Questions and Answers: Leicester’s Hospitals reconfiguration proposals

Reconfiguration plans

Do you need to sell land at the Glenfield and General Hospitals in order to get the capital funding?
No. However, in our plan we have to show that with land that we no longer need for healthcare facilities should be sold off to generate money to reinvest in healthcare (in line with the recommendations in the Naylor Review published in 2017).

How confident are you securing the funding?
It is obviously hard to say, however we should be hopeful given we have already received £50m for a new Emergency Department and £30m for the upgrade of our intensive care units at the Glenfield and Royal Infirmary.
We hope that the public will support us so that we can get the much needed investment in our local health services.

Will the Trust involve the public in some type of co-production around the new buildings they are talking about?
Yes. When we get approval for funding, and following the consultation we will involve the public in taking our plans forward to reality.

Where is there space at the Royal?
We propose to build the maternity hospital on the space currently occupied by buildings adjacent to the new Emergency Department (Knighton Street office and OP). These buildings are old and not fit for purpose. We also do not provide any patient facing services from these buildings.
The other services planned for the Royal Infirmary site will be housed in the Balmoral and Windsor Building into space vacated by the Children’s services moving into Kensington once the maternity hospital is built.

When will all of these changes start?
We cannot make any changes until we have consulted and we cannot consult until we have been told that we are being given the funding and our Pre Consultation Business Case is approved.

Do you currently pay rent for your buildings?
Our buildings located across the General, Royal Infirmary and Glenfield Hospital sites are all owned by the NHS.

We hope the funding materialises, but what happens if you only get some of it, or none of it?
The £30.8m we have been allocated for the move of the level 3 intensive care unit beds and associated surgical services is independent of the funding for the rest of the reconfiguration programme. We do not have an alternative plan and as such, if we do not receive all of the funding, we would progress with our plans at a slower pace.

The plan looks good and is certainly ambitious; where will the funding come from?
We are applying for funding from central government, and will wait to be advised what the source of funding will be.
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Based on recent performance figures, the new Emergency Department doesn’t seem to have helped you achieve the 4-hour standard. How can you reassure people that these new buildings will improve other standards, such as cancelled operations?

Our plans are to bring services together in better clinical configurations such as having a dedicated Children’s Hospital and a Maternity Hospital, which will reduce duplication of staff and mean that services are located in better clinical configurations. Having a dedicated Treatment Centre at the General Hospital site will accommodate most of the elective services; this will help us reduce the likelihood of having to cancel operations especially due to winter pressures, as the Royal Infirmary will have most of the Emergency services.

Do you have any plans to partner with private organisations/ businesses in your plans?
At this time we have no plans to partner with private organisations; however we will be guided by central government in terms of how they propose to provide us with the funding.

Do your plans take into account in your planning that we are an ageing population?
Our plans are based on the local demography, which does take account of the aging population.