



West Kent
Clinical Commissioning Group

Edenbridge health services consultation

April 2017

Patient focused,
providing quality,
improving outcomes

Frequently Asked Questions

Questions asked during consultation on Edenbridge health services

If you decide to use the hospital site for the new building, what happens to services while it is knocked down?

It is impossible to adapt the hospital bit by bit and this is why this is not our favoured option. The state and design of the current hospital are such that minor refurbishing would not be sufficient: the overall design is not suitable for modern healthcare. So a major demolishing and rebuilding would be required, which would mean that much or all of the site would be inaccessible throughout building or demolition works.

The worry is that the services won't come back to Edenbridge if they are taken away. The advantage of building on a new site is that you carry on until they open the door to the new building.

Why is refurbishing the hospital not an option? What would not be available if that was the decision?

We are offering two models that would bring together two main clinical teams: one offering GP services and the other offering hospital-based services. We are clear that bringing them together will need space to be provided for both teams. At the moment we are not looking at final plans on a final site and it isn't possible to discuss the footprint and room allocation in detail but we would stress that whatever space is available in the new facility there will have to be trade-offs between all the possible uses.

What will happen if the current site is sold before the new facility is ready to take patients? Isn't it true that there could still be a considerable time with no hospital services in Edenbridge?

The hospital site is owned by NHS Property Services, the property arm of the NHS. If you sell a site the money has previously worked its way back to the Exchequer. There is a precedent that other areas have been successful in lobbying to retain the funds locally and we are hopeful that we can secure this for Edenbridge.

There will need to be further work done on the whole issue of funding but we are optimistic that a solution will be found.

Is it the intention to sell off the hospital and surgery sites for housing to finance any new facility?

The surgery belongs to the partners and the hospital site contribution to the new building isn't certain as we can't control what happens after the sale.

Is this achievable? What happens if you can only afford a new GP practice? What will happen to the hospital?

This is one of the options that we have considered and rejected and that is set out in our consultation document. If this were to happen the hospital would eventually close.

Can you confirm that we will retain our hospital while building of any new facility takes place?

There are no plans to close services or take money out until a new facility is available.

You've spoken about the MIU and X-ray, what would happen about the physio department and consulting rooms for consultants coming from the London District?

Physio is an important part of the plans. We haven't had consultants coming from London for some years, when they do, they come from Tunbridge Wells. Bar the inpatient beds, we expect the new building to keep everything else that is offered now.

Where will the war memorial go?

Local historians say that the memorial has been moved before. Sevenoaks District Council is responsible for taking planning decisions but we would expect them to want to involve local people and Edenbridge Town Council in discussions about where the war memorial should go.

Are you aware that there is office space for the voluntary transport scheme in the hospital that local people would like to keep?

This is a very valued service and there will be space for voluntary sector groups in any new facility.

The League of Friends put a million pounds into the old hospital. Will that continue to be used?

Yes, the League have been good friends to the hospital and anything that can be used will be transferred to the new site.

I have heard a rumour that you are planning a 60 or 70 bed hospital at Sevenoaks.

Smaller units are not viable, the main reason being the need for enough nurses and therapists for the service to be resilient, and the cost of that. We are planning for fewer but bigger community hospitals, probably of 50 beds. No decisions have yet been taken about the numbers or where they will be.

We have an ageing population and deprivation in Edenbridge. Will we be shipped off to Sevenoaks where partners, who are also older can't visit and can't hold their loved ones' hand? It is difficult, without a car, to get to Sevenoaks.

So much more is possible in your own home, and people tell us all the time that they don't want to go to hospital. We are planning for as many services as possible to stop you ending up in hospital. Day beds will help us to keep you at home for longer as you can have your procedure or treatment and be back in your own bed.

When a person needs a bed it is important that they need a bed there and then, wherever the bed is. How can these proposals ensure that they will get one?

At the moment we have 68 beds across the community hospitals in west Kent. The NHS currently pays for beds in nursing homes if the community hospitals are full.

It is a struggle to bring staff in to Edenbridge. An audit showed that at any one time only three to four of the beds in Edenbridge hospital are used by Edenbridge people.

What about mental health services?

Any new facility will provide more services for mental health patients. There are opportunities to work more closely with other community teams and to look at older people's mental health services.

How long will it be until you make a planning application?

The consultation ends in April, information will go to the University of Kent to be analysed and then there will be a decision. There are no plans as yet until we know the outcome of the consultation.

How much will this cost?

Broadly £8-9 million.

There are already activities like yoga at the Eden Centre, how can you be sure that new people will come to the new building and activities, not just the same people and threaten the Eden Centre?

The new services and activities aren't just about appointments or sessions but about the opportunity for GP practice, community and other NHS staff and voluntary organisations to get together and work with other teams.

What will happen if services are needed at night overnight, will something be set-up? NHS 111 is just there for advice and support.

Not being able to get help overnight is an issue that comes up and the CCG is looking at how urgent care is organised. NHS 111 is a safe service but not always the most efficient or quickest and we are constrained by national 111 standards.

Will specialists be visiting Edenbridge Community Hospital?

They may not be actually in the room with you but we will be exploring the use of technology to enable contact via Skype, for example. There will be greater access to specialist advice and more use of specialist nurses.

The site that you propose on Four Elms Road is greenbelt land. Do you have permission to build there?

The consultation document mentions a couple of sites which are possible options but we have not yet reached the stage of putting in a planning application or seeking planning consent. Sevenoaks District Council and its planners are there to serve the community. If we get to a detailed, final option supported by everybody, we believe the momentum for planning consent will be unstoppable.

Do you need permission from the government?

It is not a central government decision, it is Sevenoaks District Council that gives permission.

If you still can't get an appointment, what is the point of a new building?

Health services are under-manned, it is a problem across public services. We must make services and practices as attractive as possible to attract new staff and that includes new opportunities, grouped practices and team working. If we stick with what we have, we won't attract staff.

Design inside these buildings transforms working practices. We are looking at flexibility of practice in building and in the building. It is a case of building for the future and building for flexible use. Typically, it is better to build new rather than refurbish.

Are you considering alternative energy sources such as solar, wind power or geothermal?

Yes. Building new buildings is greener and specialist consultants can give project advice on energy effectiveness and saving.

How long is any new building planned to last for?

We design services to last for 20 to 30 years.

When you are actually going to begin the work, can you give your assurance that you will talk to people who will be working there so that it works for them?

You have our assurance that it will be designed in consultation with healthcare professionals who will work there.

Would one of the new services provided at a new facility be chemo?

We'd have to look at what we can do, we can't bring the teams out of the acute hospitals but it might be possible.