

Report on feedback from engagement on proposals for the Health and Wellbeing Hub in Hornchurch

Date: 28 February 2022

Author; Melissa Hoskins, Associate Director of Communications and Engagement, North East London CCG (NEL CCG)

Contents

1. Executive summary	2
1.1 Methodology	2
1.2 Key findings.....	2
1.3 Stakeholders.....	3
2. Background	3
2.1 Ongoing engagement with key stakeholders	4
2.2 Planning approvals and 2021 planning consultation	4
3. Who did we engage with and how?	5
3.1 Publicising the engagement.....	5
3.2 Online drop-in sessions	5
4. Who responded	6
4.1 Analysis of respondents.....	6
4.2 Key stakeholder responses to the survey	7
4.3 Analysing the survey respondents against local demographics	7
4.4 Reaching our diverse community and engaging with seldom heard communities.....	8
5. Analysis	10
5.1 Summary of survey Q10	10
5.2 Summary of survey Q11	13
5.3 Summary of key themes from community online sessions.....	16
Appendix 1 – Correspondence received from Havering Health and Overview Scrutiny committee	17
Appendix 2 – Key stakeholders comments	18

1. Executive summary

Creating a health and wellbeing hub at the St George's Hospital site is at the heart of integrated health and care services in North East London (NEL). Since the early days of planning for new healthcare services on the site, NHS partners have kept a commitment to ensure local stakeholders and residents are kept informed about our proposals and progress.

Significant engagement has already taken place with key local stakeholders and with local residents and patients over the last ten years, which has helped to shape our plans and ensure our stakeholders understand how the new centre will benefit them and the communities they represent.

North East London CCG conducted a 12-week engagement on proposals for the integrated Health and Wellbeing Hub on the former St George's Hospital site in Hornchurch in the London Borough of Havering. This engagement started on 22 November 2021 and closed on 13 February 2022.

1.1 Methodology

The CCG wrote to a range of stakeholders with an explanation of the proposal and information on how local people in all three boroughs in BHR (Barking and Dagenham, Havering and Redbridge) could respond. Six online engagement sessions were held during the 12-week period.

A questionnaire was available on the NEL CCG website and printed copies were also distributed to GP practices in Havering. The CCG also gave presentations to the Outer North East London Health Overview and Scrutiny Committee (ONEL JHOSC) and at a special meeting of the Havering Health Overview and Scrutiny Committee (HOSC). The CCG received one request for a printed copy of the questionnaire (via a Havering councillor) and this was mailed to the councillor on 31 January 2022.

Overall, 451 responses to the engagement were received via the online survey and one letter. In addition, individual residents and representatives of community organisations attended the online engagement sessions.

1.2 Key findings

Residents and stakeholders who responded via the online questionnaire were overwhelmingly supportive of the proposals:

- **87.28%** (391) of respondents **strongly supported** proposals for GP services at the Hub, with only 11 people (2.46%) mildly or strongly opposing the proposal
- **82.41% strongly supported** Frailty services at the hub, with only two people (0.44%) opposing the proposal
- **90.20% strongly supported** Outpatients services at the hub, with only five people (1.12%) opposing the proposal
- **91.54% strongly supported** Early Diagnostics at the hub, with three people (0.67%) opposing the proposal

- **75.06% strongly support** kidney dialysis services at the hub, with a further 12.92% mildly supporting. Eight people (1.78%) opposed the proposal.
- **68.82% strongly supported** and 16.70% mildly supported the provision of mental health services at the hub – a total of 384 people. 24 people (5.35%) objected.
- **60.27% strongly supported** the provision of Local Authority Adult and Children services at the hub, with a further 20.31% (91 people) said they mildly supported. 23 people (5.13% of respondents) opposing the proposal.
- **68.68% strongly supported** the provision of Wellbeing services, with eight people (1.79%) opposing the proposal
- **55.03% strongly supported** provision of Voluntary sector services, with a further 22.6% mildly supporting. 23 people (5.15%) opposed the proposal.

1.3 Stakeholders

The three borough Health Overview Scrutiny Committees (HOSC) for BHR agreed the engagement plan ahead of the start of the 12-week engagement period. A presentation was made to the Joint Health Overview Scrutiny Committee on 14 December 2022. Havering HOSC held a special meeting on 4 January 2022 to consider the proposals. A letter was received by email from the HOSC chair on 17 January 2022, setting out its support for the proposals.

In its letter, the Havering HOSC welcomed the proposal for seven day opening of the hub, the inclusion of mental health services, and the fact that renal dialysis services would be open until 10pm. The committee has asked if more services could stay open on site until 10pm.

The HOSCs for Redbridge and Barking and Dagenham both noted the proposals but did not provide individual responses.

2. Background

St George's Hospital in Hornchurch was built in the 1930s as a community hospital. In the ten years up to 2012, the number of services providing direct patient care on the site had fallen due to the introduction of new ways of working and because of the unsuitability of the site.

In October 2012, all staff and services were relocated from the site for health and safety reasons after legionella was discovered in the heating system. Proposals for most of the 29-acre site – including new homes and parking – were approved following an appeal in 2017.

A 12-week public consultation was conducted in 2013 on the original plans for the redevelopment of the St George's Hospital site. The key findings, set out below, have continued to shape our proposals.

The new Health and Wellbeing Hub at St George's is a key part of wider NHS service planning, both in Havering and across north east London, and the local NHS sees it as being at the very heart of integrated health and care services in this part of the capital.

In recent years, changes to the way these larger building projects are funded, along with an ongoing review of the longer-term health needs of this part of London, combined to prevent progress on the plans.

The latest proposals for the Health and Wellbeing Hub, as described in the Outline Business Case (OBC), are consistent with those original, signed off plans – including GP services, community services and care tailored for the frail and elderly – now with the addition of renal services, outpatient services and flexible space for community use.

2.1 Ongoing engagement with key stakeholders

Following the 2013 consultation, NHS Havering Clinical Commissioning Group (now part of North East London CCG) continued an open and sustained positive dialogue with key stakeholders including local elected politicians, key Council leaders in Havering, Healthwatch and local community groups and residents.

This includes:

- Six monthly updates (starting in 2013) from Dr Gurdev Saini, Chair, St George's Hospital programme board, to a dedicated mailing list of 125+ residents and stakeholders interested in St George's Hospital's redevelopment progress
- Regular updates (quarterly) to Havering Council's Health and Wellbeing Board, Health and Overview Scrutiny Committee and to the CCG's Patient Engagement Forum
- Regular briefing meetings with the MP for Hornchurch and local ward councillors (led by the NEL CCG estates team)
- Informal updates to Havering Patient Participation Groups since 2019
- Following announcement of the scheme's inclusion in a £1.8 billion funding boost for the NHS in August 2019, NHS North East London Commissioning Alliance presented proposals to local HOSCs in 2019.

Our work with local residents has included

- Informal planning consultation workshop at Hornchurch RAF with 45 local residents in attendance and two local councillors – Wednesday 28th July 2021
- An FAQ document was developed based on the questions asked by residents at the July workshop and circulated
- Hornchurch residents' group has published updates from the CCG in its newsletter

In line with our commitment to follow best practice guidance including statutory guidance from NHS England/ Improvement, NEL CCG held discussions with the NHSE lead for service reconfiguration, setting out the scope of our engagement strategy. Feedback shaped our ongoing approach.

2.2 Planning approvals and 2021 planning consultation

In 2019, Havering Council approved plans for a health centre and approximately 100 car parking spaces on part of the St George's Hospital site at 3000 square metres.

Planning permission was also granted for a development of nearly 300 new homes on the remainder of the site, which is a separate project, led by a housing developer.

In April 2021, a planning consultation took place on the latest proposals for the new development. An online public exhibition was held between 1 April and 20 April 2021 with an online feedback questionnaire. 86% of respondents (81% strongly support and 5% mildly support) support the provision of the proposed new Health and Wellbeing Hub at the St George's site.

3. Who did we engage with and how?

The 12-week engagement period ran from 22 November 2021 to 13 February 2022.

3.1 Publicising the engagement

The CCG issued a media release and posted the launch of the engagement on the home page of its website on 22 November 2022. A briefing was sent by email to key stakeholders on 22 February, including local MPs, Healthwatch, and Chairs of the local Health and Wellbeing Boards (HWBs) and Health Overview and Scrutiny Committees (HOSCs).

Links were made to the online questionnaire in a dedicated page on the NEL CCG website and posts were made throughout the engagement period on the CCG's social media.

Background information, contact details, an online questionnaire, frequently asked questions and a presentation setting out key points were available on the NEL CCG website throughout the duration of engagement.

Key community stakeholders, including local patient representatives, community and voluntary sector leads in BHR and the CCG's Patient Engagement Forums members also received regular updates through the CCG's weekly community stakeholder e-bulletin for BHR. Information on the launch and updates were also included in the NEL CCG fortnightly stakeholder bulletin.

Partner organisations and a number of stakeholders, including North East London Foundation Trust and the local councils, also shared information and updates through their channels in support. There was also coverage in local media titles during the engagement.

Printed copies of the questionnaire were provided in Havering through GP practices and libraries. An Easy-Read version of the questionnaire was available through the CCG website, and was linked to in all CCG community updates. Literature was also offered to be available on request in Braille, large print or in different languages (the website offers the facility to translate pages into 100 languages, into spoken words and has other adaptations for people with a visual impairment).

3.2 Online drop-in sessions

Direct public engagement activity had to be focused into online sessions due to ongoing Covid restrictions on meetings in public. These were:

Event	Date	Timings
Online listening event	Saturday 27 November 2021	10am to 12noon
Online listening event	Thursday 2 December	6pm to 8pm
Online listening event	Tuesday 7 December	6pm to 8pm
Community drop-in session (online)	Friday 21 January	9.30am to 11.30am
Community drop-in session (online)	Friday 27 January 2022	9.30am to 11.30am
Community listening event (online)	Tuesday 1 February	6pm to 8pm
Community online outreach event	Tuesday 8 February	5pm to 8pm

4. Who responded

4.1 Analysis of respondents

Location

Of the 451 respondents, 173 (39%) did not provide their address. Of those that did, 272 (60%) told us they lived in the London Borough of Havering. Two respondents told us they lived in Barking and Dagenham, and two were from Redbridge. Two respondents were from Essex.

Gender

In total 359 participants answered the question “To which gender identity do you most identify?”. 68.8% of respondents were female, 28.97% male, 1.67% preferred not to state their gender. 0.28% respondents identified as non-binary and 0.28% answered “other”.

Age

Overall there were 362 answers to the question “How old are you?”. The breakdown of the answers is as follows:

- 44.75% of respondents were aged between 41-65;
- 39.78% of respondents were over 66;
- 10.77% of respondents were aged between 26-40;
- 3.59% of respondents preferred not to disclose their age;
- 1.1% of respondents were aged 16-25.

Ethnicity

In total there were 356 answers to the question “What is your ethnic group?”. 92.42% of participants identified as white British, 2.25% identified as Indian, 1.69% were of other white background, 1.4% stated they belong to other ethnic group. 1.12% of respondents identified as Irish, 0.56% were of other Black / African / Caribbean background, 0.28% identified as Chinese and 0.28% identified as other Asian background.

Religion

357 respondents answered the question “Which, if any, of the following best describes your religion?”. The breakdown of the answers is as follows:

- 61.06% respondents identify as Christian;
- 28.57% are atheist;
- 5.6% preferred not to say;
- 1.96% stated their religion was not included on the list (Other);
- 1.4% identified as Hindu;
- 0.84% said they were Jewish;
- 0.56% identified as Muslim;
- 0.28% identified as Buddhist;
- 0.28% identified as Sikh.

Sexual orientation

Overall there were 354 answers to the question “Which of the following best describes how you think of yourself?”. 92.09% respondents identified as heterosexual, 6.21% preferred not to say, 0.85% identified as bisexual, 0.56% were gay or lesbian and 0.28% answered “other”.

Disability and longer term conditions

359 respondents answered the question “Do you consider yourself to have a disability or long-term health condition?”. 66.85% respondents stated they haven’t got any disabilities and long term conditions, 29.25% answered yes and 3.9% preferred not to say.

4.2 Key stakeholder responses to the survey

A small number of local stakeholders responded to the engagement via the online survey. These included Julia Lopez, MP for Hornchurch; Sarah Balseer, Chief Executive of Havering Mind; John Reid representing The Friends of St George’s Hospital charity; and the Partially Sighted Society of Havering.

Comments provided in their responses are shown in Appendix 2

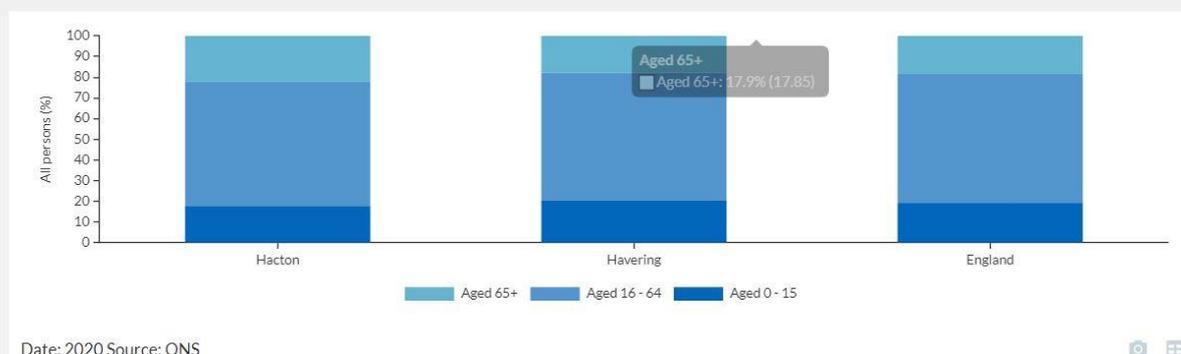
4.3 Analysing the survey respondents against local demographics

Not all those who shared their views in the online survey provided details of their age, ethnicity or address/location. This should be taken into account when considering the demographic breakdown of respondents and what this means in terms of our engagement with the whole community in Havering (and to a lesser extent in Barking and Dagenham and Redbridge.)

Almost all respondents who did share their address or location were from Havering, with high interest from those living around the St George’s Hospital site which is located in Hacton ward.

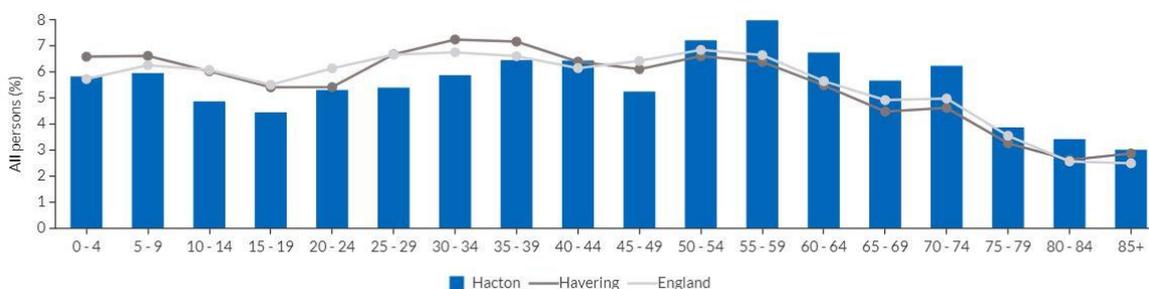
The following chart, based on ONS data published in the Havering Data Intelligence Hub, show that the demographic breakdown of respondents aligns well with the age demography of the local community in Hacton ward.

Population estimates for all persons by broad age group for 2020



Date: 2020 Source: ONS

	Hacton		Havering		England	
	Count	%	Count	%	Count	%
Persons aged 0 - 15	2,186	17.7	53,208	20.4	10,852,240	19.2
Persons aged 16 - 64	7,440	60.1	160,925	61.7	35,233,879	62.3
Persons aged 65+	2,748	22.2	46,518	17.9	10,464,019	18.5



4.4 Reaching our diverse community and engaging with seldom heard communities

Covid restrictions meant we were not able to offer the wider range of face to face and direct engagement the CCG would usually deliver as part of an engagement process e.g. face-to-face workshops, drop-in sessions, 1-1 interviews and community events.

These activities would usually be targeted to reach out to people who are less likely to engage through traditional or digital methods, including our BAME and Eastern European communities, younger adults and people with communications barriers (including language, visual or hearing impairment, those with Learning Disabilities or Autism).

In order to reach out to all of our community in Havering (and to Barking and Dagenham and Redbridge as part of our BHR-wide approach), we worked with partners to share information and encourage participation via a range of their digital channels and engagement networks.

These included:

- Updates in Havering Council's weekly e-newsletter
- Information in the CCG's weekly community stakeholder update in BHR (which goes to a wide range of community and voluntary service organisations across Havering and the wider BHR patch)
- ward councillor updates to local residents living around the St George's site.
- the NEL CCG stakeholder updates

- updates to the BHR Health and Faith Network
- NELFT's social media channels
- Updates to staff across NEL CCG, NELFT and BHRUT

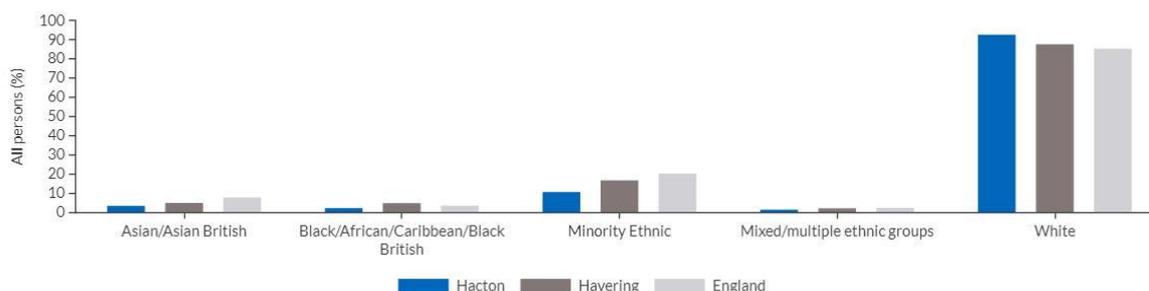
Many of the community and voluntary groups engage with residents from a wide range of backgrounds, supporting our focus on engaging with a diversity of residents.

Public messaging on the engagement directed residents to the NEL CCG website which has been designed in line with accessibility standards. This allows people who visit the website to:

- change colours, contrast levels and fonts
- zoom in up to 200% without the text spilling off the screen
- navigate most of the website using just a keyboard
- navigate most of the website using speech recognition software
- listen to most of the website using a screen reader (including the most recent versions of JAWS (Job Access with Speech), NVDA (NonVisual Desktop Access) and VoiceOver)

We've also made the website text as simple as possible to understand.

The chart below, published in the Havering Data Intelligence Hub, shows again that the ethnicity of survey respondents also aligns well with the demography of Hacton ward (and wider Havering).



5. Analysis

The responses to the online questionnaire were overwhelmingly supportive for all proposals set out in the engagement process. The feedback is summarised in the executive summary on page 3.

Two questions provided respondents with an opportunity to provide comments and suggestions.

5.1 Summary of survey Q10

Overall, there were 451 responses to the survey out of which 320 included answers to the free text box question 10 “*Do you have any other comments to explain your answers of why you support or object to any proposed services*”. The key themes for these answers can be summarised as follows:

1. Support
2. Opposing/challenging comments
3. Services

A summary for each category can be found below.

Support

Most respondents expressed satisfaction with the proposal and wanted the development to be built urgently. Main advantages mentioned in responses included:

- Provision of adequate services in the local area enables easy access for patients.
 - Reduced travel times.
 - Convenient location, easily accessible both by car and public transportation.
- Holistic approach makes the hub a great solution for patients and/or families with multiple health concerns.
- The services are much needed for the rapidly increasing population.
 - The hub will take pressure off local hospitals and GPs.
 - Reduced pressure on urgent treatments will encourage prevention.
 - Integration of services to promote health is beneficial for the community.
 - Services in a community setting can be more approachable to some residents compared to a hospital.

Opposing/challenging comments

Around a quarter of respondents had some concerns about aspects of the proposals.

Capacity

- GP services at the Hub should be an extension to GPs and other services offered in the area, not a replacement as there needs to be more capacity.
 - There have been a number of new residential developments built in the area in recent years which caused some residents to feel the services provided at the moment are not sufficient to support the increased population.
 - Some residents feel there is enough specialised health support provision and GP services should be made the priority.
- A number of residents were concerned about continuity of adequate staff, potential shortages of staff and poor residents-to-healthcare professionals/services ratio in the area.

- Due to rapid increases in population in the recent years, there is more health infrastructure needed in the area, including a new hospital to increase the number of beds available, and reduce waiting times in A&E.
“The hub is a good start but there is more capacity needed with the increasing population.”
- NHS services should be kept separate from social and community services
 - Some respondents commented that there is a shortage of essential services which should be accommodated before developing additional voluntary services.

Travel

- Centralisation could lead to increased travel times and other logistical issues.
 - Patients feel that current travel times are too long, especially for patients who are unwell (e.g. from the Rainham and South Hornchurch area).
 - Residents are concerned whether accumulation of services in one building won't affect the quality of provided services.
- Parking spaces.
 - Some respondents are concerned that due to a large number of new residential developments recently built in the area and proximity of a school, it is already difficult to manage traffic and ample of parking facilities for local residents, patients and staff is key in providing patients and residents with a positive experience.
 - Ensuring there are enough disabled parking spaces in the facility, including dedicated parking spaces for renal patients.
- Increased congestion in the area.
 - Residents are concerned about adequate parking provision and safety considering proximity of the hub to a school.

Other comments

- A resident in the West Redbridge area felt the services are focused on reducing pressures at the Queen's Hospital, leaving Whipps Cross out.
- There were suggestions that some services should be kept in hospitals to reduce risks e.g. renal services:
“I am a dialysis patient and am concerned that a new unit will be on the 2nd floor. Dialysis patients attend multiple times a week and are prone to sudden drop of blood pressure or even haemorrhage. The thought that we may have to try and stem bleeding whilst trying to get up to the 2nd floor walking or in a chair through a busy atrium and past a cafe is terrifying. I think the public and especially those with mental health issues would find it distressing. Something like the sexual health service would be a more appropriate service to move there and leave the dialysis unit at Queen's.”
- A small number of respondents thought the public were not provided with enough information to decide whether they support or not or that the questions were not suitable.
- A resident thought there are more GP and dental services needed in the Rainham and South Hornchurch area. As a Rainham resident they felt neglected due to lack of a full time GP provision at Rainham Health Centre and concerned about current care infrastructure not being sufficient with a significant number of new properties in Beam Reach. The resident suggested a polyclinic as the best solution for the area.

- There was a suggestion to keep services in the Hub focused on the elderly as they make up a significant percentage of Hornchurch's population and providing other services in Queen's Hospital as the younger population tends to be more concentrated there.
- A resident felt mental health services shouldn't be provided at the hub.

Services

Participants suggested the services below as additional priorities to be included in the hub:

- Mental health – both crisis and long term support (adults and children).
- Geriatric services, including physiotherapy to support older residents
 - St George's Hospital historically hosted a number of geriatric services, closure of the hospital highlighted the need for this type of service in the local area.
- Play group and community centre or nursery
- Dentistry/Ophthalmology/Audiology/Phlebotomy/Scans (ECG, x-rays)/Diabetes Clinic – providing these at the hub would be more convenient for patients and could significantly reduce pressures on hospitals.
 - Hydrotherapy
 - Perinatal and health visitors
 - Community midwives
 - Stroke rehabilitation
 - Polyclinic
 - Wound clinic
 - Chiropractor
- GP/Out of hours/Walk in centre.
 - Currently these services have been reduced e.g. by closure of the walk in centre on Southend road.
 - It is important to be able to see a GP in a face to face appointment instead of a phone call consultation.
 - Increased capacity is necessary especially in the light of recent practice closures in South Hornchurch.
 - Maternity/Paediatrics.
- Outpatient services currently provided by the Queen's Hospital to be transferred to the hub in order to relieve pressure.

In the survey there is a dedicated question (Q11) regarding services in the hub. The themes seem to overlap with answers received for Q10.

5.2 Summary of survey Q11

Another open question in the survey was question 11 “Are there other services you think might be more appropriate at the Hub? Or do you have any other general comments about the proposals?”

There were 283 responses to this question. Themes that emerged overlap with answers to question 10 and are as follows:

Services

- Diagnostics and walk in centres. A number of residents stated they would like to see a new walk in centre facility in the area, similar to the Harold Wood Polyclinic as well as diagnostic services including phlebotomy (blood testing), x-rays, ultrasound, MRIs, breast screening, cancer screening, ECG, allergy testing, GI endoscopy.

“(...) to have a facility that does not involve repeated visits to hospital and allows for early diagnosis would be a major step forward. The local hospital services simply cannot cope at present.”

- Children’s A&E: Some residents expressed dissatisfaction with the current waiting times for the above services and felt the provision was inadequate. It was suggested that one of the aims of provision of these services at the hub should be reduction of pressure on the Queen’s hospital, especially the A&E.

“ The lack of medical facilities in the south of the borough not just GP services but any kind of minor injuries unit that can do x-rays and various other A&E services to take the pressure off Queens hospital and make it easier for the local people to reach.”

- Wound care/minor injury
 - Wounds and cuts,
 - emergency care,
 - follow up dressings
 - infected toenail removal
 - stitch removal
- Outpatient and prevention services.
 - Nurses (including district and community nurse)
 - Physiotherapists
 - Convalescent beds for those who don’t need a hospital but are not well enough to go home
 - Lifestyle change advice for type 2 diabetes and obese patients
 - Stroke/falls prevention clinic
 - Podiatry
 - Dietitian
 - Chiropractor
 - Healthy lifestyle advice
 - Dementia respite care
 - Occupational health
 - Hydrotherapy
 - Men’s health and wellbeing
- Vaccination clinic
 - general vaccination, including travel vaccination

- Mental health service
 - Adult mental health
 - Children's mental health
 - Support for children in foster care
 - Parents' support
 - Mental Health emergency care centre
 - Counselling
 - Support for frail patients
- Dentistry, ophthalmology and audiology – currently some residents have reported that they find it difficult to sign up for these services and the waiting times are too long.
 - Microsuction
 - Emergency dental service
 - Speech therapy.
- Maternity/paediatrics
 - Advice for new mums
 - Breastfeeding support
- Geriatric services
- End of life clinics (including family support)
- Frailty unit
- Brain injury support
- Sexual health
 - Contraception
 - STI checks
 - Advice for adolescents and young adults
 - Adolescent Sexual Health and Young Parents support Eating Disorder specialism (outside of CAMHS)
- 24/7 Pharmacy
- GP, including out of hours service
- Long term conditions
- Non-medical services including:
 - citizen's advice
 - nursery with SEN facilities
 - youth space for SEN children
 - community café
 - mobility exercise area
 - gym
 - crisis hub facility
 - “warm space” for people awaiting emergency housing
 - volunteer centre offering roles to those who due to health issues were not able to work to build their confidence and new skills

“(...) by having services that are non-medical but could support rehabilitation e.g. volunteer centre offering volunteering roles to improve confidence and skills for those who have been impacted by ill health alongside citizens advice who can make sure they can advise people on their rights if they are being discriminated against thorough their illness would be a good fit.”

Design

Some residents questioned whether the building would be large enough to provide services at a scale that will be able to cope with demand, with one respondent suggesting there were too many services planned for the size of the hub

“Unlike Queen's Hospital, it has to be built large enough to cope with demand. We also need support for the south and east side of the borough where we often have long journeys to King George's in Goodmayes for some outpatient appointments and treatment: especially hard for those dependent on public transport”.

Location and look of the hub is not as important to some residents as long as provided services are adequate:

“Hopefully we will have one of the new diagnostic hubs available in this area which will be a major step forward in healthcare. I don't have a particular view on where it is sited as long as there is one.”

Other comments

- There was a suggestion for a commercial coffee shop
- One of the residents said they would prefer the entrance not facing Sutton Lane
- There was a suggestion to cultivate St George's Hospital history at the hub:

“Don't forget the history of this wonderful site, which was a vital part of our caring community. I spent very happy times there as a student caring for people from the local community in a beautiful environment. Hopefully a little space will be given to demonstrate the long history of that space.”

Accessibility

The main priority for residents are parking spaces. Currently residents struggle with congestion due to proximity of a school. Residents are concerned that if there aren't enough spaces provided at the hub, patients will resort to taking up their parking spaces.

- Parking suggestions included
 - less bicycle bays
 - parking near dialysis centre
 - more parking spaces for cars
 - good public transport links

Other comments

- Outdoor activities should be incorporated into therapy
- Local charities should be included and actively support residents at the hub
- All proceeds from the sale of the land at St George's Hospital should be spent on building the hub
- Some residents reported they are concerned about sufficient staffing
- There should be more support from GPs and pharmacists in terms of lifestyle advice and education:

“I feel using our chemists more and having services from our GPs like exercises, dietary information etc would be so helpful. Sometimes I leave my doctor with painkillers but no follow up. I need help to combat the pain with knowledge, understanding and exercises. I know of two people who would be so willing to help as they fully trained and do this already.”

I know there must be more around that are fully trained that would be so much help to doctors and patients. I go to one privately and it has helped my wellbeing.”

5.3 Summary of key themes from community online sessions

Themes that emerged during these discussions revolved mainly around wellbeing, planned services, design and logistics at the hub and how the community can best benefit from them. A summary can be found below.

Community and wellbeing

- The importance of supporting wellbeing, reduction of isolation and promoting independence in local residents. It was suggested that the hub’s facilities (e.g. sessions in the garden, landscaping) could act as therapeutic support.
- Importance of community and voluntary sector support for patients after diagnosis.
- There was a suggestion for the Safer Neighbourhood Teams to operate from the Hub.
- Suggestion for room naming conventions as a community involvement tool.

Design and logistics

- Questions regarding date of completion and final look of the building.
- The importance of the hub being built in an eco friendly way and allowing flexibility in meeting the ever changing needs of the community.
- There was a suggestion to put up a sign where the hub will be built.
- Patients visiting the hub for a dialysis would require a separate exit in case of a haemorrhage. There was also a discussion around placement of dialysis services in the new SGH building – an attendee felt that 2nd floor in Queen’s hospital where the services operate from currently was not an appropriate choice due to potential haemorrhages.
- There was a question whether the number of ambulances available to transport vulnerable patients to their dialysis appointment was adequate.
- There was a question regarding Covid safety measures at the hub.
- There was a question about measures put in place to ensure the SGH building is suitable for patients with all levels of disability.
- Question about interior design and making it dementia-friendly – Dementia Action Alliance to support the design stage.

Services

There were suggestions and questions about:

- What services exactly would be provided at the hub and if mental health services would be included.
- Solutions for patients with sensory impairments.
- Whether dental services were planned in the hub.
- Lack of planned ophthalmology services at the hub – a representative felt that these services should be prioritised as part of the outpatient services planning. They said it could be extremely beneficial for both the patient and the system as follow up visits in most cases don’t require hospital equipment. Providing follow up visits from the hub would ease pressure on hospitals and benefit the patient – in many cases sight loss or impairment is connected to dementia and learning disability and these patients tend to prefer community settings over hospitals.
- Sight loss services currently provided in the area are not adequate.
- A representative stressed the importance of appropriate management of volunteers at the hub to maximise benefits for patients.
- Importance of the integrated approach – seeing voluntary and community sector as one with the services provided by the NHS.

Appendix 1 – Correspondence received from Havering Health and Overview Scrutiny committee



Zena Smith
Head of Election and Democratic Services

TO:
NHS North East London Clinical Commissioning Group
4th Floor – Unex Tower
5 Station Street
London
E15 1DA

London Borough of Havering
Town Hall Main Road
Romford RM1 3BD

Please contact: **Anthony Clements**
Telephone: 01708 433065

Fax: 01708 432424

email:
anthony.clements@oneSource.gov.uk

By e-mail to: communications@nelft.nhs.uk

Date: 17 January 2022

Your Reference:

Our Reference: AC

By e-mail

Dear Sir/Madam

Response to Engagement on Hornchurch Health and Wellbeing Hub by Health Overview and Scrutiny Sub-Committee, London Borough of Havering

As Chairman of the Council's Health Overview and Scrutiny Sub-Committee, I am writing to confirm the Sub-Committee's comments as part of the current engagement process on the development of a Hornchurch Health and Wellbeing Hub on the St George's Hospital site. This follows the recent presentation on the proposals to members of the Sub-Committee.

The Sub-Committee welcomes the proposals overall and is pleased that services will be concentrated on a single site, potentially allowing patients to see more than one clinician in a single visit. Members are also supportive of the proposal to have mental health services operating from the site.

Members are pleased that the Hub will open 7 days per week and that renal dialysis will be available until 10 pm. If possible, the Sub-Committee would like other services in the building to also be open until 10 pm.

The Sub-Committee would like to keep updated on the development as it progresses and wishes for updates to be included in its work plan for the future period.

Yours sincerely

Councillor Nisha Patel
Chairman, Health Overview and Scrutiny Sub-Committee

Cc: All Members, Health Overview and Scrutiny Sub-Committee, London Borough of Havering
Mark Ansell, Director of Public Health, London Borough of Havering

Appendix 2 – Key stakeholders comments

Julia Lopez, MP from Hornchurch

Q10. Do you have any other comments to explain your answers of why you support or object to any proposed services?

I am very keen for integrated patient care to be the focus of this Hub, with many more services moved out of Queen's Hospital into the community so that people can be treated closer to their homes and avoid attendance at or admission to hospital.

I also want to see closer working between social, mental and primary care services. With Havering having the highest proportion of elderly residents of any London borough, I particularly welcome the movement of frailty services into the Hub. This will see significantly fewer people having to attend Queen's Hospital despite not requiring acute treatment or services, therefore freeing up acute services within BHRUT.

I believe this will help keep elderly people in their communities and reduce the likelihood of them requiring hospital care. I am supportive of renal, dialysis and diagnostic units being established in the Hub as this will lessen pressure on Queen's Hospital and the Hub will be the more appropriate location for these types of care.

Not only is this location closer to the majority of patients requiring treatments, but it will also free up expensive space for Queen's Hospital to improve its A&E services, which have been under substantial pressure for many years. I also welcome the confirmation that GP services will also definitely be at the Hub and know this will alleviate wider issues about access to GPs in Havering and the quality of premises.

I understand that the range of outpatient services which will be provided at the Hub has not yet been finalised. However, I welcome the design of the Hub and the flexibility it will have to adapt to the changing requirements of the local and regional medical requirements over the next 20-30 years.

During a recent stakeholder meeting, I also welcomed the assurance that the Hub will be built to be as pandemic-proof as possible, designed in a way that will greatly improve infection control when compared to older buildings.

Q11. Are there other services you think might be more appropriate at the Hub? Or do you have any other general comments about the proposals?

I welcome the commitment to provide Mental Health services as well as joining up with Local Authority Adult and Children services. Mental Health is something which will be particularly important as we emerge from the pandemic and providing these services in one community location will greatly aid those residents who require this complex care.

I have been campaigning for and championing this project since my election in 2017 but have always been keen to ensure that any new facility is not just focussed on a narrow view of health but takes a more holistic approach to patients' wellbeing.

I am therefore very pleased that space will be provided for voluntary groups and the commitment to have a community café and a dementia-friendly communal garden is still in place. These will see the Hub become more than a health centre and be an exceptional example of how space can be orientated towards local healthcare services as well as providing broader social benefits to the community it serves.

Sarah Balsler, CEO - Havering Mind

Q10. Do you have any other comments to explain your answers of why you support or object to any proposed services?

Such a Wellbeing Hub would be a valuable addition to local provision which is already overstretched with many members of our community not receiving the level of support, at the right time. I would like to recommend that such a provision is delivered in partnership with the voluntary sector; and as CEO of Mind in Havering, I would be very keen for our Service to partner with NELFT in this respect as we do on other projects across Havering, Barking & Dagenham.

The value of partnering with the voluntary sector is great and provides service users with a different perspective on their engagement with the provision and comfort & security. Mind in Havering would be happy to discuss how we could partner with you in terms of providing mental health and wellbeing support to adults, young people and members of the community who may feel excluded from services due to their ethnicity, sexual orientation, available resources, ability etc.; through this newly proposed Wellbeing Hub.

Q11. Are there other services you think might be more appropriate at the Hub? Or do you have any other general comments about the proposals?

Ensuring that the services are intentionally accessible and accessed by all different communities across the Borough without exclusion. Those from black and ethnic minority groups and young men should be a focus for example. Also, a Crisis Hub facility should be considered in the wake of the C19 pandemic

John Reid, Friends of St Georges Hospital charity

Q10. Do you have any other comments to explain your answers of why you support or object to any proposed services?

The services to be provided are much needed, and long awaited in a local setting, that of the St Georges site. Access by road, train and public transport is good, and parking reasonable. Make it real please! asap!!

Q11. Are there other services you think might be more appropriate at the Hub? Or do you have any other general comments about the proposals?

The combination of NHS and Volunteer groups is a partnership made in heaven, and essential for the services provided, to fully prosper.

Response on behalf of the Partially Sighted Society of Havering

Q10. Do you have any other comments to explain your answers of why you support or object to any proposed services?

No GP surgeries should close to move into this hub

Q11. Are there other services you think might be more appropriate at the Hub? Or do you have any other general comments about the proposals?

This is not a hospital and should not be counted as a new hospital

Appendix 3 – Engagement document

The [engagement document](#) can be downloaded from the NEL CCG website

Appendix 4 – EasyRead version of the engagement document

The [Easy Read version of the engagement document](#) can be downloaded from the NEL CCG website.