

APPENDIX D

WAVERLEY BOROUGH COUNCIL

EXECUTIVE – 13 APRIL 2010

Title:

NHS SURREY REQUEST FOR USE OF SPACE AT CRANLEIGH LEISURE CENTRE

**[Portfolio Holder: Cllr Roger Steel, Cllr Mike Band]
[Wards Affected: Cranleigh]**

Summary and purpose:

This report informs Councillors of a request that has been received from NHS Surrey, which is seeking permission to decant certain NHS services into Cranleigh Leisure Centre during the period of rebuilding on the current hospital site.

How this report relates to the Council's Corporate Priorities:

Providing high-quality leisure facilities is a corporate priority for this Council, and extensive work has been undertaken to Cranleigh Leisure Centre to expand the range of facilities available, make the centre more attractive to users and encourage increased usage. The Executive will need to consider to what extent the request from NHS Surrey is complementary to this objective, or whether it might impede the Council in delivering its leisure priority.

Equality and Diversity Implications:

NHS Surrey has responsibility for ensuring that NHS services are available and accessible to local people. Their motivating factor in seeking permission to use space within the leisure centre is that this location is in very close proximity to the current hospital site, and from their point of view this makes the leisure centre an attractive option. However, the Executive will need to consider whether the NHS Surrey proposal would have a detrimental effect on access to leisure facilities, as it would result in the space available within the leisure centre for other activities being constrained.

Resource/Value for Money implications:

The Executive will wish to ensure that the Council is adequately reimbursed for any space it may agree should be sub-let to NHS Surrey.

Legal Implications:

The terms of the lease for the leisure centre give Waverley control over any sub-letting of the property.

Background:

1. Executive members will be aware that NHS Surrey has been undertaking a detailed options appraisal of local hospital facilities in Cranleigh. At the NHS Surrey Board meeting on 9 March 2010, the decision was taken to proceed with the option of redevelopment of GP and out-patient facilities on the existing Cranleigh hospital site. The alternative option, to build a new hospital facility on the Knowle Lane site, was rejected by NHS Surrey.
2. NHS Surrey has formally approached Waverley to request permission to decant some of the services that are currently operating within the hospital to Cranleigh Leisure Centre, in order to free up their site for phase one of the planned redevelopment. In a letter to the Chief Executive dated 24 March 2010, the PCT's Director of Finance sets out the facilities that it is seeking to sub-let: namely, it is requesting sole occupancy for up to three years of the new multi-purpose room, the kitchen, and one of the four treatment rooms, as well as majority occupancy of the other three treatment rooms and the first aid room. These areas are shown on the attached plan.
3. NHS Surrey are proposing that they would use this space to operate the following services:
 - Physiotherapy. Five physiotherapists offering 170 patient appointments per week. The proposal is that the multi-purpose room would be furnished as a full-time physiotherapy suite with curtained treatment bays and an open area for apparatus.
 - Outpatient clinics, offering consultations to an average of 210 patients per month in the medical specialties of: community midwives, community mental health counselling, elderly care, gynaecology, orthopaedics, lymphoedema, gastro-intestinal, ear nose & throat, pediatrics and neurology.

Issues for Waverley to consider:

4. The request from NHS Surrey is not an easy or straight-forward one, and it poses a number of important issues for Waverley to consider, as follows:
 - i. Whether the NHS Surrey proposal complements or detracts from the use of the leisure centre for leisure purposes?

There are health services that could conceivably enhance and complement a leisure centre offer, and that would add value to the leisure experience – such as cardiac rehabilitation, sports physiotherapy, weight-loss programmes etc. In addition, a leisure centre might make an ideal location for outreach-type health services (for example young people's sexual health services), aimed at reaching client groups who will not readily seek help and support from a GP surgery or hospital.

However, the proposals being put forward by NHS Surrey are not for services specifically designed to work well within a leisure setting, but are the routine services currently offered within the hospital. The proposal is a straight decant of these services into the leisure centre's newly refurbished spaces.

Waverley will need to think carefully about the extent to which this proposal adds value to, or detracts from, its plans to use the new space to offer a wider range of sports and leisure-related activities, for which the space was originally designed. The Executive will need to give careful consideration to the opportunity cost of agreeing to such a proposal, as the consequence of agreement would be a considerable reduction in the amount of space within the leisure centre for use for leisure-related and community activities – such as exercise classes, children's pool parties etc. In addition, the Executive will wish to consider the operational issues arising from this proposal – such as whether the use of the centre's circulation space as a hospital waiting room would conflict with other uses. Senior Management at DC Leisure have also expressed concern that the NHS proposals might not be compatible with DC's plans for the enhanced Leisure Centre.

ii. What are the planning implications of the NHS Surrey proposal?

Planning permission for a change of use would be required if the Executive were minded to agree to the NHS Surrey proposal in full, as the activities being proposed could not be said to be "ancillary" to the building's primary purpose as a leisure centre. A more limited arrangement, based not on sole occupancy of large areas of floor-space, but on programmed peripatetic sessions, would not be likely to require planning consent. The key test is whether the usage is complementary to the leisure activities, or whether it operates entirely separately from the leisure space.

iii. Is Waverley under any obligation to assist NHS Surrey to implement its chosen hospital redevelopment option?

There are wider implications involved within the NHS Surrey proposal. Locally in Cranleigh, there were, and still are, very strong feelings about the hospital decision, and there is considerable local concern that medical facilities (such as hospital beds) are being gradually withdrawn from the village. Some within the community may feel that it is incumbent on Waverley to agree to this decant proposal in order to retain the services within the village. However, it is important to bear in mind that the decision on the hospital redevelopment was not made by Waverley, and that Waverley has no operational control over its implementation.

It is undoubtedly the case that the chosen option requires medical services to be relocated, at least on a temporary basis. However, it is not clear that NHS Surrey had a coherent plan for the continuation of service provision in the short-term at the time when they took their

decision on the options appraisal. Indeed, the indications would seem to be to the contrary, as evidenced by the lack of detail presented to Waverley on alternative decant options in the local area that have been considered, and by the fact that initial approaches to Waverley's leisure service in October last year were abruptly abandoned until after the main decision on the hospital option had been taken by the NHS Surrey Board.

Moreover, there are a number of other very important practical considerations that have not yet been given public airing, but which are no less important – the most problematic of which is that the chosen development site is severely constrained, and it is difficult to see how site access for the redevelopment can be successfully accomplished. This must surely put some severe question marks over the ability of NHS Surrey to implement its chosen option.

Therefore, while Councillors will no doubt wish to consider what is realistic and possible to assist NHS Surrey retain medical services within Cranleigh, it does not automatically follow that the Council is obliged to rent out space within the leisure centre for medical use, or even that if the Council were to agree to this proposal that somehow this would guarantee the continuation of these services in the local community in the longer-term.

- iv. Whether agreement to the current proposal would be seen to set an unacceptable precedent, with knock-on effects for Waverley's leisure facilities in Godalming, Farnham and Haslemere?

There is considerable anxiety within the local community about the future of local hospital and health-care facilities. Already this year, the Council has fought against the closure of hospital beds in Haslemere, and Councillors have long been of the view that the facilities available to Godalming residents in particular are insufficient. There is a risk that, if the Council were to agree to the current proposal from NHS Surrey, this might have the effect of encouraging them to seek to take over other leisure facilities as an alternative to providing adequate services of their own, or that the public might believe that Waverley is somehow complicit in moves to withdraw hospital services.

Conclusion

5. The request by NHS Surrey for use of Cranleigh Leisure Centre as decant space to enable the redevelopment of the hospital site poses a number of very difficult questions for the Executive to consider. This is not a straightforward or easy issue. The Executive will have to weigh up whether NHS Surrey is making reasonable or unreasonable demands on Waverley, and whether their request is complementary to the leisure centre, or detrimental to it.

6. Clearly, Waverley has the interests of the local Cranleigh community at heart, and Councillors will wish to consider how to balance these competing and conflicting pressures.

Recommendation:

It is recommended that authority be delegated to the Chief Executive and the Head of Leisure Services, in consultation with Councillors Band, Knowles and Steel, to enter into detailed negotiations with the NHS Surrey Board for the location of limited complementary NHS services within the treatment rooms in Cranleigh Leisure Centre, within the constraints of the current planning status of the centre, and to report back to a future meeting of the Executive.

Background Papers

Letter from NHS Surrey Finance Director 24 March 2010.

CONTACT OFFICER:

Name: Mary Orton

Telephone: 01483 523208

E-mail: mary.orton@waverley.gov.uk

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