

A HEALTH PLAN FOR GREATER SOUTHAMPTON

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EXECUTIVE SUMMARY

The Mid and South West Hampshire Local Health Community has reviewed the Health Services delivery profile with a view to:

- provide modern, safe and sustainable services for patients;
- reflect current strategic thinking on NHS reform and opportunities for service rationalisation, improvement and avoidance of duplication;
- make better use of NHS estate to cope with the 24 hour agenda and release under-utilised assets to improve the overall condition of the estate and facilities;
- assist the reconfiguration of health organisations and services and the 'Fitness for Purpose' initiative, including NHS Foundation Trust development and future clinical training;
- provide impetus to the Health and Social Care and Wellbeing integration agenda by exploiting opportunities for 'bed-less' bridges between acute and long term care.

We recommend the following changes, many of which will be achieved during the next three years:

- Southampton University Hospitals NHS Trust to provide and develop the activities of its Foundation Trust core business on the Southampton General Hospital/Princess Anne Hospital site only and exit the Royal South Hants Hospital;
- Southampton City Primary Care Trust to assume ownership and management of the Royal South Hants Hospital site. The following services will be provided on the site and any surplus land remaining after their provision will be disposed of:
 - a treatment centre. (20,000 day case /short stay procedures and related diagnostics)
 - a walk in centre. (50,000 attendees per annum)
 - a primary care centre. (8 doctors and 3 dental suites)
 - a range of interface clinic outpatient services
 - a diagnostic capability to support the above and primary and community care in the city
 - a new adult mental health unit. (50 acute reduced from 60 previously, and 12 psychiatric intensive care beds);
- Hampshire Partnership NHS Trust to realign their services on the Moorgreen and Western Hospital sites, allowing for a phased disposal of the Moorgreen Hospital site;
- Southampton City Primary Care Trust will develop a primary care centre on the Western Hospital site (LIFT Project with a value of £12 million);
- Southampton City Primary Care Trust and the South West Hampshire Primary Care Trusts will develop, with primary and social care partners, new care pathways that reduce the reliance on hospital beds for scheduled and unscheduled care and long term conditions (reduction of 75 beds hospital beds);
- All organisations will need to jointly review capital and revenue investment plans to support these changes. Financial impact and investment models will be developed and agreed following submission of this Plan for each organisation and for the locality as a whole. These will be linked with Local Delivery Plan and any future Foundation Trust application processes.

1. INTRODUCTION

1.1 This Plan sets out a number of agreements and proposals for 'Greater Southampton' which are:

- designed to enable the transformation and modernisation of clinical services ;
- deliver a balanced and complementary healthcare system;
- provide services which are safe, sustainable and affordable.

1.2 The Plan takes account of:

- the White Paper - 'Our health, our care, our say' published in January 2006;
- standards and targets to improve access and reduce waiting times and inequalities;
- the standards and targets included in National Service Frameworks;
- local demography and epidemiology;

1.3 The Plan concentrates on a relatively small number of improvements in the way health services are delivered. It is not intended to be comprehensive and should be seen as one of a set of plans which supports the Integrated Change Programmes (part of the Integrated Service Improvement Programme), including those for Scheduled Care, Unscheduled Care and Long Term Conditions, which are priorities for the Mid and South West Hampshire local health community. It will be linked into the management of these Programmes

1.4 The Plan has been developed following a workshop hosted by the Strategic Health Authority in January 2006 with representatives invited from local NHS Trusts and Primary Care Trusts, Hampshire County Council, Southampton City Council, the Local Medical Committee and the voluntary sector.

1.5 Many of the plans and proposals included in the document have been developed with the involvement of and in consultation with stakeholders. It is recognised that in some areas further stakeholder engagement is needed as options are considered and detailed implementation plans developed.

1.6 The success of the proposals will be very dependent on the ability of local organisations to develop in partnership a strong 'health and social care community' building on the current joint working arrangements.

1.7 Implementation of the Plan will be achieved through a variety of mechanisms and in the following context:

- choice, contestability and plurality of provision;
- practice based commissioning;
- specialist services commissioning;
- redesign and reconfiguration of clinical and clinical support services;

- partnerships with Local Authorities and the Independent Sector;
 - workforce planning and redesign including a commitment to teaching and training for clinical and non - clinical staff;
 - new information systems and technology.
- 1.8 Patient - centred information systems will be implemented progressively from 2006 to 2009, with the services of 'Connecting for Health' as the core. The combination of the Care Records Service and the Picture Archiving and Communications system based on a single 'domain' for the whole of Hampshire and the Isle of Wight and used by all clinical practitioners, will support the more flexible delivery of services to patients.
- 1.9 Resourcing the Plan will be challenging and the pace of change will be influenced by the availability of capital and time - limited revenue resources. A significant proportion of the funds will need to be found from efficiency savings and the rationalisation of services and the estate.
- 1.10 The local health community will need to do further work to plot the financial impact of the required changes and agree how the necessary finance to support the changes will be generated

2. HEALTH AND WELL BEING

The Population

- 2.1 A total of 500,000 people live in the city and the surrounding areas and use the services of the 'Greater Southampton' health system and adjacent health systems particularly services in Winchester. Southampton draws patients from the whole of the central south coast for tertiary and specialist services, including health communities outside of Hampshire and the Isle of Wight.
- 2.2 The population profile of Southampton continues to age with the highest increase forecast in the city's over 85 population. In Eastleigh and the New Forest even higher increases in the elderly will occur over the next 20 years. Population reductions are forecast for the youngest age groups in the city. Black and minority ethnic communities comprise some 7.5 per cent of the total city population and 13 per cent of the under- four age group. High population growth is forecast for the city centre, driven by new housing developments, particularly flats.
- 2.3 Many Southampton residents have a good quality of life and enjoy good health into old age. However, in general terms health tends to be poorer in the city than in the rest of the South East. Some parts of the city continue to be among the most deprived areas in the country. Child poverty and high rates of teenage pregnancy are a particular concern within some areas. Southampton citizens view crime reduction as their highest priority. Deaths from heart disease and cancer are falling, but less quickly than elsewhere. Cancer is more common than in similar cities. Smoking rates are amongst the highest in the South East, obesity levels are growing, suicide rates are high and the incidence of alcohol and drug misuse is on the increase. The surrounding areas have generally better health, but there are communities on low incomes facing similar health challenges to those in deprived urban neighbourhoods.

The Future

- 2.4 Following extensive local consultation in 2004, a Health and Well-being Strategy has been developed with Southampton City Council. Three main programmes will:
- tackle health and social inequality;
 - promote independence and choice;
 - enable people to choose better health.
- 2.5 Local NHS organisations, through other local partnerships at County and District Council levels, will tackle underlying determinants of health, such as poor housing, poverty and poor skills and unemployment.
- 2.6 2006 will see the updating of (Sustainable) Community Strategies and the development of Local Area Agreements. In line with Government policy, a key challenge for the NHS and local authorities is to shift resources into prevention and the development of healthy living services.

The Changes

- 2.7 Over the next two years significant additional investment will be needed to move forward the prevention agenda in the city including continued support to reduce smoking modernise sexual health services and tackle obesity, with specific work in those communities with the highest needs.

3. DEVELOPMENT OF PRIMARY CARE

The Future

- 3.1 Primary and social care services operating 24 hours a day, 7 days a week will be the cornerstone of the Greater Southampton Health Plan.
- 3.2 General Practice is central to the provision of primary care services and the pivotal role of the relationship between patients, the practice and their general practitioner will be maintained to support continuity of care.
- 3.3 General Practitioners will work with multidisciplinary teams with enhanced skills, including nurse practitioners and community matrons. They will also be able to develop skills to provide treatment previously carried out in acute hospitals for example General Practitioners with a Special Interest.
- 3.4 An enhanced range of services will be provided in community and primary care settings through investment in general practice and through the provision of new Primary Care Development Centres which will support local practice and act as conduits to other services (such as employment rehabilitation, exercise on prescription, etc) reducing dependency on medical models where appropriate. These centres will be the focus of locality development.

- 3.5 Practice based commissioning will be a vehicle for commissioning agreed care-pathways, especially chronic disease management in the community including intermediate care.

The Changes

- 3.6 By the end of 2009 a new Primary Care Development Centre on the Western Hospital site will be open (a LIFT Project).

4. SERVICES FOR OLDER PEOPLE

The Future

- 4.1 An increase in an ageing population will require a range of approaches to support independence, fitness and health:
- services will be as local as possible according to need;
 - care and treatment for physical and mental health will be provided through integrated social and health care services;
 - long term conditions will be managed in local communities supported by intermediate care and specialist care. This will be delivered primarily in the community and, where necessary, in hospital;
 - older people will be encouraged to maintain fitness and activity;
 - Primary Care Development Centres and Urgent Care centres will provide rapid access to services, including diagnostics;
 - services to support end of life care will be improved.
- 4.2 Prevention and community services will be developed to reduce reliance on beds in acute hospitals, particularly for people with long term conditions. For example:
- People with long term conditions will be supported through enhanced primary care services and specialist care outside of hospital;
 - Medicines management will be integral to supporting older people, with pharmacists equipped to carry out new roles including supplementary prescribing within protocols;
 - Joint health and social care multidisciplinary teams will provide care in the home and in the community and will provide enhanced community support to avoid unnecessary admissions and reduce length of stay.
- 4.3 Over the next 5 years the balance of services will change substantially with a reduction in the number of beds for older people provided in acute hospitals, and the focus shifting to the role of community hospitals, and alternative facilities provided in partnership with local authorities and the independent sector and community based care.

- 4.4 The balance between beds and community services for older people with mental health problems will also change over the next 5 years, which will see a reduction in the number of beds in NHS hospitals.
- 4.5 During 2007/8 consideration will be given to testing service benefits and the feasibility of locating all of the NHS beds for older people with mental health problems onto one hospital site, subject to affordability and the availability of capital.
- 4.6 Rationalisation of bed usage will require investment and a shift of resources into community settings to support different models of care.
- 4.7 Some beds and services will provide care for people with both mental and physical health problems. These will need to be supported by clinical teams with the necessary range of skills and expertise.

The Changes: Assessment and Rehabilitation

- 4.8 By the end of 2008, 75 beds for care and assessment of older people at Southampton General Hospital will be transferred to community hospitals or replaced with enhanced community services providing care at home or in nursing and residential homes.

In summary the changes will mean:

	Now	By 2008
Southampton General Hospital	75 beds (identified for transfer)	-
Western Hospital	50	68
Lymington	-	10
Royal South Hants Hospital	50	50
Community Services	-	(47 beds equivalent)

The Changes: Older Person’s Mental Health

- 4.9 By early 2007, on the Moorgreen Hospital site the services currently in Allington House and the main hospital will have moved into refurbished accommodation in the Tom Rudd Unit.
- 4.10 By March 2008 there will be a reduction in the number of beds for older people with mental health problems at the Western Hospital, from 51 to 33, subject to the development of a range of community services. Those will be supported by 6 respite care beds in the independent sector.

5. MODERNISATION OF ADULT MENTAL HEALTH SERVICES

The Future

- 5.1 A local consultation document on the future provision of adult mental health services, 'Moving Ahead' published in 2005, proposed a number of changes consistent with the National Service Framework (Mental Health) 1999. The proposals are based on a whole system of care including Crisis Resolution and Home Treatment, Assertive Outreach Teams, Early Intervention in Psychosis, Primary Care Mental Health Services and Community Mental Health Teams.
- 5.2 The proposals will enable a reduction in acute admission beds from 60 to 50 (this is a further reduction from 75 since December 2004), based on local and national evidence on the impact of Crisis Resolution and Home Treatment Teams. 50 beds is the minimum number required for Southampton and this figure has been rigorously tested, including national and local benchmarking and advice from the South East Development Centre.
- 5.3 Acute admission beds, along with a Psychiatric Intensive Care Unit, are located at the Department of Psychiatry on the Royal South Hants Hospital Site. The provision of a new adult mental health unit to replace the existing facility is a top priority.
- 5.4 The location of a new adult mental health unit has been subject to extensive consultation with service users and carers, partner organisations and other stakeholders. Southampton City Council and Southampton City Primary Care Trust have agreed that the unit needs to be located within the city boundaries and be easily accessible. Service users and carers wish to have a new hospital as soon as possible that is fit for purpose. No alternative sites were found which meet the accessibility, availability and affordability criteria. Therefore the preferred option overall remains the Royal South Hants Hospital site. The location identified on the site has the benefit of enabling appropriate design with economy of site usage.

The Changes

- 5.5 By April 2006 an Early Intervention in Psychosis Team will commence operation. This will complement the existing crisis resolution and home treatment services and assertive outreach services, which together will support the reduction in the number of acute beds.
- 5.6 By the end of 2009 a new adult mental health unit located on the Royal South Hants Hospital site will be open (LIFT Project).

6. ROLE AND FUNCTION OF SECONDARY CARE SERVICES

The Future

- 6.1 Secondary Care services will be provided by a range of NHS and Independent Sector providers. They will:
 - provide additional capacity;
 - ensure plurality and contestability;
 - enable choice.
- 6.2 All service providers will, in future, play a full part in teaching and training for clinical and non-clinical staff. NHS trusts will also have an important role in promoting research.

- 6.3 The capacity for elective services will be increased to ensure that access targets are achieved and choice is available. This will be achieved in a number of ways:
- increased diagnostics capacity through the independent sector diagnostics procurement (from October 2006 an additional 54,000 diagnostic procedures will be available for the population of Mid and South West Hampshire);
 - increased day case and short stay surgery capacity through the second wave Independent Sector Treatment Centre programme (by 2009 over 30,000 operations will be performed in dedicated independent sector and NHS treatment centre facilities within Mid and South West Hampshire);
 - the transfer of non clinically complex treatments from Southampton General Hospital to primary and community care settings;
 - the redesign of surgical services across Southampton and Winchester to develop centres of excellence and avoid unnecessary duplication of services.
- 6.4 Outpatient services will be redesigned and modernised. Specialist outpatients will be provided at Southampton General Hospital. However for the majority of outpatient and interface services, a dispersed model is envisaged, with services provided in a range of community and primary care facilities. There will be more 'one-stop' appointments and fewer unnecessary follow-up appointments both in primary and secondary care by adopting NHS best practice standards.
- 6.5 Emergency services will continue to be provided at Southampton General Hospital/Princess Anne Hospital and the Lymington New Forest Hospital. These services will be integrated with primary and community care and supported by Walk in Centres and emerging models for Urgent Care Centres.
- 6.6 NHS Trusts will also work in partnership with the independent sector and primary care to deliver integrated chronic disease management services designed to minimise hospital based care and to ensure a seamless transition between community and acute care.

The Changes

- 6.7 By early 2007 the Lymington New Forest Community Hospital (diagnostic, elective and unscheduled care treatment centre) will be commissioned.
- 6.8 By early 2007 an Urgent Care Centre on the Southampton General Hospital site, co-located with the Emergency department will be open.
- 6.9 By late 2006 the Independent Sector Diagnostics Programme will be fully operational across Mid and South West Hampshire.
- 6.10 During 2007/08 Independent Sector Treatment Centres will open in central Southampton and Lymington.

7. DEVELOPMENT OF TERTIARY (SPECIALIST) CARE

The Future

- 7.1. The Tertiary Centre (Southampton General Hospital/Princess Anne Hospital) will be developed as a nationally recognised provider of excellent services. This will encompass clinical services, teaching and research (in addition to the provision of emergency and complex elective services for the local population).
- 7.2 The following defining services will be developed:
- Neurosciences (stroke, neurosurgery, neurology, neuro rehabilitation and spinal surgery). The current development plan and the development of links with other services such as stroke will further strengthen neurosciences. A specialist spinal centre , incorporating neurosurgery and orthopaedics, is being planned as part of the single surgical services project between Southampton and Winchester;
 - Cardiovascular Services (cardiology, cardiac surgery and vascular surgery). The new Cardiac Centre will provide additional capacity to meet the increased level of need forecast by the Central Southern Cardiac Network, and enable more patient choice by 2006/07 – 2007/08;
 - Gastro Intestinal Services (upper and lower GI surgery, medical GI, hepatic-biliary, hepatology). This service will be developed working in partnership with the University of Southampton, whose research in this area is nationally recognised;
 - Respiratory Services (thoracic surgery, respiratory care). These will be developed to ensure integration with the community, keeping patients out of hospital wherever possible, and with improved links with thoracic surgery;
 - Womens and Childrens Services (maternity, obstetrics, foetal medicine, tertiary paediatrics). Plans will be developed, in partnership with local providers including Winchester and Eastleigh Healthcare NHS Trust, to release capacity at Southampton General Hospital/Princess Anne Hospital for tertiary work and to give the potential to develop a wider range of specialist services including In-Vitro Fertilisation and also to develop existing services eg. the Neonatal Intensive Care Service in accordance with the Neonatal Network Strategy;
 - Oncology Services. The centre at Southampton General Hospital is being expanded to enable all cancer services to be located on the site and to meet the increase in need forecast by the Central South Coast Cancer Network and the progressive centralisation of services for rare cancers. Plans will be developed to support the expansion programme for completion by 2011/12.
- 7.3 The renewal of Southampton University Hospitals NHS Trust as a 'fit for purpose' tertiary and emergency care centre will require a programme of investment at Southampton General Hospital/Princess Anne Hospital to resolve the backlog maintenance problem, provide the appropriate facilities, including critical care and diagnostic services, and to upgrade the environment to the level expected by patients.

The Changes

- 7.4 By the end of 2006/7 the Spinal Centre will be operational following the implementation of this element of the Southampton and Winchester single surgical services project.
- 7.5 By mid 2006 the new Cardiac Centre will be completed and commissioning will have been initiated.
- 7.6 By August 2006 gastro-intestinal services for upper GI cancer will be centralised at Southampton General Hospital.
- 7.7 By Autumn 2006 an additional 8 neonatal intensive care cots will be open. The Network Strategy will also be reviewed in 2006/07.
- 7.8 By the end of 2006 a women's and children's hospital will be created on the Southampton General Hospital/Princess Anne Hospital site by bringing the services together in one location with funding from charitable donations.
- 7.9 By mid 2006 all oncology treatment (except for outpatients) will be located on the Southampton General Hospital site and by April 2006 plans will be finalised to expand oncology capacity to cope with the growing demand.
- 7.10 By December 2006 an additional 8 critical care beds will be opened. Plans will be prepared for at least a further 24 beds over the next 5 years, in accordance with the Central Southern Critical Care Network Strategy.

8. THE ESTATE

The Future

- 8.1 The local health community has a range of clinical facilities which have been built in recent years or which have benefited from major refurbishment including:
- the Treatment Centre facilities at the Royal South Hants Hospital;
 - the first phase of the cancer development at Southampton General Hospital;
 - the Treatment Centre building at the Royal Hampshire County Hospital, Winchester;
 - a range of primary and community care developments including:
 - Thornhill Centre for Healthy Living (New deal for Communities initiative).
 - Saucepans (child and adolescent mental health service)
 - Pickles Coppice (child and family services including a Sure Start base).
- 8.2 Other facilities are in construction or planning:
- the new cardiac centre at Southampton General Hospital;
 - the Lymington New Forest Community Hospital;
 - the new adult mental health unit on the Royal South Hants Hospital site;

- a primary care centre on the Western Hospital site.
- 8.3 It is essential that the optimum use is made of these facilities to enable high quality and affordable services to be provided including:
- tertiary and specialist care to the local and wider population;
 - services which support care at home and in the community.
- 8.4 Facilities which do not meet the standards required for modern care or which cannot be fully utilised will be:
- replaced or refurbished;
 - rationalised;
 - disposed of if surplus to requirements.
- 8.5 The implementation of the service proposals in this Plan will enable the NHS estate to be rationalised. In turn, rationalisation of the estate will release revenue and generate capital receipts which are needed to contribute to the financing of the priority service and capital developments and to contribute to financial recovery plans.
- 8.6 Some 'up front' investment will be required to finance the early rationalisation schemes and priority infrastructure, eg. critical care capacity
- 8.7 The transfer of services from acute to primary care settings will also provide the 'headroom' for Southampton University Hospitals NHS Trust to reconfigure and develop its tertiary, specialist and emergency services on the Southampton General Hospital/Princess Anne Hospital site.
- 8.8 The future role and function of each NHS hospital site will be defined through this Plan and complementary plans, for example the South West Hampshire Primary Care Trust's Strategy for Community Services.

A summary of the future role and function of the main NHS hospital sites is shown below:

Moorgreen Hospital

- older persons mental health services (in the interim whilst longer term options are considered);
- Countess Mountbatten House (end of life care);
- primary care development/Integrated Care Centre (subject to further consideration of needs taking account of the South East house building targets).

Western Hospital

- older persons services;
- Primary Care Development Centre (LIFT).

Royal South Hants Hospital

- Adult Mental Health Unit;
- Treatment Centre;
- Integrated Care Centre;
- teaching and training facilities.

Lymington New Forest Community Hospital

- Independent Sector Treatment Centre (unscheduled and scheduled care and diagnostics)

Southampton General Hospital/Princess Anne Hospital

- tertiary services;
- specialist and emergency services.

Community Hospitals

- roles defined as part of Community Services Strategy.

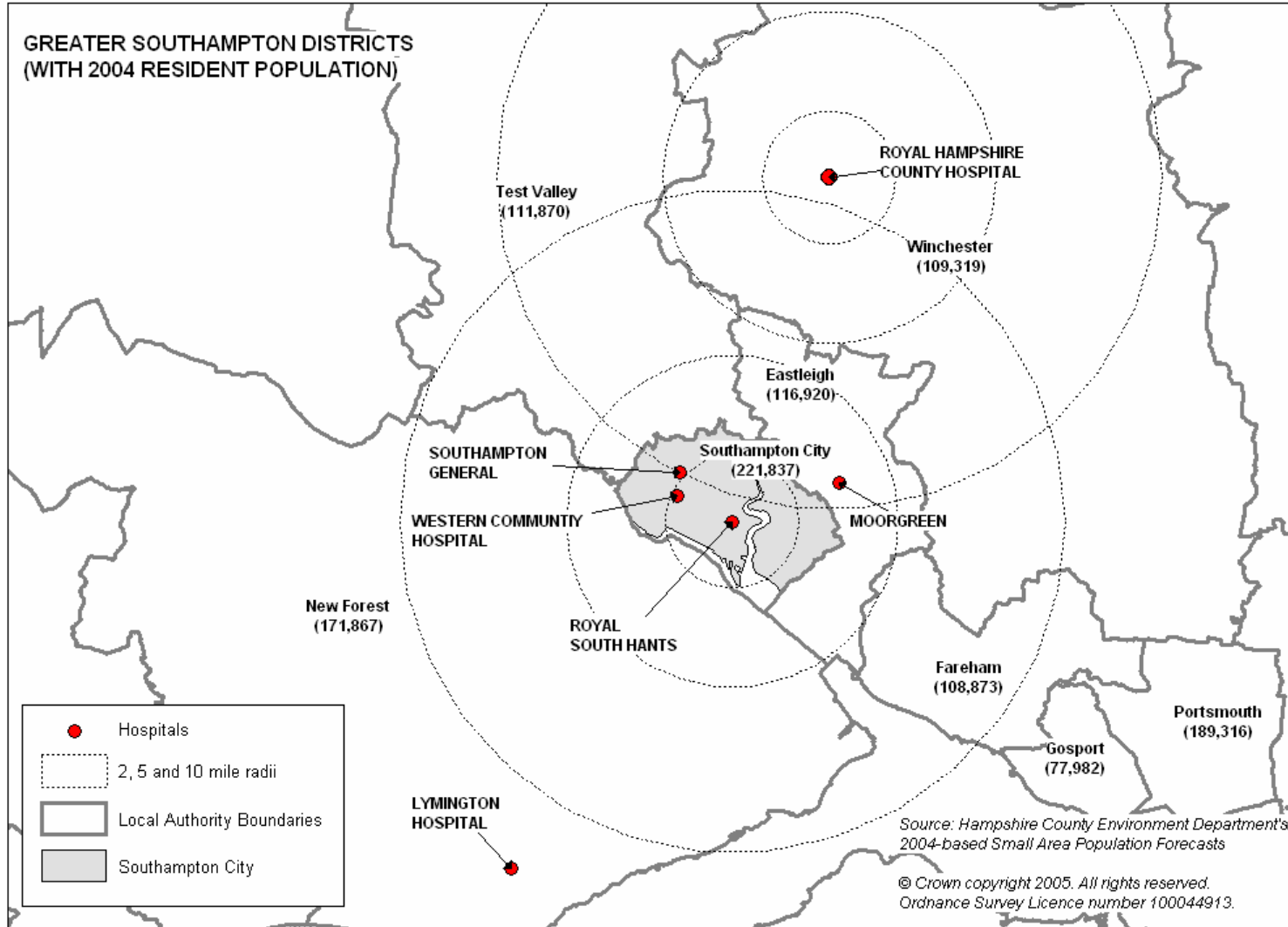
The Changes

- 8.9 As a result of the service changes and site rationalisation, 50% of the Moorgreen Hospital site (circa 10 acres) will be surplus to requirements and will be sold (2006/07 - 2007/08). A further tranche of land may be surplus depending on the finalisation of longer term plans for older persons mental health and community services.
- 8.10 By 2009/10 site rationalisation schemes at the Royal South Hants Hospital site, including the essential enabling works for the new adult mental health unit, will have been planned and implemented. Part of the site may then be surplus subject to confirmation of requirements for an Independent Treatment Centre and the proposed Integrated Care Centre.

9. CHANGE PROGRAMME

CHANGE	TIMESCALE
<p><u>Health and Wellbeing</u></p> <ul style="list-style-type: none"> Develop and implement targeted investments in prevention initiatives. <p><u>Development of Primary Care</u></p> <ul style="list-style-type: none"> Primary Care Development Centre on the Western Hospital Site. <p><u>Services for Older People</u> Assessment and Rehabilitation</p> <ul style="list-style-type: none"> Transfer 75 beds from Southampton General Hospital to community settings. 	<p>Plans considered through the Local Delivery Plan process in 2006/07 and future years</p> <p>2008/09</p> <p>2008/09</p>
CHANGE	TIMESCALE
<p><u>Older Persons Mental Health</u></p> <ul style="list-style-type: none"> Transfer services from Allington House to the Tom Rudd Unit at Moorgreen Hospital; Transfer services from the Main Hospital at Moorgreen to the Tom Rudd Unit at Moorgreen Hospital. <p><u>Modernising Mental Health</u></p> <ul style="list-style-type: none"> Early Intervention in Psychoses Team set up; Adult Mental Health Unit opens on the Royal South Hants Hospital site. <p><u>Secondary Care Services</u></p> <ul style="list-style-type: none"> Lymington New Forest Community Hospital (Treatment Centre); Urgent Care Centre on the Southampton General Hospital site; Independent Sector Diagnostics Programme; Southampton Independent Treatment Centre. <p><u>Development of Tertiary (Specialist) Care</u></p> <ul style="list-style-type: none"> Spinal Centre at Southampton General Hospital ; New Cardiac Centre at Southampton General Hospital; Centralise gastro – intestinal services for upper GI cancer at Southampton General Hospital 2006/07; Centralise all oncology services (except outpatients at Southampton General Hospital); 	<p>2006/07</p> <p>2007/08 (2006/07 if resources available)</p> <p>2006/07</p> <p>2008/09</p> <p>2007/08</p> <p>2007/08</p> <p>2006/07</p> <p>2007/08</p> <p>2006/07</p> <p>2006/07</p> <p>2006/07</p> <p>2006/07</p>

<ul style="list-style-type: none"> • Cancer Centre: Planned completion date; • Expand Neonatal Intensive Care at Princess Anne Hospital; • Womens and Childrens Hospital in the Southampton General Hospital/Princess Anne Hospital site; • Expand Critical Care at Southampton General Hospital. 	<p>2012 8 cots in 2006/07</p> <p>2006/07</p> <p>8 beds in 2006/07 plus at least a further 24 beds by 2010</p>
<p><u>Estate</u></p>	
<ul style="list-style-type: none"> • Vacate and dispose of the Allington House site at Moorgreen Hospital (circa 4 acres). 	<p>2006/07 (or 2007/08 if professional advice suggests a single sale of 10 acres)</p>
<ul style="list-style-type: none"> • Vacate and dispose of the Main Hospital site at Moorgreen Hospital (circa 6 acres); 	<p>2007/08</p>
<ul style="list-style-type: none"> • Complete the enabling works for the adult mental health unit; 	<p>2007/08</p>
<ul style="list-style-type: none"> • Confirm service brief for Royal South Hants Hospital site. Develop Treatment Centre and Integrated Care facilities, rationalise site/demolish old and functionally unsuitable buildings and dispose of surplus part of site (if not required to meet the service brief). 	<p>2009/2010</p>



**A HEALTH PLAN FOR GREATER SOUTHAMPTON
SOURCE DOCUMENTS**

- Integrated Service Improvement Programme: Strategic Context and Benefits Realisation Plans for Scheduled Care, Unscheduled Care and Long Term Conditions (draft February 2006);
- Mid and South West Hampshire: Capital and Estates Strategic Framework (December 2003);
- Mid and South West Hampshire: Informing Future Operational Plans (Consultants Report - September 2005);
- Moving Ahead: Consultation Document on the future provision of adult mental health services (2005);
- Service Brief for the future use of the Royal South Hants Hospital site (Consultants Report – October 2005);
- South West Hampshire LIFT: Strategic Service Development Plan (version 4.1 September 2005);
- The Single Surgical Services Delivery System Project: Framework for Implementation (November 2005).