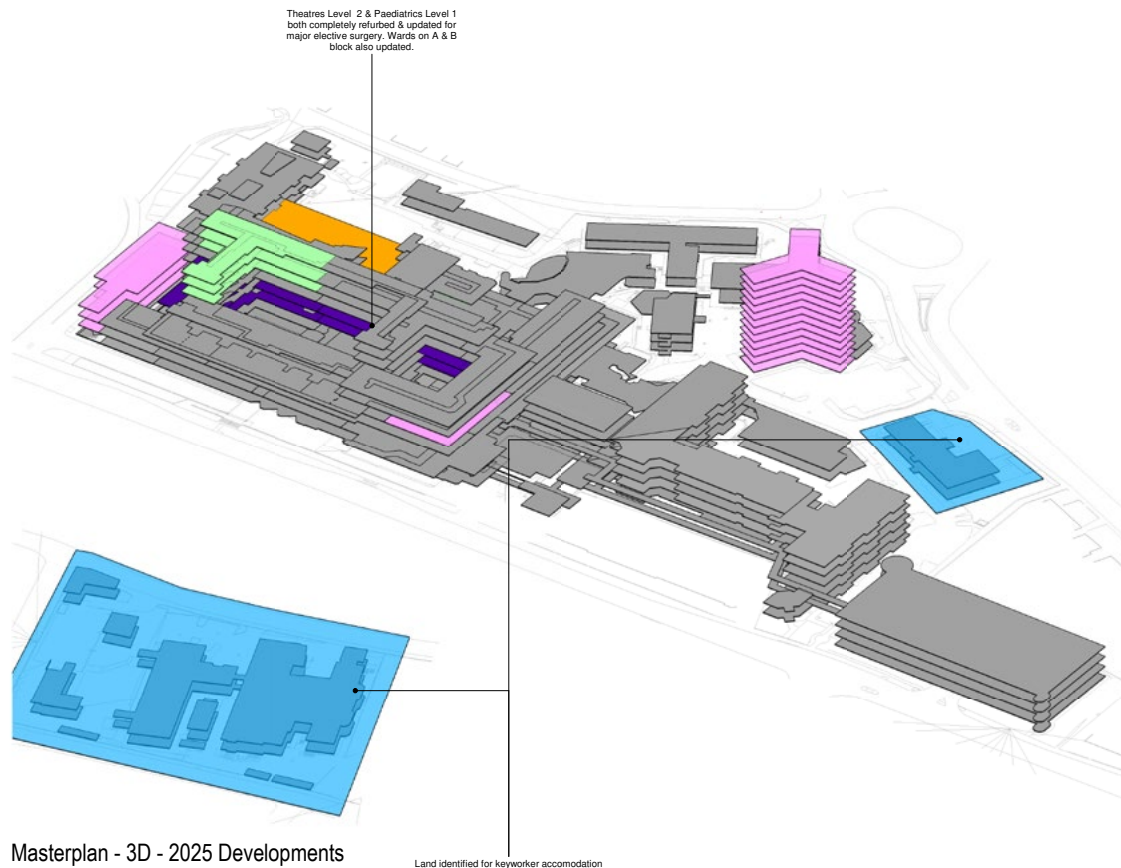
2024

- Move of maternity, children's, trauma out and some elective services in.
- Major refurbishments start (end of the year).



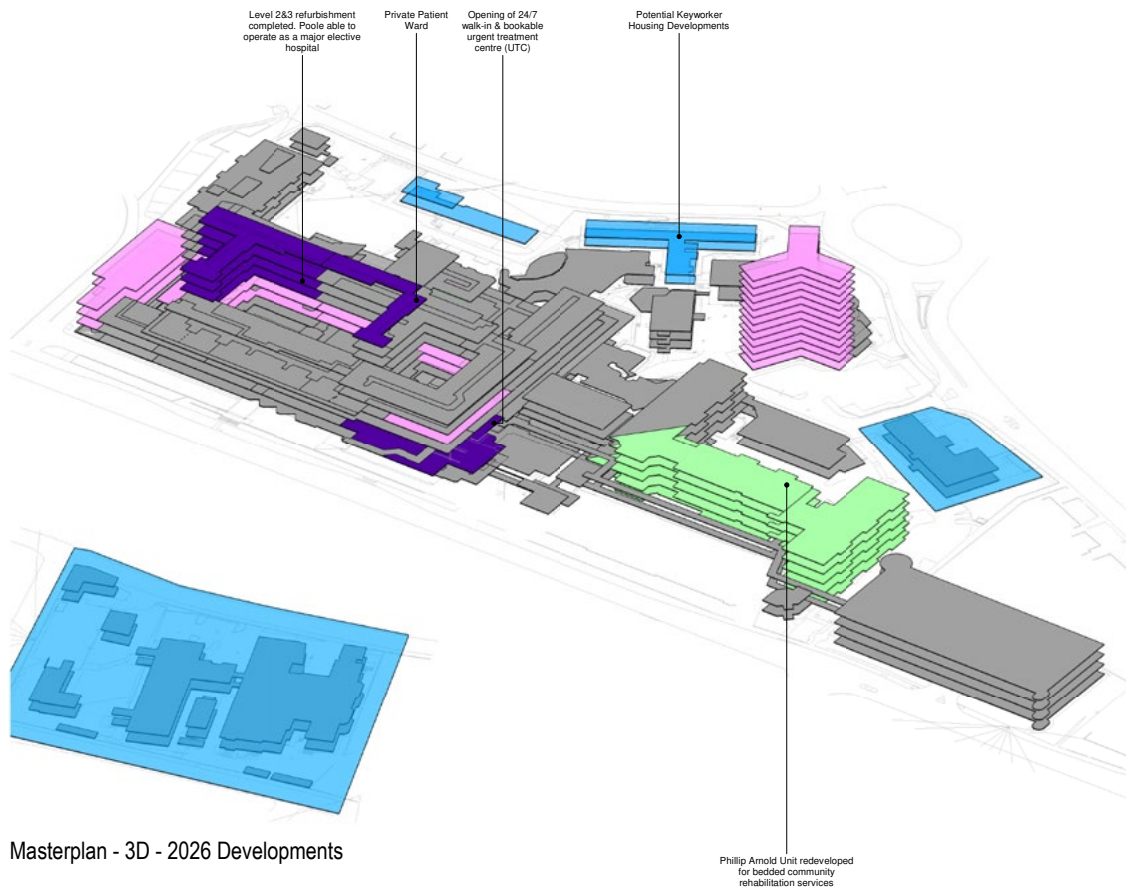
2025

- Refurbishments for theatre floors, ward and backlog maintenance
- Potential redevelopment of St Mary's, CDC and Cornelia House areas



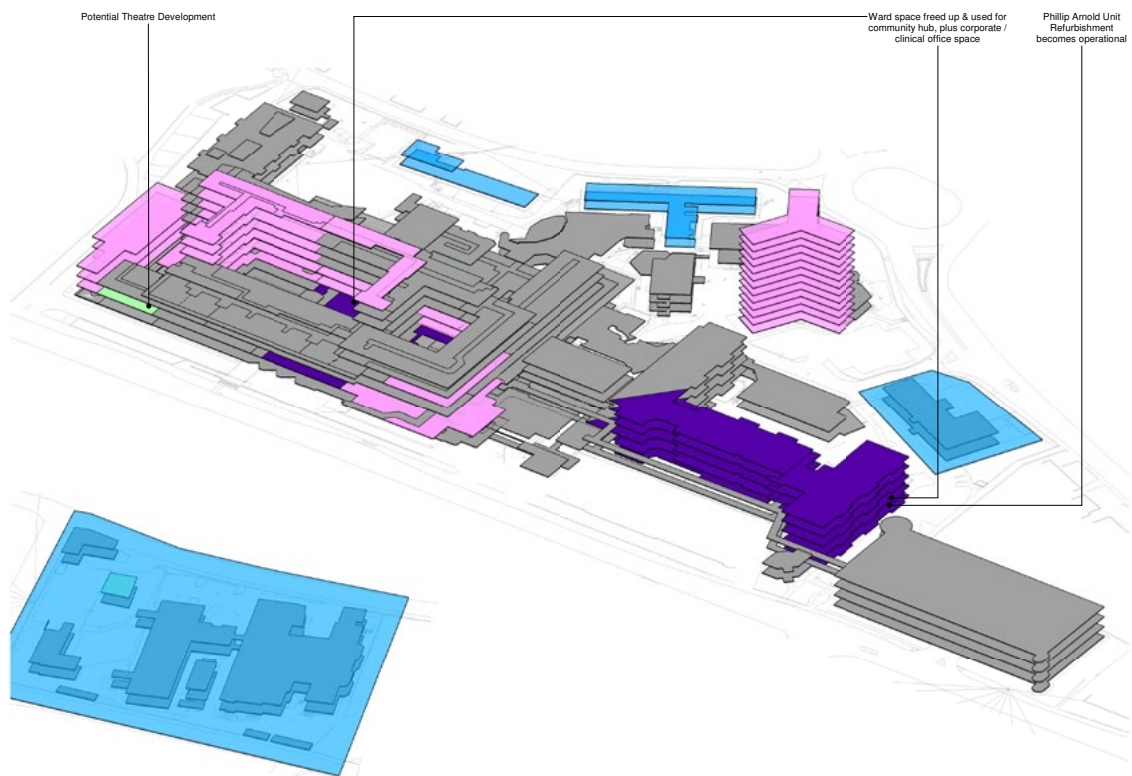
2026

- Complete creation of the Planned Care Hospital.
- 24/7 walk in Urgent Treatment Centre (UTC) opens.



2027

- Philip Arnold Unit and other locations refurbished and updated as community hub
- Key worker housing developed on land declared surplus



Future Proofing the Poole Hospital site

The areas within the main building, including Eddie Hawker and other buildings retained, include significant unallocated spaces. Creation of more community services space, mothballing wards in case of greater need for community and social care use, and office space for Trust Headquarters and Corporate teams will all be developed as part of the master planning for 2024/25+.

Work is also planned to future proof for complex (critical care or enhanced surgical care, on site) which could allow Poole to become a regional specialist centre for planned complex patient care.

Key worker housing.



The areas identified for key worker housing around the Poole site include the St Mary's and Shaftsbury House areas, as indicated on the photo to the left.

Other potential areas that may become vacant are outlying buildings on the southside of the site, marked below.

This includes some offices that may be re-provided within the main hospital. The Child Development Building may also become surplus with the new development at Royal Bournemouth Hospital, and use of the Children's clinic space within the main building at Poole.

These are indicative only and subject to further options appraisal work.

Poole Theatre Complex



During Construction



Artist Final Impression

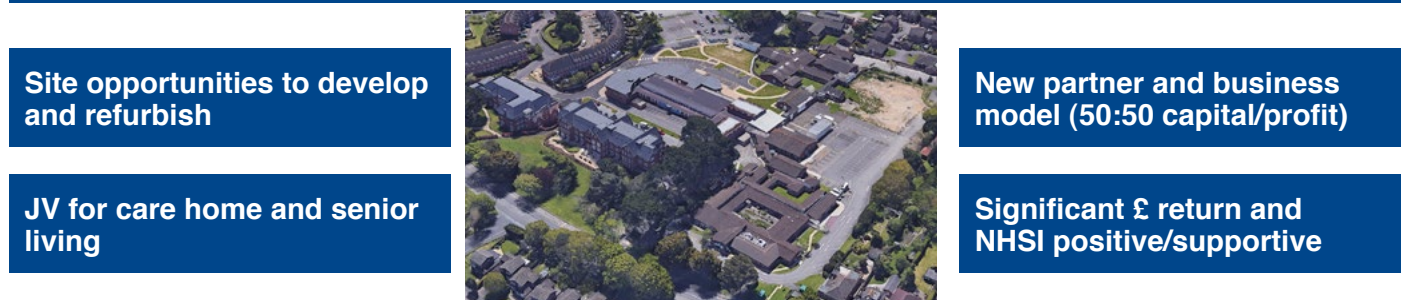
6 Christchurch Hospital and other Trust locations

Christchurch Hospital has already undergone significant changes in line with the masterplan agreed in 2013/14 and completed in 2017. This was phase one and the second phase is planned to allow a new build of the MacMillan Specialist palliative care unit, and additional senior living accommodation, so as to create the critical mass for a care village. Road and parking changes, and a new spiritual centre will also be included.

Christchurch - site master plan at the end of phase one



Christchurch - phase one completed

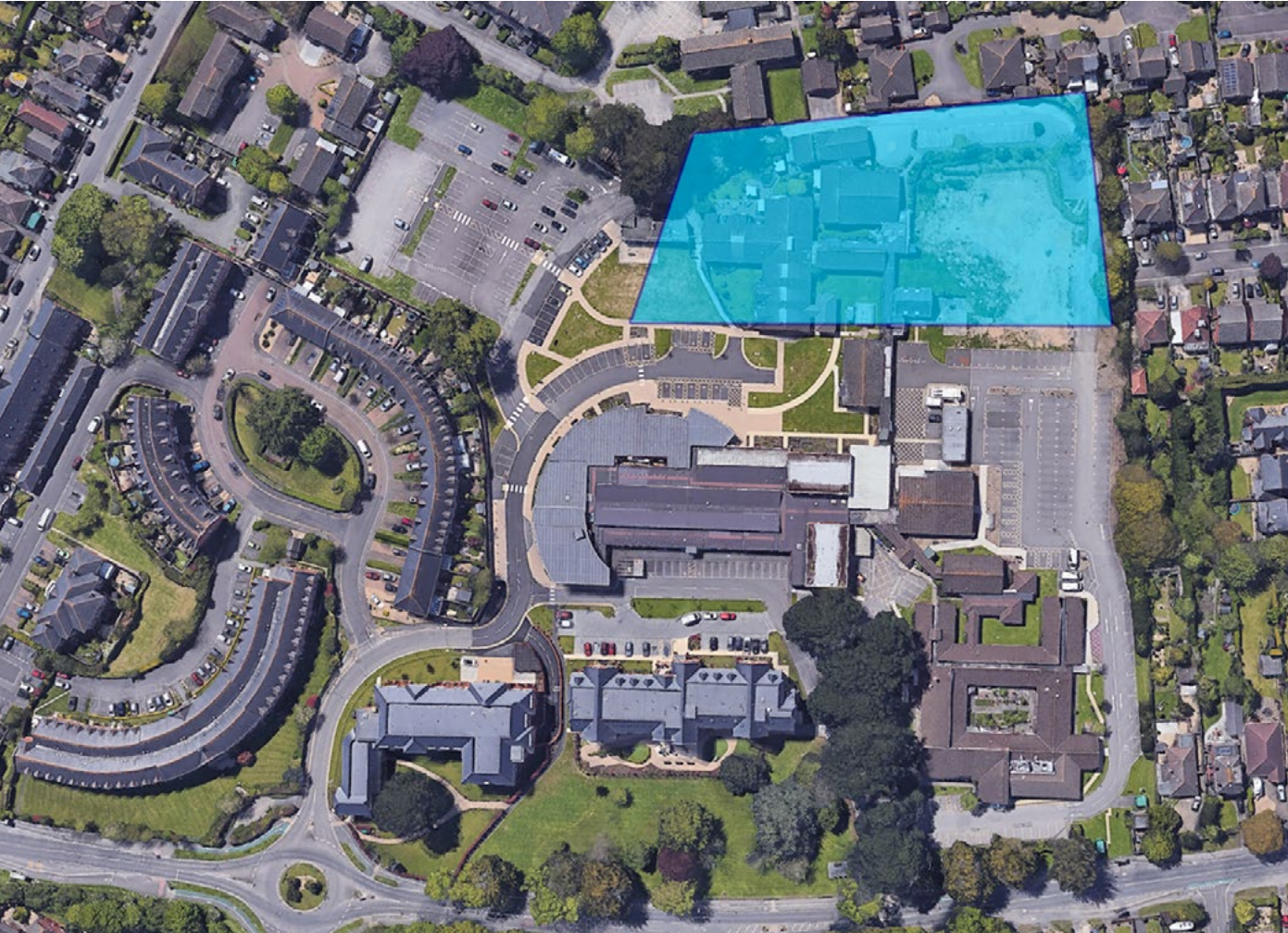
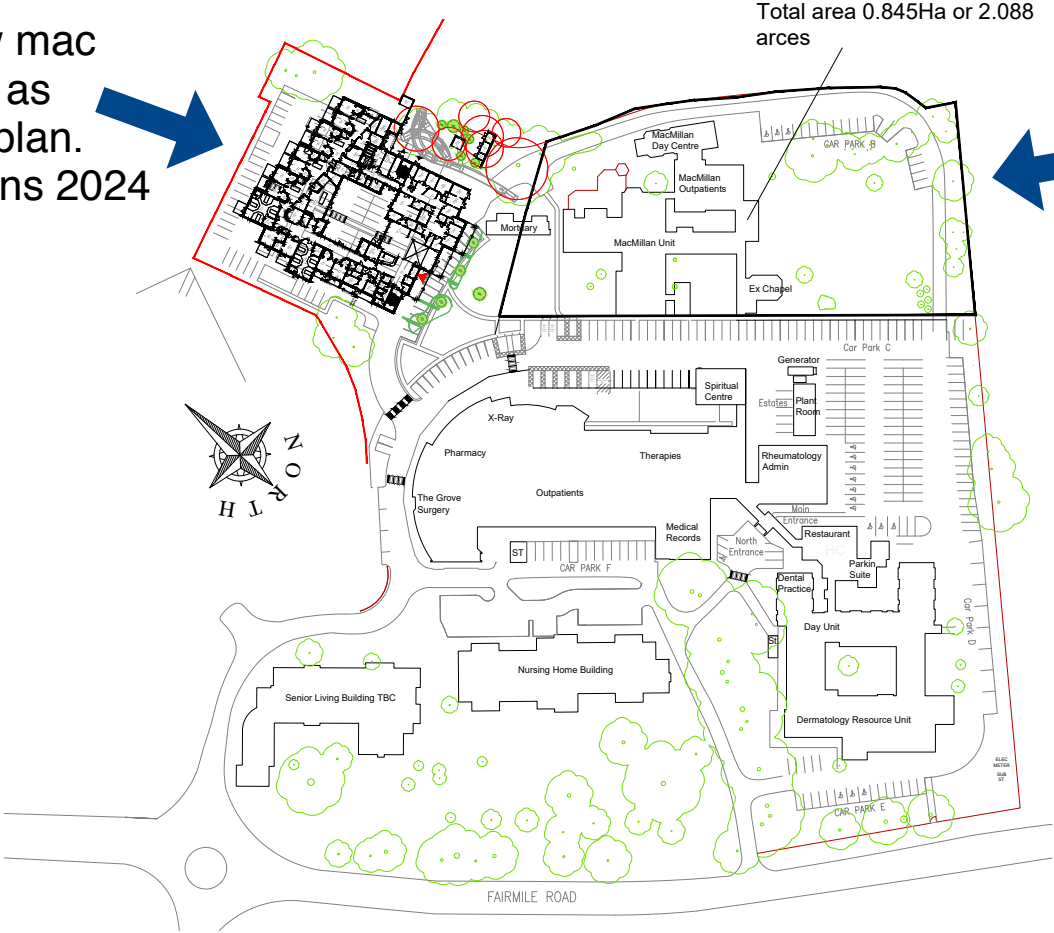


Christchurch Phase Two proposal

New mac
Unit as
per plan.
Opens 2024



Senior
living land
freed up
from 2025



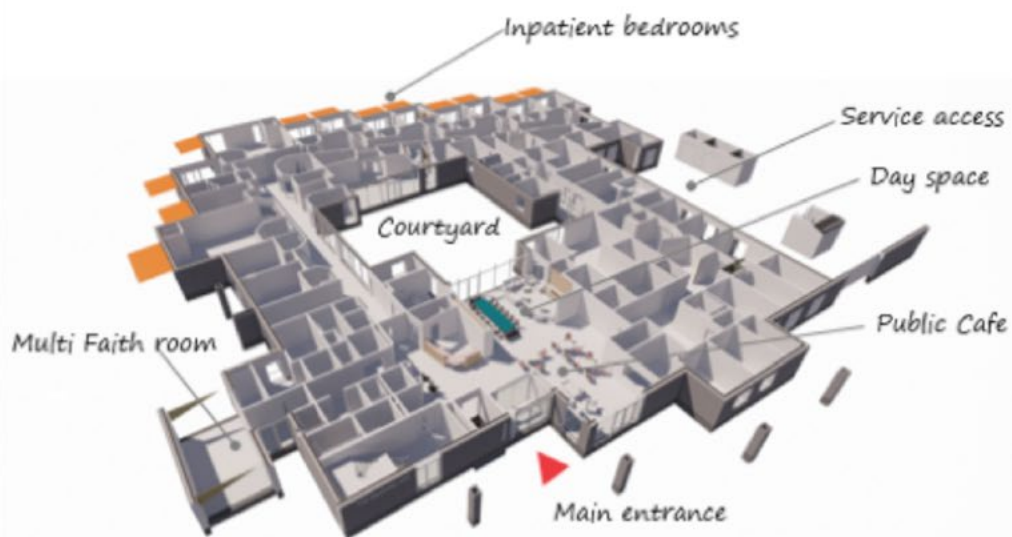
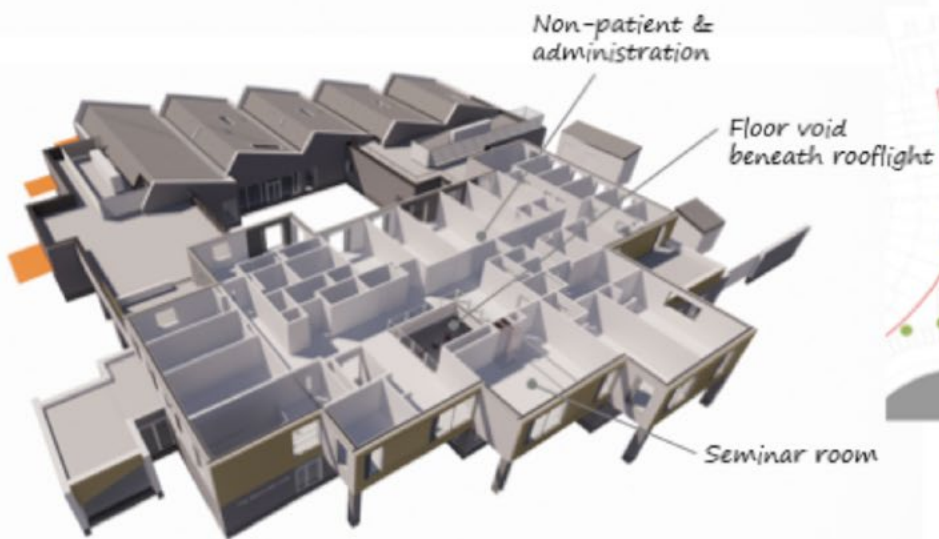
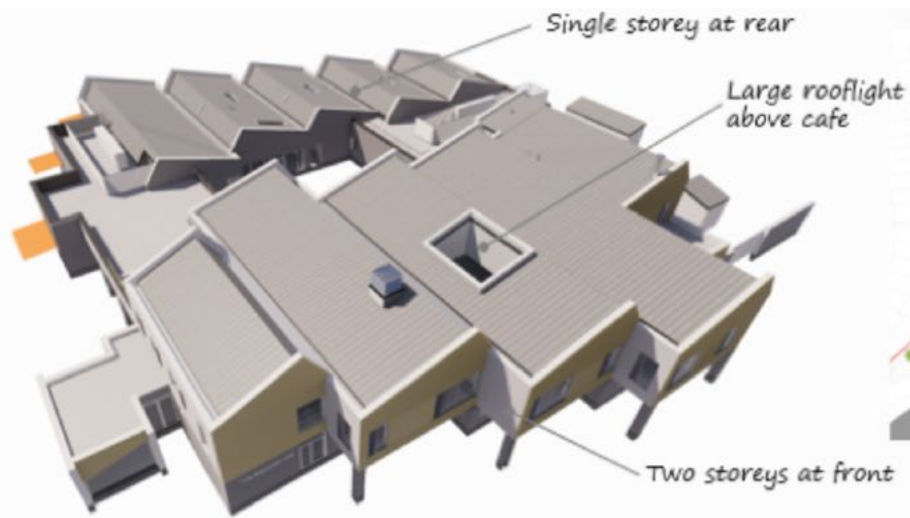
The new Mac Unit will be able to offer vastly improved patient and carer experience, as well as being a modern, fit for purpose building.

The **senior living village** will have the following benefits:

- Living in a community with greater support and social networks;
- Better mental and physical health for independent living;
- Lower demand on statutory services;
- Typically, family-sized housing freed up, aiding families in property searches;
- Release of equity to support more economic freedom (ending “asset rich, cash poor” trap)
- Purpose built accommodation with lower maintenance, utilities, running costs and hassle of living in larger properties;
- More support services such as domiciliary care, and in-reach, have a critical mass of clients allowing time saving travelling between properties (Note the model prepared has limited service charges and all services such as domiciliary care are optional, and not tied to any provider);
- With sufficient critical mass (c 120 units) communal space can be allocated for a café, meeting/exercise spaces, hairdresser etc, with low rents to maximise the service offer, and be a community hub.

The Mac Unit new build is being funded via charitable donations, thanks to the MacMillan Caring Locally charity. The design and virtual walk through are available at www.macmillanlocal.org/videos





The Trust also has other sites:

- The Health Village, based at Beales in the Dolphin Shopping Centre at Poole, offers outpatients and Breast Screening services
- Yeomans House offices recently opened, and Canford House offices
- Sterile Services Department at Alderney Hospital which is undergoing a planned programme of upgrading equipment and facilities
- Key worker housing on Longfleet Road, Poole, and nearby, plus the RBH site and also one purpose-built off-site location in Pokesdown, Bournemouth called Abbotsbury House.

In addition, some staff also work from home, following major investment in technology and updated working practices following the Covid-19 pandemic.

Other staff also work in community settings, and visit patients at home, including older peoples and stroke services, and maternity care.

Digital Outpatients Future

UHD is also the lead site for digitising outpatients, and bringing Dorset's services into a modern, patient-centred approach funded via New Hospitals Programme and the Integrated Tech fund. This is an ambitious, multi-year redesign of a significant part of the NHS.

The current model of care, of requiring patients to attend hospital on multiple occasions, will instead join up information, decision making, monitoring, diagnostics and build upon the work accelerated by COVID 19 pandemic with more virtual clinics. Christchurch's specialist services, like Dermatology, Rheumatology and therapies have been pioneers of these new ways of working.

7 Sustainable Transport

The Bournemouth, Christchurch, Poole (BCP) council area is one of the most congested in the UK with slow travel times. In line with the Green UHD plan promoting sustainable transport includes a multi-year, multi-million-pound investment including:

- Creating more and better shower and changing facilities including free towels.
- Creating cycling lanes and more bike storage.
- A strict parking permit policy for staff, limiting overall numbers and supporting individual travel plans and alternatives.
- A bus route linking Poole and Royal Bournemouth Hospital from 2024 or earlier if possible.
- Subsidising bus passes to make bus travel cheaper than car travel.
- Staff benefits to reduce the cost of bikes, electric bikes and accessories and incentivise electric cars.
- More electric car charging points.
- Creation of the Wessex link road (including cycle lanes) at RBH, reducing congestion at the main entrance on Deansleigh Road.
- Supporting car shares, with apps to make this as easy as possible.

Reducing the need to travel to hospital at all is also a better way to cut congestion and pollution. Actions include:

- Virtual clinics and digital outpatients by up to 30%.
- Work from home (WFH) for staff and partners and more online training courses.
- More key worker housing so staff can walk to work.
- Shifting community services with over 200,000 trips a year (by outpatient physio, blood tests and sexual health clinics moving off the RBH site).

Travel patterns to the RBH site will also change. The mix of services will change, with more 24/7 services on site, such as enlarged ED, critical care, maternity, child health and more inpatient wards. This will be balanced by more 'office hours' work moving offsite including 150 corporate staff to Yeomans House and 300-400 regular work from home shifts; elective operating lists and rehabilitation wards moving to Poole; virtual clinics and one stop clinics reducing trips to site.

With the staff on site having a higher proportion of "long day shifts" (often 3 x 12 hour shifts per week, and spread over nights and weekends, so the net increase of 1,000-1,500 staff on site will in fact lead to less staff journeys during peak hours of 8-9 and 4-5:30. Combined with the other measures listed above so the impact on traffic is designed to be neutral or beneficial to the conurbation and immediate Littledown area.

Taken together this represents the biggest shift of any organisation in BCP towards reducing congestion, pollution and supporting the health benefits of walking and cycling.



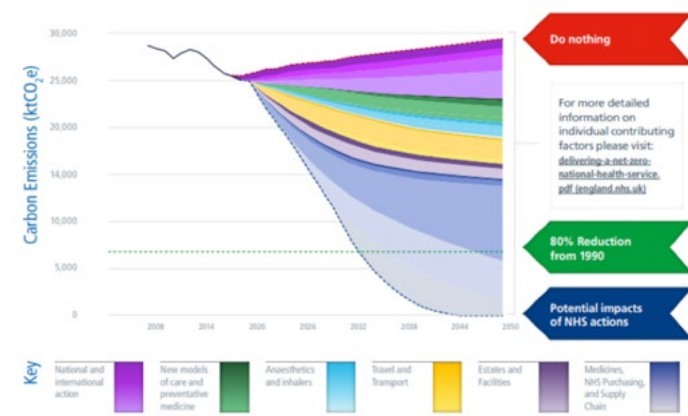
8 Green UHD

The NHS and UHD have committed to an 80% reduction in carbon against the 1990 baseline. This entails a complete change in approach. More detail is set out in the [Green UHD plan](#). This also includes actions against the cornerstone targets



Within the Estates Masterplan this includes the following key actions:

- 100% zero carbon electricity supply.
- Low or net zero lifecycles for new buildings.
- Smart buildings, minimizing energy usage including use of ground and air source heat pumps.
- BREEAM excellent for new building, and very good for refurbishments.
- Use of modern methods of construction (MMC) to standardize design and reduce time, cost and wastage.
- Designing in climate adaptation to reflect expected climate change over the 50-60-year life of these buildings to cope better with extreme temperatures and rainfall.
- Enhancing the bio-diversity of all sites, including plans around planting, and supporting insect and wildlife habitats.



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Taken together with changes in clinical practice to reduce wastage and high greenhouse gas emissions the trajectory to 80% reduction by 2030 is challenging but achievable.

Exploring local energy production via photo-voltaic (PV, or 'solar panels'), and geo-thermal for the wider Wessex fields development will also be explored during the life of this strategy.

Welcome to Dan, our new waste and environment manager

Dan Thomas is UHD's new waste and environment manager, responsible for areas including recycling and minimising the environmental impact of the waste we produce as an organisation.

One of Dan's key aims is to improve the proportion of waste going to the right place, first time. This can be as simple as using general waste or recycling bins for just those purposes, and hazardous or infectious bins for that content only. Hazardous waste takes far more energy to process,

therefore it's important that only waste that needs to be treated in this way is put in these bins.

"While technology will play an increasing role in the future of how we manage the waste that we generate, it often comes down to the simple things that we can all do, like using the right bin," says Dan.

"I'm looking forward to meeting as many UHD staff as possible over the next few weeks and months and helping us to deliver on our promises to the environment in our Green Plan."



Dan, who joins us from Dorset County Hospital, can be reached on ext. 3649 or via dan.thomas@uhd.nhs.uk

Pharmacy needs you!

Medicines have a massive impact on the NHS carbon footprint. Our pharmacy team has joined together to look into how things such as medicine usage can be optimised to avoid drugs needing to be incinerated for waste, harming the environment and the carbon footprint of healthcare.

This is one brilliant improvement but pharmacy know they can't do it alone. They play only a small part in the medicines process and so are encouraging all

departments to come forward with their ideas and to submit them to Tracy Lyons, directorate sustainability lead for radiology and pharmacy. The team has already had a number of brilliant submissions and are determined to make a fantastic improvement in public health.

If you have any ideas you would like to discuss, please contact Tracy on tracy.lyons@uhd.nhs.uk

Medicines make up 25% of the NHS's Carbon Footprint, help us reduce it! Let us know your departmental ideas for reducing waste, expired stock, or other ways to improve medicines sustainability...

Email tracy.lyons@uhd.nhs.uk



Sending COP26 a clear message on climate change

In the run up to the UN Climate Conference in November, COP26, and one year on from the launch of the [NHS Net Zero Carbon commitments](#), together to send a message to national leaders and country delegations, calling for real action to address the climate crisis.

The next few weeks are an important time to reflect on progress made and to encourage governments to be ambitious in their efforts to mitigate climate change.

You can help send a clear message that health care workers are calling for action by adding your name to 'The Healthy Climate Prescription letter'. The letter is supported by the [Global Climate and Health Alliance](#) and the [World Health Organisation](#) in service of the medical and health community around the world.

I encourage you to add your signature, a copy of the letter can be found [here](#).
Stuart Lane,
sustainability and carbon manager

Green UHD: in action

Who needs spray anyway?

PROBLEM:

Ethyl chloride is a local anaesthetic spray that provides a sensory cold sensation to check spinal and epidural anaesthesia blocks. It is used most often during hip and knee replacements and once released into the atmosphere, stays there for up to two months. It is toxic to animals and affects the growth of plants, and has a large carbon footprint as it is purchased from eastern Europe.

DISCOVERY:

When a bag of more than 60 cans of ethyl chloride was taken away for disposal, only to be told it would have to go through domestic waste, our main recovery and Derwent teams jumped into action. While gathering data on how much spray was used in the two areas, they found solid stainless steel sticks with handles in their fridges. These absorbed the cold and could be held against a patient's skin to provide a similar ice-cold sensation.

SOLUTION:

The teams asked staff to record their experiences of using cold sticks and they were found to be efficient. They then reached out to a local manufacturer who was able to design them to the specifications required, significantly reducing their carbon footprint. By making this small change, the department could save £25,000 over five years.

RESULT:

Since the project began, all 15 theatre areas and recovery are using our cool sticks, with huge environmental and cost benefits.

Staff nurse, **Helen Spencer Jones**, said: "We are so proud of how we all pulled together as a team to make this change. As a team we all have a passion for sustainability and the reduction of waste."

We are presenting our findings at national conferences and we have other trusts wanting to find out more. It's great to know you have made a difference even if it is a small one."



Have you been helping to put our Green Plan into action? Let us know at green@uhd.nhs.uk or go to our [Greener UHD pages](#) on the intranet.

9 Supporting Plans

This estates masterplan sits within the wider UHD and Dorset ICB plans, as well as those of the Local Authority, including the Local Plan. As these are updated so will this strategy.

This plan will also inform specific plans within UHD, for infrastructure investment and maintenance. These include strategies for:

- Infection control and prevention
- Waste management
- Energy (electrical, gas and back up)
- Decarbonisation
- Oxygen supplies
- Water supply and safety
- Fire prevention and control
- Ventilation
- Design quality assessment process
- Others as required

10 Public, patient and staff involvement

In developing this strategy, it draws on significant public, patient and staff involvement, over many years, including over 12,500 hours of clinical staff time in ensuring the buildings are designed to ensure the optimal care for patients.



As designs are developed, they are also undergoing design quality assessments (DQ) to ensure they are accessible, and patient centred against many criteria. In addition, many further opportunities will be designed into the programme of works to ensure patient, visitor and staff wisdom and insights are incorporated. Where designs are completed work on wayfinding, visual art and decoration, will also allow further opportunities for stakeholder input.

The NHS belongs to the people and so quite rightly those views should be asked for, and collated, to ensure this once in a generation investment and change in services is reflected in these plans. To comment please email **communications@uhd.nhs.uk** quoting “UHD Estates Masterplan.”

To receive updates on these plans and the work of the UHD team please become a member of UHD [Becoming a member \(uhd.nhs.uk\)](https://www.uhd.nhs.uk)

For more information including floor plans of the new estate and “walk through” videos please visit the website **www.uhd.nhs.uk**.

We are **#TeamUHD**

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We are **caring** **one team** **listening to understand** **open and honest** **always improving** **inclusive**