



All Our Futures

Investment Proposals for
Community and Hospital Services

This report can also be made available in alternative formats. Please contact the Patient/Client Information Service on 08457 626428 or Textphone (028) 2531 1001.



CONTENTS

Introduction	2
The Need for Modernisation	5
Health and Care Centres	8
Future Hospital Services	10
– <i>Acute Hospitals</i>	10
– <i>Local Hospitals</i>	11
Development Proposals by Council Area	12
– <i>Coleraine</i>	12
– <i>Ballymoney</i>	13
– <i>Moyle</i>	16
– <i>Antrim</i>	17
– <i>Ballymena</i>	21
– <i>Magherafelt</i>	23
– <i>Cookstown</i>	26
– <i>Newtownabbey</i>	27
– <i>Carrickfergus</i>	30
– <i>Larne</i>	31
What now?	34
Communication	34
Conclusion	35
Appendices	36
Glossary of Terms	39



INTRODUCTION

For more than three decades the Northern Health and Social Services Board (NHSSB) and its local Trusts have worked to meet the changing needs and demands of patients and clients, in particular through taking advantage of technological advances and developing practice in health and social care. However, many of the facilities from which services are delivered are no longer suited to modern day practice. This document outlines the unique opportunity now open to the Board and local Trusts to plan and build new facilities that are of a high standard and purpose designed to help fundamentally improve and modernise a wide range of health and social care services.

These proposals reflect and build upon the plans in the NHSSB hospital strategy *Towards A Better Future* published in 1998. More recently, in June 2002, the Department of Health, Social Services and Public Safety (DHSSPS) published a regional strategy entitled *Developing Better Services: Modernising Hospitals and Reforming Structures* (DBS). Following public consultation, the former Minister, Des Browne MP, approved DBS, the implementation of which requires the further development of Antrim Area Hospital, the development of new local hospitals at Whiteabbey and Magherafelt, and the transformation and strengthening of primary and community care services. The proposals in this document are also in line with the Regional Primary Care Strategy *Caring for People Beyond Tomorrow*

(2005) and the Regional Strategy for Health and Well Being 2005-2025 *A Healthier Future* (2004). Taken together these have the objective of ensuring high quality, effective, safe and sustainable hospital services complemented by having as much care, diagnosis, treatment and support available as possible in either the primary or community care sectors.

A great deal of planning has been undertaken by the Northern Board, Homefirst Trust, Causeway Trust and United Hospitals Trust to reach this stage and these proposals have been submitted to the DHSSPS in order to secure funding to work up designs and costings in greater detail. Similar proposals have also been submitted by each of the other Boards and it is expected that their implementation, once approved, will take place over the next 10 to 15 years.

These proposals translate into a significant £600m programme of change for hospital and community services across the Board's area including:

- approximately 200 additional beds at Antrim Area Hospital;
- developing Whiteabbey and Mid Ulster Hospitals as modern Local Hospitals with integrated Health and Care Centres (HCCs);
- developing a total of 10 new Health and Care Centres across the Board's area which will become the focus for many primary and community care services. The hospital services proposed for Ballymena and Larne would also be located in these centres; and,

- the refurbishment or rebuilding of other health and social care facilities such as Day Centres and Respite Units.



THE NEED FOR MODERNISATION

The entire spectrum of health and social care is facing ever increasing challenges, as well as opportunities, which, when combined, reinforce the need for urgent and radical change. These include:

- new technologies allowing many investigations and treatments to be delivered outside of acute hospital settings;
- the need to ensure good clinical governance and patient/client safety in our hospital and community settings;
- the need to ensure sufficient workloads to maintain and develop the skills of multidisciplinary teams. Where this can not be provided there is the risk of withdrawal of training accreditation, for example, by the Royal Colleges, and subsequent difficulties in recruiting appropriately skilled professionals;
- challenges associated with a growing yet increasingly ageing population, placing increased demands on many primary, community and hospital services;
- public expectations of high quality accommodation which our current facilities and infrastructure are increasingly unable to meet; and,
- a need for more high quality primary and community care services which are easily accessible for local populations.



In order to meet these opportunities and challenges, there is wide recognition that the role of primary, community and hospital services will need to change radically. It is not desirable or necessary for hospital services to continually expand to meet these increased needs. The overriding need is to maintain people in the community and, in particular, in their own homes where possible. Services such as day, domiciliary and respite care can provide vital support to enable clients to continue to live at home. Modern, fit for purpose buildings and equipment can assist in the provision of a more appropriate and flexible spectrum of care and support ranging from rehabilitation and therapeutic inputs to residential respite.

The nature of the growing population in the Board's area is also one of the main drivers for investment in primary and community care. It is estimated that whilst the total Northern Board population will grow by 4% over the next ten years, the over 85 year old age group is predicted to increase by more than 50%. This shift in the age structure towards older people will have a significant impact on services as older people are substantial users of hospital, community and primary care services.



Care services and staff are currently located in over 240 buildings across a large number of sites within the Northern Board area. This makes it difficult for professionals to maintain links and undertake multidisciplinary care. Recent building surveys indicate that the current quality and quantity of buildings, particularly those accommodating primary and community care services, is seriously inadequate as a basis for the delivery of appropriate services.

It should be emphasised that the weaknesses identified with the current accommodation are not simply cosmetic, giving rise to minor inconveniences for patients and staff and a less than desirable ambience. Much of the accommodation is unpleasant, cramped and falls increasingly short of safety and statutory standards.

Given these factors, it is vital that these proposals are progressed to meet the changing needs of the Board's population for many years to come and help deliver care services for the 21st century.

HEALTH AND CARE CENTRES

There is an overwhelming need for functionally suitable, modern, fit for purpose, flexible accommodation as bases from which a broad range of services could be delivered to the community. The DHSSPS regional strategy *A Healthier Future* envisages that much of this could be provided through a network of Health and Care Centres (HCCs). It is proposed that ten HCCs are developed in the Northern Board area, located in:

- Antrim
- Ballymena
- Larne
- Carrickfergus
- Newtownabbey
- Magherafelt
- Cookstown
- Coleraine
- Ballymoney
- Ballycastle

The size and scale of these HCCs will vary according to local circumstances. They could potentially offer services such as:

- the local delivery of diagnosis and treatment through the development of nurse-led clinics and the greater provision of services by GPs with special interests such as minor injuries, respiratory problems, diabetes care, ophthalmology, dermatology etc;
- the provision of outreach clinics/outpatients from the hospital sector;
- the bringing together of primary and community care staff to work in multidisciplinary teams. This will promote a single point of referral for patients and clients and enable shared assessment, care planning and treatment;

- the provision of a wide range of diagnostic services such as blood tests, ECG (electrocardiographs) and ultrasound,
- advanced technological services such as telemedicine links which enable home monitoring and remote working as well as shared access to patient and client information;
- supporting moves to an integrated model of out of hours services including GPs, dentists, social services etc; and,
- greater involvement of the community and voluntary sector in the provision of care and related services.



FUTURE HOSPITAL SERVICES

Developing Better Services (DBS) reaffirmed Antrim Area and Causeway Hospitals as the focus of acute hospital services in the Board's area. The present pattern of acute hospital services is not sustainable beyond the short term.

ACUTE HOSPITALS

Antrim Area and Causeway Hospitals will continue to provide the majority of elective and emergency inpatient care such as accident & emergency (A&E) treatment, general medicine, general surgery, obstetrics, gynaecology, ENT, coronary care etc. The first phase of Antrim Area Hospital comprised approximately 350 beds and was completed in 1994. DBS takes forward Phase 2 which will extend the hospital by more than 200 beds.



This significant development of Antrim Area Hospital will represent a multi-million pounds investment in hospital care and enable the hospital to provide more local services such as trauma (fractures), orthopaedics and cardiac catheterisation.

The new Causeway Hospital was completed in Coleraine in 2001. New advances and developments in medical care, however, mean that additional outpatient capacity is now required along with a new renal dialysis unit. Both acute hospitals will also continue to provide a broad range of day surgery, day procedures and outpatient care.

LOCAL HOSPITALS

With the eventual transfer of acute inpatient and A&E services to Antrim Area and Causeway Hospitals, Mid Ulster and Whiteabbey Hospitals will be redeveloped as Local non-acute Hospitals with on-site HCCs. Both hospitals will play a key role in supporting acute services at Antrim Area and Causeway Hospitals. Day surgery, day procedures, diagnostics and outpatient services will continue to be provided locally on these sites. Inpatient services for the elderly and nurse-led minor injuries services will also be established. Diagnostic services will include x-ray, blood tests, barium meal tests, ultrasound, endoscopies, CT scans and ECG. Some of these diagnostic services, such as ECG, will also be available in the HCCs planned for Ballymena, Larne, Ballycastle and Ballymoney.



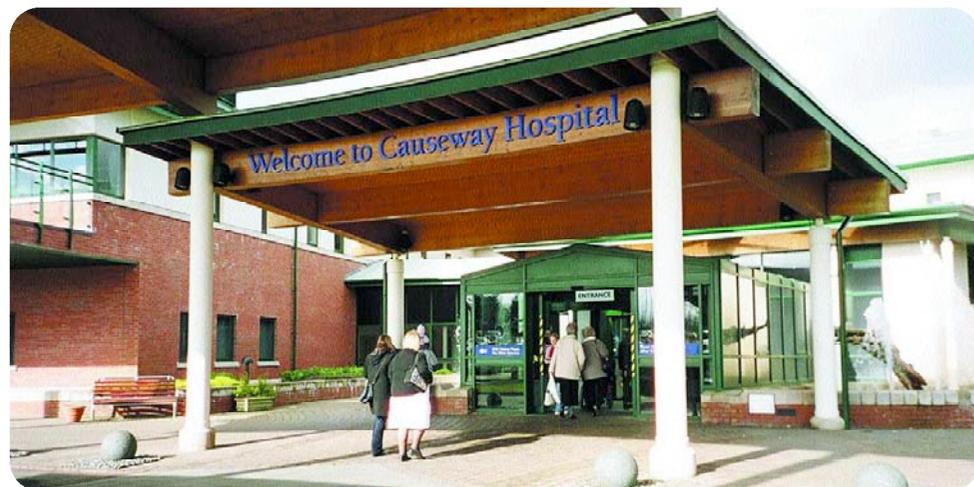
DEVELOPMENT PROPOSALS BY COUNCIL AREA

COLERAINE

The main primary and community care sites within the locality are at Mountfern, Castlerock Road and Brookgreen. A range of services are also provided from a number of GP owned practices within the Coleraine Borough area.

Given the currently overcrowded community care facilities within Coleraine locality, investment in primary and community care infrastructure will be required to allow for:

- an extension to the Fort Centre and Adult Centre on the Mountfern site (some minor alterations are also required to the Pavestone Centre);
- the redevelopment of Coleraine Health Centre on the Castlerock Road to provide additional accommodation for the mental health team; and,



- the development of a HCC for the locality. It is anticipated that this would house a GP practice, out of hour services and a number of multidisciplinary teams, some of which would be relocated from the Mountfern site and leased accommodation. Given the potential size of this building, it is proposed that it is located either on a greenfield site or adjacent to Causeway Hospital.

Causeway Hospital will continue to provide a broad range of acute hospital services including A&E and the outpatient facilities will be extended. There are also proposals for a new MRI unit to be developed as well as a new renal unit to meet growing demand for dialysis.

BALLYMONEY

Primary and community care services are mainly concentrated on three sites in Ballymoney town: the Armour site including the 'Roddens', the Robinson Hospital and the former Route Hospital site. Primary care services are also provided from GP owned practices.

A number of buildings on the Armour site require upgrading to meet new statutory standards. Domiciliary services are also located on the Armour site and act as bases for Trust-wide home help and intensive support. While it is proposed to relocate this service to more locally accessible facilities across Coleraine and Ballycastle, the Ballymoney team would remain on the Armour site. A new build community information office is



also required on this site. Due to an expansion of services a reconfiguration of the facilities located on the Route site is required.

The facilities on the Robinson site are generally in good condition. The Health Centre on the site is currently undergoing major refurbishment and will house specialist nursing and Allied Health Profession (AHP) services. This will form the basis of a HCC for the Ballymoney area. This could be extended in the future to incorporate additional primary and community care services. It is proposed that the existing community inpatient beds will be maintained subject to further developments within the primary and community care sectors which may have a bearing on the purpose, role and quantum of non-acute beds in the Causeway area.

The Child Development Centre (CDC) is also on the Robinson site and provides a range of services for children with complex health needs. Due to overcrowding and the requirement for additional facilities including therapy rooms, case conferencing facilities, equipment storage, etc, additional accommodation is required. It is proposed that a new CDC is built either on the Robinson Hospital site (although this confined site will be constrained in terms of further development potential) or a greenfield site. The existing CDC could then be used to accommodate staff located elsewhere on the site.

The Millbrook Resource Centre is a day centre for adults with a learning disability. This service would continue to be





provided from this facility although some reconfiguration would be required to meet changes in service provision.

The space available in the community stores located at Ballybrakes Business Park is inadequate and requires a new replacement building on a greenfield site.

MOYLE

In the Moyle District Council area primary and community care services are located on two main sites in Ballycastle: Dalriada Hospital and Rathmoyle. Primary care services are also provided from GP practices on the Dalriada Hospital site and Armoy.

It is proposed that the community inpatient beds will be maintained subject to further developments within the primary and community care sectors which may have a bearing on the purpose, role and quantum of non-acute beds in the Causeway area. However, any further developments on the Dalriada site would require a reconfiguration of the existing stores, garages and the ambulance station.

The residential home on the Rathmoyle site does not meet modern standards as it has a number of double rooms and no ensuite facilities. It is proposed to redevelop Rathmoyle to provide an elderly care unit, however, this will be dependent upon the outcome of a Board-wide review of the provision of residential services for older people. A day care facility and an adult centre for people with a learning disability are also planned for this site.



It is proposed that a range of additional services would be provided in Ballycastle including additional specialist nursing services, AHPs, maternal and child health services in a new HCC.

ANTRIM

The majority of acute, primary and community care services in Antrim are located across three sites: Antrim Area Hospital, Ferrard and Holywell Hospital.

Antrim Area Hospital will expand to almost twice its present size to provide more inpatient beds for acute care and more local services. A key development over the next few years will be a new trauma and orthopaedics unit giving Northern Board residents a local fracture service outside of Belfast. Additional renal services will be provided to meet growing demand and will also result in fewer patients having to travel to Belfast for their dialysis. Likewise, development of a local cardiac catheterisation laboratory will enable patients to undergo these procedures locally and a new palliative care unit will enhance Antrim's role as the Cancer Unit for the Northern Board area. A new care of the elderly unit will





provide assessment and rehabilitation, stroke and orthogeriatric services for the populations of Antrim, Ballymena and Larne as enhanced community services reduce the need for inpatient provision.

Elsewhere in the Antrim area, there are four Health Centres/GP premises and eight other properties (including mental health hostels and community rehabilitation services).

Given the poor and overcrowded condition of estate on the Ferrard site, substantial investment is required to modernise facilities. There are a number of proposed changes to the site, including:

- a HCC for Antrim (more complex diagnostics and minor injury services would continue to be provided from Antrim Hospital). This could accommodate GP services, occupational therapy, crisis response, acute care at home and other outreach services which are currently dispersed across Antrim town;
- Social Services Fieldwork Offices would be redeveloped to accommodate children's services. The existing social service offices would be relocated to the HCC;
- replacing Clarke House. This currently provides accommodation for Regional Supplies, podiatry, gait analysis and the CAMHS (Child and Adolescent Mental Health Service) team for the Newtownabbey area. It is proposed that Clarke House, which is very unsuitable for its current use, is demolished. Regional Supplies is scheduled to relocate to a new building on the Antrim Hospital site, the CAMHS team would be relocated to



Newtownabbey and podiatry and gait analysis would be reprovided in new accommodation (potentially in the HCC);

- developing a new Family Resource Centre on the site to replace the current facility at Firmount Drive;
- reprofiling and reconfiguring services in the adult centre and the day centre as these are currently not considered functionally suitable;
- Firmount Home for Elderly Mentally Infirm people does not meet statutory standards and would be replaced; and,
- Social Services Training would relocate to Ballymena as this is a more central location.

Given the substantial scale of changes to the Ferrard site, further work will be required to identify the most appropriate site configuration and investment strategy. However, the broad strategic aim of consolidating services into modern, fit for purpose accommodation on one site suggests that new build accommodation would be required to replace the existing poor estate and co-locate outlying services.

Rosedale residential home would be retained pending a Board-wide review of the provision of residential services for older people

There are currently two mental health hostels in the Antrim area, and it may be more appropriate for one of these services to be provided by a housing association.



BALLYMENA

The main site providing hospital, primary and community care services is the Braid Valley Hospital site. The Braid Valley Hospital currently has a number of inpatient care of the elderly beds and provides a range of consultant-led outpatient clinics and diagnostic services. There are also community social services offices, clinics, Ballymena Health Centre and some training facilities. Many of these facilities are unsuited to modern health and social care, are in a poor condition with parts of the hospital over 160 years old. With good care practice focusing on supporting older people in their own homes and in the community, it is planned that a reduced number of care of the elderly beds, in keeping with the assessed population need, will be centred at Antrim Area Hospital.

There are a substantial number of other buildings located across Ballymena town including those accommodating children’s services and community addictions. In addition, there are a number of buildings located in Pennybridge industrial estate (an adult centre, community equipment store, a resource centre and administrative offices).

The main developments proposed are:

- a HCC on the Braid Valley Hospital site. This would provide new build accommodation for GP services, out of hours services, diagnostics as well as consultant, GP and nurse-led outpatient services. Subject to GP agreement intermediate inpatient medical care could



be provided. Minor injury services will be provided in the town in conjunction with GP's.

- A number of community care buildings on the Braid Valley site are also in poor condition and these services could either be provided within the HCC or in adjacent buildings, for example, Spruce House, which provides community health clinics, and the Slemish Building which provides child and community social services.

The Braid Valley site has also been identified as a suitable location for a range of other services currently based in leased buildings throughout Ballymena:

- community care administrative services could relocate to the Braid Valley site, as could the Corporate Governance Department at Pennybridge, Pinewood Children's Services management team, the Audley Terrace fostering team and Salisbury House Community Social Service Centre. The release of leasehold property, together with the demolition of Spruce House, the Slemish Block and the portacabins on the Braid Valley site, would allow for centralisation of these functions in Ballymena;
- a number of other clinical services scattered across Ballymena, such as dietetics and nursing in existing Health Centres could also be relocated to the HCC;
- the Board-wide Training Centre incorporating the transfer of this function from the Ferrard site in Antrim;
- the Community Addictions service based at Parkmore Drive would transfer onto the Braid Valley site. However, it is preferred to retain the specialist service, currently based at Railway Street, at its present location;



- The George Sloan Adult Centre and the Resource Centre in the Pennybridge industrial estate are in poor condition and require new build accommodation on the present site or on a greenfield site, and;
- A central community store and decontamination unit is also located on Pennybridge industrial estate. This facility requires reconfiguration to maximise storage space.

The key priority in Ballymena is the redevelopment of the Braid Valley site and the development of a range of clinical services within a HCC. However, there may also be potential for a range of children's services to be co-located in a Children's Centre on a common site with local special needs schools.

Pinewood residential home would be retained pending a Board-wide review of the provision of residential services for older people.

Wilson House Day Centre does not meet statutory standards in terms of its functional suitability and its services should be provided in a new building.

The Health Centre in Aghoghill which is in poor condition should be replaced by a new building.

MAGHERAFELT

Under DBS, the Mid Ulster Hospital at Magherafelt will become a Local Hospital continuing to provide the local community with approximately 80% of its current overall



activity. Although acute inpatient care will be relocated to Antrim Area Hospital, inpatient assessment and rehabilitation for the elderly, day surgery, day procedures, outpatient services and complex diagnostics such as CT scans will be developed in new and extended facilities. A nurse-led minor injuries service is also planned. An important aspect of the local hospital will be close integration with primary and community services in the proposed HCC for Magherafelt.

The main location for primary and community care services is on Hospital Road adjacent to the Mid Ulster Hospital. The facilities include a day centre, an adult centre and a family centre.

There are a number of other services dispersed in other properties across the Magherafelt area such as a community health clinic, mental health team, CAMHS, community rehabilitation and family planning. This neither facilitates integrated models of working nor does it make services easily accessible for patients or clients.

In order to address these inadequacies, it is proposed that a HCC would be built alongside the local hospital on the Mid Ulster site. The HCC will include:

- room for the relocation of a range of community services including children’s services, community rehabilitation, community dental services, specialist nursing, the community mental health team, community health clinics and CAMHS;



- room for additional GP services (although most GPs in the town currently own their premises); and,
- an out of hours service.

The adult centre in Magherafelt, which does not meet statutory standards in terms of its functional suitability and is overcrowded, should be demolished. It proposed that a reprofiled service will be provided in a new building on the existing site. Maghera Day Centre may also need some reconfiguration. Further work will be undertaken to assess the need for residential services for the elderly mentally infirm in the Mid Ulster area.



COOKSTOWN

Primary and community care estate within the locality is concentrated on the Westland Road/Orritor Road site in Cookstown. This is the location for an Elderly Person's Home, an Adult Centre, a Day Centre, a Family Resource Centre, community social services and a Health Centre which provides a range of primary care services. While these services are already co-located there is little room for expansion and some of the facilities are in a poor condition requiring considerable investment to meet statutory standards.

It is proposed that the existing Health Centre, Day Centre and Family Centre on the Westland Road site are demolished and reprovided in new build accommodation. Through careful redevelopment it may be possible to improve the layout and function of the Westland Road site generally, although it will remain tight with limited car parking space. However, given the extent of demolition and new build accommodation required, a greenfield site option will be evaluated.

It is proposed to construct a new HCC, incorporating GP services, community health services, specialist nursing services, family services and the mental health resource team. Other services based in accommodation that should be demolished will be provided either in the HCC or in adjacent buildings.

Westlands residential home would be retained pending a Board-wide review of the provision of residential services for older people.

NEWTOWNABBEY

Under DBS, Whiteabbey Hospital will become a Local Hospital continuing to provide the local community with approximately 80% of its current service activity. Although acute inpatient care will be relocated to Antrim Area Hospital, inpatient assessment and rehabilitation for the elderly, day surgery, day procedures, mental health inpatient and day hospital services, an ECT suite, outpatient services and complex diagnostics such as CT scans will be developed in new and extended facilities. A nurse-led minor injuries service is also planned.

With the exception of a new ward block constructed around 1990, most of the facilities at Whiteabbey Hospital site are unsuitable for modern health care practice and are in an increasingly poor physical state.

Primary and community care facilities within the East Antrim locality include:

- The Health Centre, social services and mental health services on the Whiteabbey Hospital site;
- a number of primary and community care services provided in buildings dispersed throughout Newtownabbey area including two Adult Centres (Broadway and Drumross), a Family Centre, a Day Centre (Inniscoole), two residential homes for older people (Moylinney and Clonmore House) and a hostel (Lynwood);
- in Glengormley there is a Community Services Centre which includes children's services;
- in Ballyclare there are administrative offices including



social service teams and the Northern Ireland Regulation & Quality Improvement Authority (at The Beeches); and,

- there are also six non-Trust owned GP practices/Health Centres across the locality.

In order to address the inadequacies in the current estate in terms of size, condition and fragmentation, it is proposed that a new HCC is built alongside the local hospital facilities on the Whiteabbey Hospital site. It is proposed that services will include:

- relocation of a range of community services including community rehabilitation, community dental services, specialist nursing, the community mental health team, social work teams, community health clinics, a range of community based AHPs and relocating the Newtownabbey CAMHS team from Antrim;

- children’s services currently located in Glengormley Community Services Centre. Alternatively, the Glengormley Centre could be reconfigured and developed as a children’s centre; and,
- an out of hours service.

The Inniscoole Day Centre and Drumross Adult Centre both require redevelopment. The Broadway Adult Centre is also in very poor condition particularly in terms of its physical condition and is increasingly unsuitable for its current use. It requires demolition and this service could be provided in partnership with other training and employment agencies. Moylinney Elderly and Mentally Infirm Unit also requires replacement by a new build facility on a greenfield site.

Clonmore residential home would be retained pending a Board-wide review of the provision of residential services for older people.

Ballyclare is recognised as an area of planned expansion in the Belfast Metropolitan Area Plan. Primary and community care services are currently located in the Ballyclare Group Practice which is already at full capacity. Given that the population of Ballyclare is likely to grow significantly in the next 10 years, additional accommodation will be required in Ballyclare to facilitate any expansion in primary and community care services.



CARRICKFERGUS

Primary and community care services are mostly concentrated on two sites: Ellis Street and Taylor’s Avenue. Primary care services are also provided from a non-Trust owned GP practice in Greenisland.

The Hawthorns Adult Centre is in poor physical condition and requires replacement with new build accommodation. It is intended that the rest of the site should be developed as a Respite Unit for people with physical disabilities and learning disabilities. The Day Centre is in a very poor condition and requires new accommodation. The Health Centre is overcrowded and also in poor physical condition.

It is proposed that a new HCC is built to accommodate these additional services. This would provide accommodation for a range of services including GP services, AHP services, specialist nursing services, community mental health services and children’s services. It is anticipated that the HCC would also provide accommodation for the Crisis Response Team. A new build family centre is also required.

Greenisland and Joymount residential homes would be retained pending a Board-wide review of the provision of residential services for older people.



LARNE

Primary and community care services are mostly concentrated on two sites, Gloucester Avenue (where there is an Elderly Person’s Home and a Day Centre). There is also an Adult Centre and a Learning Disability Hostel located in the town.

The Moyle Hospital currently has a number of inpatient care of the elderly beds and provides a range of consultant-led outpatient clinics. The facilities at Moyle Hospital are unsuited to modern health care and are in a poor condition with parts of the hospital being over 150 years old. With good care practice focusing on supporting older people in their own homes and in the community, it is planned that a reduced number of care of the elderly beds, in keeping with the assessed population need, will be centred at Antrim Area and Whiteabbey Hospitals.





The Day Centre is also in poor condition and requires redevelopment. It is proposed that the Adult Centre should be replaced by a new build Adult Training Centre.

Lisgarel residential home will be retained pending a Board-wide review of the provision of residential services for older people.

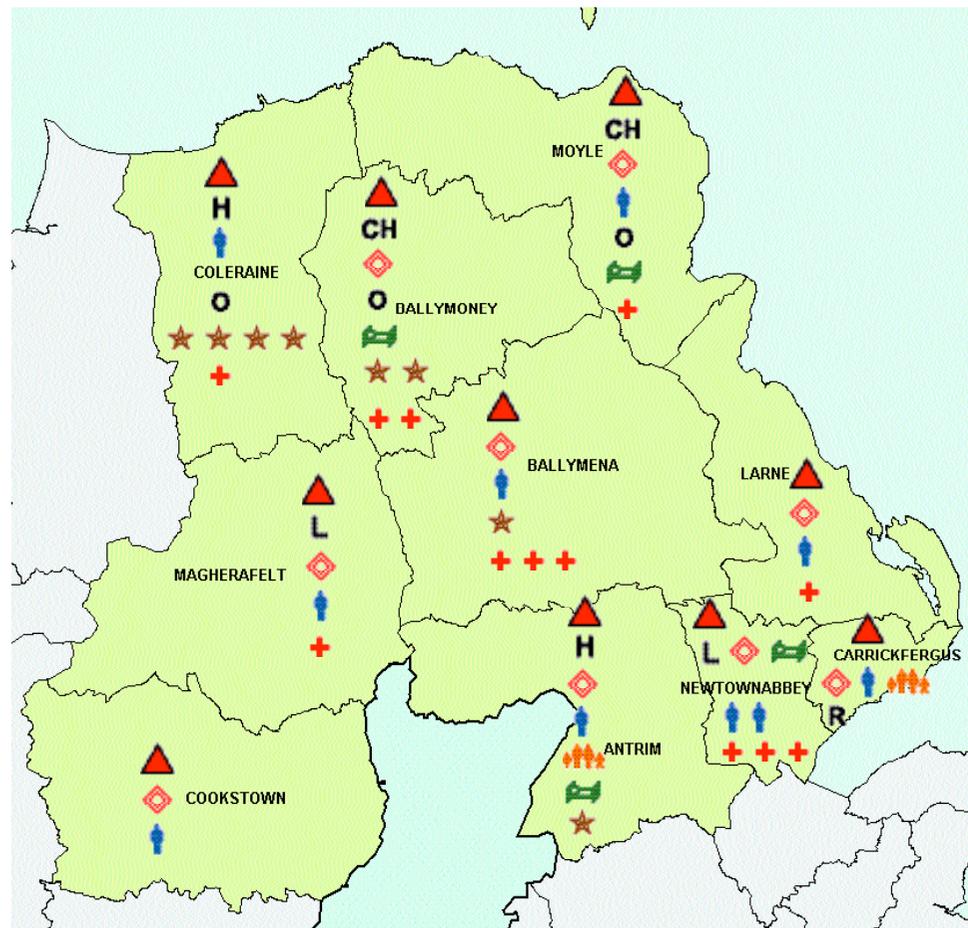
While a range of primary and community care services are already provided in Larne Health Centre, the accommodation is very poor. It is proposed that a new build HCC is developed on the site of the existing Health Centre to accommodate a range of services including GP services, community health services, GP and nurse-led outpatient services, AHP services, children services and community mental health services. Minor injury services will be provided in the town in conjunction with GP's.

The Cloney Community Services Centre in Glenarm requires replacement with new build accommodation and presents an opportunity to integrate GP and community services in a purpose built Health Centre.

Whitehead Health Centre would be retained following the transfer of GPs to their own medical centre for the provision of community health services.



Proposals for Investment in Health and Social Care Facilities in the Northern Board Area



KEY

Health and Care Centre	Family Centre
H Acute Hospital	O Resource Centre
L Local Hospital	R Respite
CH Community Hospital	Residential Centre
Day Centre	Community/Children's Services
Adult Centre	Other

WHAT NOW?

These proposals represent an unprecedented call for investment in health and care services across the Northern Board area. Initial capital costs have been estimated at more than £600m over a ten to fifteen year period. The Board and Trusts will be working with DHSSPS to further refine service requirements, develop initial designs and refine costings. Schemes will be prioritised from across Northern Ireland and will be implemented on a phased basis.

COMMUNICATION

When funding levels and priorities are confirmed for each phase of these proposed developments, the Board and local Trusts will be required to prepare detailed proposals regarding the design, construction and location of these facilities. We will engage with local people and other interest groups as appropriate in the process of designing and developing services in each locality as progress is made over the coming years.

CONCLUSION

This document outlines a rolling plan for the modernisation of primary, community and hospital facilities. It is clear that without additional capacity and high quality estate it will be difficult to deliver modern clinical and social care services. Many existing facilities have outlived their useful purpose and are unsuited to modern practice. They do not meet the needs of staff, clients or patients.

For further information contact:

HOSPITAL SERVICES

Michael Taylor: 028 2531 1183 or
michael.taylor@nhssb.n-i.nhs.uk

PRIMARY AND COMMUNITY CARE

Veronica Gillen: 028 2531 1182 or
veronica.gillen@nhssb.n-i.nhs.uk

or by writing to:

Edmond McClean,
 Director of Strategic Planning & Commissioning,
 Northern Health and Social Services Board,
 County Hall,
 182 Galgorm Road,
 Ballymena,
 BT42 1QB.



Appendix 1

PROPOSED SERVICES FOR ANTRIM AND CAUSEWAY HOSPITALS

	Antrim Area Hospital	Causeway Hospital
Acute Medical Specialities	✓	✓
Acute Surgical Specialities	✓	✓
Accident and Emergency (24 hours)	✓	✓
Intensive Care	✓	✓
Paediatric Care	✓	✓
Neonatal/Specialist Baby Care	✓	
Obstetrics and Gynae	✓	✓
Day Surgery/Procedures	✓	✓
Coronary Care	✓	✓
Stroke Services	✓	✓
Renal Care including dialysis	✓	✓
Diagnostics (inc CT scanning)	✓	✓
Cancer Unit: chemotherapy	✓	
Specialist Palliative Care	✓	
Inpatient Fracture and Orthopaedic unit	✓	
Local Fracture Service	✓	✓
Dedicated Orthogeriatric services	✓	✓
Outpatient services	✓	✓
Ambulatory Paediatric Care	✓	
Care of the Elderly	✓	✓
Telemedicine links and outreach to Local Hospitals	✓	✓
Inpatient psychiatric unit		✓
Day hospital	✓	✓

Appendix 2

PROPOSED PROFILE OF SERVICES FOR LOCAL AND COMMUNITY HOSPITALS

	MUH	WAH	Robinson	Dalriada
Inpatient assessment and rehabilitation	✓	✓	✓	✓
Day Surgery Unit	✓	✓		
Diagnostic services	✓	✓	✓	✓
Nurse-led Minor Injury Unit	✓	✓		
Day Hospital	✓	✓	✓	✓
Palliative Care			✓	
Outpatient clinics	✓	✓		



Appendix 3

PROPOSED PROFILE OF SERVICES FOR HEALTH AND CARE CENTRES

	Coleraine	Ballymoney	Moyle	Antrim	Ballymena	Magherafelt	Cookstown	Newtownabbey	Carrickfergus	Larne
GP Services	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Out of Hours Services	✓				✓	✓		✓		
GP Minor Injury Services*					✓					✓
Outpatient Clinics		✓	✓		✓		✓		✓	✓
Specialist Nurse Clinics	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Community Paediatric Services	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Diagnostic Services	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Therapy Services	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Social Services	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Health Promotion Services	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Dental Services	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Pharmacy Services	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Community Mental Health Services	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Voluntary Sector / Other Agencies	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

* Nurse-led Minor Injury Units planned for Mid Ulster Hospital and Whiteabbey Hospital, A&E services will remain at Antrim Area & Causeway.

GLOSSARY OF TERMS

AHP: Allied Health Professional eg physiotherapists, occupational therapists, dietitians, speech therapists etc.

Assessment: identification of any medical, physical, mental or social problems a patient has which may require the input of health and social care services.

Barium Meal Test: A drink of barium-sulphate solution is taken by a patient so that x-rays can be taken of the stomach, throat and intestine.

Community services: Services given to patients or clients outside of the hospital environment such as home visits, social work care or care given in day care centres, residential homes.

CAMHS: Child and Adolescent Mental Health Services.

Crisis Response: A community mental health service.

CT or CAT Scan: Computerised Axial Tomography. An x-ray machine that takes a number of pictures, at various angles, to produce three dimensional images of internal organs.

Day case: a planned admission which does not require the use of a hospital bed overnight.

DHSSPS: The Department of Health Social Services and Public Safety.



ECG: Electrocardiograph. A test which involves taping electrical leads to the chest and legs. It can show whether or not a person has had a heart attack or abnormal heart beat.

Endoscopy: the examination of the inside of a patient's body using a flexible instrument which has a small telescopic camera linked up to a monitor.

ENT: a surgical procedure which deals with ear, nose and throat.

Gait Analysis: A detailed examination of how a person walks.

General Practitioners with Special Interests: These are GPs who have a special interest in particular procedures or treatments. Under the new General Medical Services contract, GPs are able to provide such services at their practice or outside of the hospital environment.

Health and Care Centre (HCC): A building or a number of buildings in close proximity to each other where community and primary care services are brought together in a central location for the local community.

Inpatient: A patient who stays in hospital overnight.

MRI: Magnetic Resonance Imaging. A diagnostic technique that uses magnetic fields and radio waves to produce a three dimensional computer model.

Multidisciplinary: People from various professions eg. Doctors, nurses, AHPs working together.

NHSSB: Northern Health and Social Services Board.



Outpatient: A patient who attends the hospital for an appointment.

Palliative care: the medical care of patients frequently with terminal illness, enabling them to have the best quality of life available to them.

Primary Care: The first level of care in health and social services and it is usually the first contact point for patients or clients. As well as family doctors (GPs), pharmacists, allied health professionals such as podiatrists, physiotherapists, occupational therapists, social workers and ophthalmic practitioners are all considered primary care professionals.

Rehabilitation: the process by which a person's physical mental social and occupational fitness is restored after illness or injury.

Telemedicine: The investigation, monitoring and management of patients and the education of patients and staff using systems which allow ready access to expert advice and patient information, no matter where the patient or the relevant information is located. Telemedicine's three main dimensions are health service, telecommunications and medical computer technology.

Trusts: Statutory providers of acute and community care.

Ultrasound (Ultrasonography): High frequency sound waves used to scan parts of the body for abnormalities eg liver, bladder, kidneys, womb, etc. These images are shown on a monitor