

Submission – New Healthcare Facilities Programme Review – Anonymous 1 (senior nurse with long service history in Jersey and UK)

I was delighted to see a pro active group in the hospital canteen foyer today. They were asking for people to give their views regarding the future hospital plans.

I am [REDACTED] employed by the hospital but working both in the hospital on wards and running Out patient clinics. Ourselves and the heart failure nurse specialists are also employed to work in the community offering home visits and collaboration + education for GP's, Hospice and Family Nursing.

[REDACTED] a recently retired Consultant physician who was regional advisor to the Royal College of Physicians and was responsible for assessing the suitability of facilities for the education and support of junior doctors [. He] is extremely concerned that a split site will lead to failure of recognition by the Royal colleges and the Deanery for approving junior doctors' posts. This could lead to a catastrophic loss of the junior doctors as the island would not be recognised for training purposes.

I have worked for 35 years in this Specialist role and loved every minute. [REDACTED] 2 New hospitals come to fruition at Dorset County Hospital in the 1990's and the Kent and Sussex become the state of the art single pt facility at Pembury hospital [REDACTED] Pembury hospital merged two hospitals in to one!

I feel strongly that we must not agree to a multi site hospital. I have grave concerns that this plan will create an extreme waste of already stretched resources. There will be duplication of support services and increased costs needed if services are split: Radiology needs to be available to ED, ICU, out-patients and wards.

Pt's need to be transported between areas quickly. Clearly, this cannot happen on split sites. Distances will mean variable time to travel between sites. Porters are incredibly important but not miracle workers.

Consultants, Dr's and allied HCP's need to get to all areas Quickly

Please do not underestimate how important it is that All teams benefit from seeing each other in corridors and departments throughout a hospital. Things work so much better if you can simply "run over" to facilitate a pt centred issue. IT HAPPENS ALL THE TIME In a single site hospital. Dr's Nurses porters help each other out in this way and it will be irretrievably lost.

Pharmacy needs to be available to all departments and would not be effective for separate inpatient and outpatient areas.

The only facility that I can see as being on a separate site is mental health. This has historically worked fine, but in an ideal world, if space was not the issue, would also be on the ONE SITE.

Finally I would like to insist that all Hospital Consultants, senior nurses and allied Senior pt facing health care professionals are asked their preferred option on whether they want a single site or split site hospital as this should not be allowed to be decided by non clinicians who will never have to work in the environment being proposed.