

Frequently Asked Questions

Ilfracombe

This document details the questions and concerns, specific to Ilfracombe raised during the public consultation, both at public meetings and through correspondence received.

Is Ilfracombe included in the consultation?

Since the Tyrrell's inpatient beds closed in September 2014 we have worked really hard with the community to ensure people understood what safer staffing and lone-working meant and why we considered it meant we could not offer inpatient services at the Tyrrell.

The engagement report from these discussions with the community is available on our website. As well as requesting that we introduce more services to develop the Tyrrell into a health and wellbeing hub, the community also asked us to explore how to alter the hospital building to accommodate the minimum 16 beds. Our estates team produced this assessment which concluded that it would take between 18 months and three years to refurbish or extend the Tyrrell and would cost at least £1.5million.

Because it could not be done within this financial year, we felt this option was not feasible because we could not deliver a 16-bed unit within this financial year. If, during the consultation, people suggest ways in which we can deliver a 16-bed unit at the Tyrrell this year, this option will be included in the consultation.

The permanent decision on Ilfracombe inpatient services remains with NEW Devon CCG.

Who owns the freehold of the Tyrrell Hospital?

Northern Devon Healthcare Trust owns the freehold.

Does it really cost £1.5m to £2m to refurbish a ward? Have you looked at all the options and configurations?

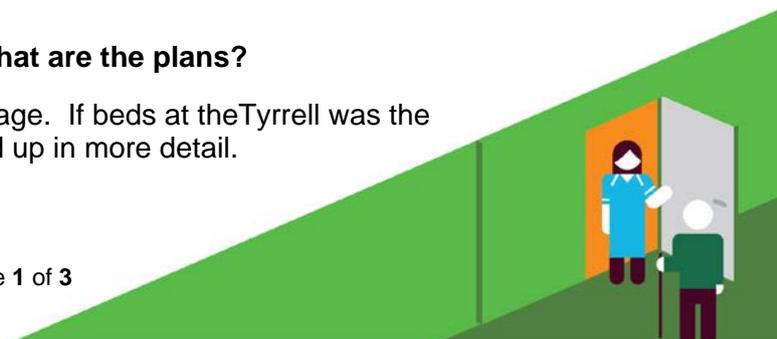
It is not possible to create a 16-bedded ward within the current space available at the Tyrrell.

We are required to adhere to strict NHS estates guidance which dictates how much space is needed between beds, male/female facilities, storage space, single bedded rooms etc.

The budget may seem expensive, but there are many unseen costs and – based on our experience of refurbishing wards across Devon and building new units (like Chemotherapy at NDDH) - we can assure you that this time and cost estimates are reasonable.

How did you come up with these costs? What are the plans?

We did the estimate based on the square footage. If beds at the Tyrrell was the preferred option, these plans would be worked up in more detail.



Would it not be cost-effective in the longer term to invest the money and completely refurbish the Tyrrell? You are looking at a very short term view.

Unfortunately, we have to look at the short term because we are charged with delivering safe and effective care within our budget each year. The option of refurbishing/extending Ilfracombe in this financial year looks unlikely which means it becomes a longer-term option.

Longer-term strategic decisions are taken by NEW Devon CCG and nothing we do now will prevent beds coming back to Ilfracombe in the future.

For 11 months you were saying that the closure of inpatient beds at Ilfracombe was temporary. Within 14 days you changed your mind. How did that come about?

Tyrrell beds were temporarily closed in November 2014 following our concerns about the risks of lone-working and our view that we would shortly not be able to fill the projected nursing rota due to workforce retirements and changes.

Through our subsequent engagement with the community we looked at ways in which we could resolve those safety concerns. The community asked us investigate two options: 1) could we rotate nurses between NDDH and Ilfracombe and 2) could we extend/refurbish the Tyrrell to fit 16 beds

The Trust's Director of Nursing confirmed that we were unable to consider rotational nursing posts because it would require more nurses at a time of a national nursing shortage.

The Trust's estates professionals then presented their assessment of the Tyrrell building and confirmed that it would take at least 18 months and £1.5-2million to deliver a 16 bed hospital in Ilfracombe.

Because this option was not one that would be possible in this financial year, the Trust discussed with stakeholders why this could not be considered an option.

However the stakeholders felt this was unfair and meant we were not allowing people to come forward with ways which may overcome the time and cost restraints.

We agreed and for this reason, and with these caveats, the Ilfracombe option was put back into the consultation process.

Why has Ilfracombe been allowed to get to this state? Why did you not refurbish earlier?

The Tyrrell is not in a run-down state. This is not about refurbishing to modernise, it is about having to increase to 16 beds from 10.

Is there any chance of accessing Lottery Funds to invest in the Tyrrell?

It is not normally permitted to use lottery funds to fund the NHS.



Why can't you refurbish little by little?

This is not a safe approach. When you have patients being cared for in a ward, you cannot have builders working alongside. You have to close the hospital and complete the building work before reopening for patients.

Do you have to keep male and female patients separate?

Yes, and this is non-negotiable national guidance. This is why any reconfiguration of the Tyrrell hospital would have to accommodate single-sex rooms with en-suite facilities.

