



Dorset County Hospital
Dorset HealthCare

Joint Infrastructure Strategy

2025 - 2030

Inc Estates Priorities – Internal Use Only

- ♥ Healthier lives
- 👤 Empowered citizens
- 🌱 Thriving communities



Foreword

Dorset HealthCare and Dorset County Hospital are part of the Dorset Integrated Care System (ICS). The ICS vision, set out in its strategy, is that Dorset becomes the healthiest place to live. The local context is a growing and aging population with increasingly complex needs. Due to the nature of the delivery footprint, both Dorset HealthCare and Dorset County Hospital already work with many stakeholders across Dorset in sharing accommodation, whether acute services, community and mental health services, GPs, voluntary organisations, councils or private landlords. We aim to ensure that services are delivered from locations that best meet the needs of the patients and that corporate functions make the best use of available space. A continued focus on high quality working environments also supports the ambition to be an attractive employer with a modern- diverse workforce.

The Dorset Integrated Care Board (ICB) published its infrastructure strategy in July 2024. The aim of the strategy is to better address demand and reduce health inequalities – particularly to support out of hospital acute care and to help reduce demand for hospital space via improved prevention and provision of alternative estates options. This provides a solid foundation for the DHC/DCH Infrastructure Strategy and E&F transformation programme. While Dorset County Hospital provides a range of clinical services for people who live mainly in west, mid and north Dorset, Dorset HealthCare provides community and inpatient physical and mental health services across the whole of Dorset and beyond. This footprint provides opportunities for sharing space in buildings and removing duplication.

The review takes these opportunities one step further in looking for other ways to improve efficiency and long-term sustainability for both Trusts. As Dorset HealthCare progresses towards Advanced Foundation Trust status, this will enhance by enabling more joined-up planning, shared use of estates and streamlined corporate functions. This supports a more flexible and integrated approach, helping both organisations make best use of space, reduce duplication and improve long-term sustainability.

Both Trusts have introduced smarter working as part of ensuring that we maximise the use of our buildings. This helps avoid heating and lighting spaces that are not fully occupied and is changing how teams work together to reduce their physical space requirements.

The long term aims of this plan are to continue this process to ensure that services are delivered from the most appropriate location, while using the available estate effectively.



Executive Summary

We are delighted to share the significant progress that has been achieved across both Dorset County Hospital and Dorset HealthCare in enhancing our estate and infrastructure, ensuring we can provide safe, high-quality, and sustainable care for the people of Dorset.

The New Hospital Programme at Dorset County Hospital is moving forward at pace. Construction is well underway for the development of a state-of-the-art emergency department and critical care unit. This represents a major step in the modernisation of acute care services, providing facilities that will meet the growing needs of our population while offering patients a more efficient and comfortable experience.

Meanwhile, Dorset HealthCare continues to develop community hospitals and mental health facilities. This includes a major redevelopment of mental health facilities on the St Anns Campus, the first mental health facilities to be delivered within the New Hospital Programme. These improvements are focused on creating welcoming, therapeutic environments that support both patient recovery and staff wellbeing.

The joint strategy—Working Together, Improving Lives—has been instrumental in aligning the ambitions of both organisations, enabling collaborative planning and delivery of infrastructure that responds directly to local needs and clinical priorities.

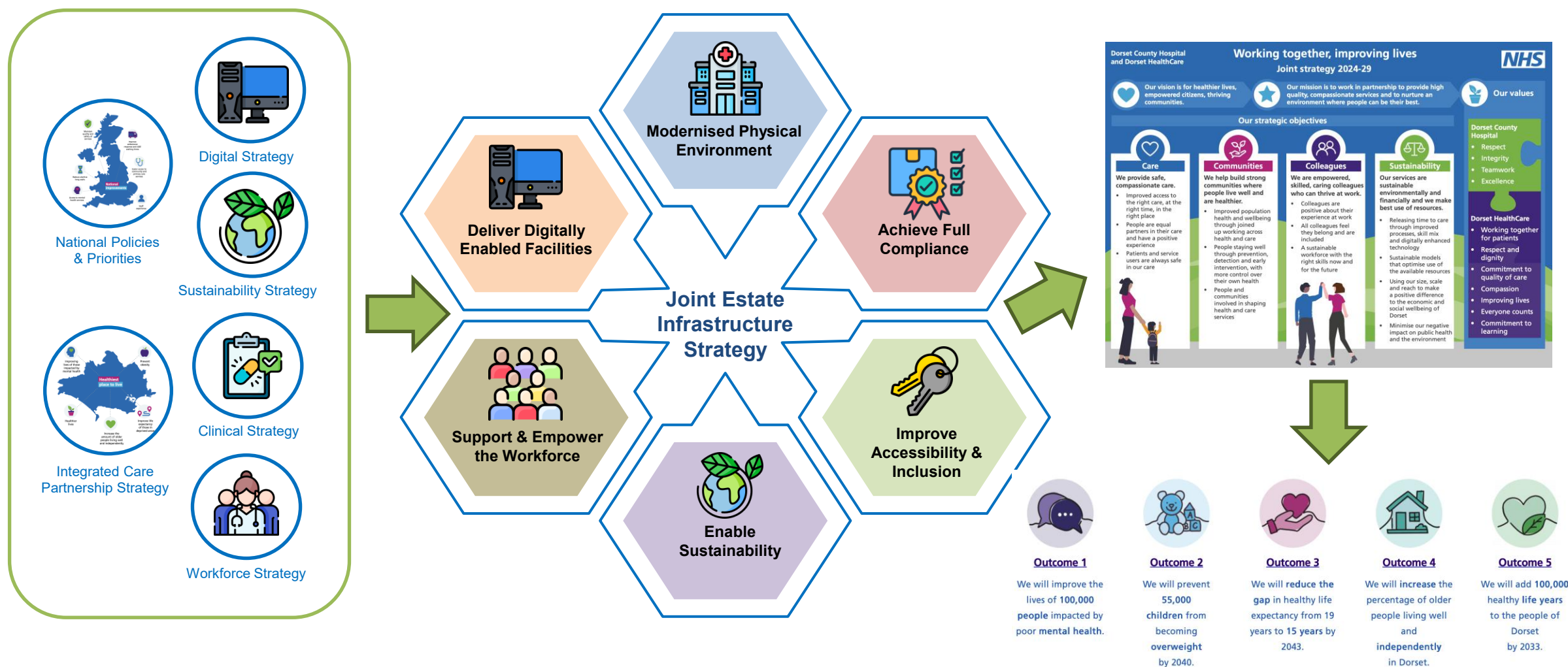
A cornerstone of these developments is our shared commitment to environmental sustainability, digital innovation, and inclusive design. We are ensuring that all new and refurbished facilities are energy efficient, technologically equipped for modern healthcare delivery, and accessible to everyone in our community. This future-focused approach will make Dorset's health estate resilient for decades to come.

Looking ahead, we recognise there is more to do. We are committed to further developing our community and primary care estate, which will allow more services to be delivered closer to people's homes. Modernising and consolidating our estate will support the delivery of the NHS 10-year plan. This includes facilities for integrated services at a neighbourhood level, equitably supporting both mental and physical health. It will go beyond NHS Estate and will involve working closely with partners in the local council, public, private and VCSE sector. This will reduce dependence on acute hospital services and support the vision of a truly integrated, localised health system for Dorset.



Our Plan on a Page

This diagram illustrates the enablers, both internal and external to the organisation, that underpin the development of our Joint Estate Infrastructure Strategy. It demonstrates how these enablers support the delivery of our Joint Strategy (2024-29) and align with our strategic objectives, enabling the integration of services across Dorset County Hospital and Dorset Healthcare to achieve the five key outcomes of the Joint Forward Plan (2023-28), ultimately helping to make Dorset the healthiest place to live.



Joint Estates Infrastructure Strategy

Where are we now?

- Predominantly aging estate
- Asset condition variability
- Limited flexibility to meet modern service models



Where do we want to be?

- Sufficient capacity to meet current and forecast demand
- High-quality environments that support safe, efficient care
- Reduced reliance on end-of-life assets
- Dorset-wide access with well-located, optimally utilised, less fragmented estate.



How do we get there?

Transformation

Make better use of what we already have

- Redesign ways of working and models of care
- Reduce length of stay and improve patient flow
- Maximise productivity and utilisation of existing estate

Reconfiguration

Align space to care delivery

- Repurpose and reconfigure existing space
- Support new pathways and adjacencies
- Improve functional suitability without expanding footprint

New Capacity/Estate

Targeted development where required

- Create new capacity only where transformation and reconfiguration are insufficient
- Replace assets that are no longer viable or safe
- Enable future-proofed, sustainable estate solutions
- Consolidate fragmented estate to support modern care models and reduce inefficiency

Infrastructure as a Key Enabler

Our local population need:

- Dorset is a primarily affluent area but has **areas of high deprivation and health inequalities** where people generally experience poorer health for longer.
- There are a higher number of **homeless people** in Bournemouth, Christchurch and Poole requiring a holistic, person centred approach to care delivered in open access, outreach services delivered in non-NHS settings. Homelessness is associated with severe poverty and poorer health outcomes.
- **Our population is ageing.** As people age the risk of developing illnesses and becoming frail increases, **leading to a greater need for health and social care.** We already have a higher proportion of older people than the England average and are already managing a high level of demand that other areas in the country are yet to experience. This growth will continue.
- The number of people living with **multiple long-term conditions and complex healthcare needs** is increasing.
- The prevalence of **common mental health conditions is increasing**, such as depression and anxiety. There are also rising mental health needs in later life (Alzheimer's disease and dementia).
- The Dorset population grows due to **inward migration** to the area and has significant **seasonal variation** as a major tourist area.
- While **digital advancements** may lead to an **increase in virtual appointments**, they **do not result in a significant reduction in physical space requirements**, posing challenges for existing healthcare infrastructure.



Part A:

Where Are We Now?

Summary:

- DCH and DHC operate 200 sites across Dorset, supporting acute, community and mental health services.
- Estate condition is variable; six-facet surveys are underway.
- Key risks include ageing infrastructure, limited capacity and limited options to modernise. No reinforced autoclave aerated concrete currently found.
- Non-clinical space allocation is above Carter benchmarks – optimisation work ongoing.
- Staff feedback highlights poor ventilation, overcrowding and limited welfare space.
- Green Plans are progressing with solar PV, LED and decarbonisation activities, but further action is needed to achieve Net Zero 2040.
- Dorset has an aging population, around 25% of people are aged 65+ in Dorset.
- Base population growth (circa 1% growth each year) and 54,000 new homes by 2039 - a dramatic increase.
- Strong foundation overall, but further modernisation and system collaboration are needed.

Part B:

Where Do We Want To Be?

Summary:

- Modern, fit-for-purpose estate across acute, community, and primary care.
- Digitally enabled spaces that support virtual care and new models of working.
- Neighbourhood Health Centres in every locality, co-locating and integrating services.
- Reduced inequalities through targeted action in deprived areas.
- Sustainable estate aligned to NHS Net Zero 2040.
- Key worker housing supporting recruitment and retention.





Part C:

How do we get there?

Summary:

- Transform the Dorset estate from an ageing, hospital-centric model into a modern, integrated network that enables prevention, neighbourhood care and specialist acute services supporting left shift for the 10-year plan.
- Deliver a hub-and-network model: a strengthened acute core, expanded community hubs aligned to population growth, and modernised mental health facilities.
- Prioritise work to address critical infrastructure risk, reduce backlog maintenance and improve safety and compliance.
- Rationalise underutilised estate to improve efficiency and support frontline infrastructure.
- Embed sustainability and digital enablement to create a resilient, low-carbon estate fit for future healthcare delivery.

How Do We Get There? Strategic Priorities

DHC Priority Schemes

Tier 1 Priorities:

1. Bournemouth/Boscombe Redevelopment (Kings Park/Shelley Road) (Phase 1-7)
2. Weymouth/Portland Community Hub Development (Phase 1-11)
3. Dorchester Mental Health Re-development (Phase 1-4)
4. North Dorset INT Development (Shaftesbury/Gillingham)
5. Wareham INT Development
6. Sherborne Development
7. Poole Clinic Redevelopment
8. Alderney Development (Supporting Parkstone Decanted Services)
9. Portland Hospital Redevelopment
10. St Leonards Refurbishment

DCH Priority Schemes

Tier 1 Priorities:

1. NHP Radiological Fit Out
2. Electrical Infrastructure Phase 2
3. Renal Expansion (incl Acute Dialysis unit refurbishment & extension)
4. Mammography & Breast Surgery Space Reconfiguration
5. Cardiac Catheter Lab and Cardiology
6. Respiratory Medicine & Neurophysiology Expansion
7. Elective & Diagnostic Centre
8. Theatre Upgrade & Reconfiguration
9. Ward refurbishment
10. Increase inpatient bed capacity to support system reconfiguration P2

Joint Estates Infrastructure Strategy Key Themes

For each section of the Strategy, the key themes and messages are highlighted.

Introduction to Dorset

Our total population registered with a GP is **830,992** (as of January 2024). Around half of our population live in the Bournemouth, Christchurch and Poole (BCP) Council area and half in the Dorset Council area. The county has **rural, coastal and urban areas**. **Accessibility** is a key consideration when planning new estate developments.

People living in the county are **generally healthier** and live longer when compared to England overall. Whilst Dorset is generally an affluent area, there are **areas of deprivation**. People living in more deprived areas tend to experience **poorer health** and much earlier, leading to a greater need for health and care services. **Life expectancy in Dorset is around 6 to 7 years less in more deprived areas**.

We have an **older population profile** and are already experiencing a high level of demand compared to other areas of the country. This trend will continue placing more pressure on our health and care services. The prevalence of **common mental health conditions** is increasing, such as depression and anxiety, as well as mental health needs in later life (Alzheimer's disease and dementia).

There are over **54,000 new homes** proposed by 2038/39 which represents an **additional c. 130,000 patients**. We also see annual **inward migration** of young people as Bournemouth, Christchurch and Poole has university, college and foreign language school connections and our population increases seasonally as a **major tourist area**. It is therefore critical that we have **sufficient capacity** and space to meet this demand and the **flexibility** to cope with seasonal variation.

Where are we now?

DCH operates an **acute hospital in Dorchester** provide urgent and emergency and planned care, diagnostics. DHC offers **community services from 85 sites**, including Child and Adolescent Mental Health Services, 8 Minor Injuries Units that provide urgent assessment, diagnostics, and treatment for non-life-threatening conditions. Our estate varies in condition and functionality, but no RAAC has been identified.

Backlog maintenance presents significant critical infrastructure risk.

25% of population aged 65+ and 54k new homes planned by 2038/39.

Current priority is to deliver existing STP, CDC and NHP projects and upgrade the community estate. 140 sites identified and categorised as core, flex and tail. **22% of the estate is classified as core.**

Future infrastructure needs are assessed at system level, with 20 major projects prioritised alongside critical backlog.

Our Vision: To make Dorset the healthiest place to live...

Estate and supporting infrastructure is a key enabler to delivering our vision and five main outcomes. This Strategy details our current and forward plans for how the built environment can be developed to support our ambitions.

Our Design Principles:*

- There should be an active move to prevention and early intervention
- Services should be co-designed around the needs of local people and consideration given to the location in both the design and the delivery of services
- Joined up, seamless care ensuring people should only have to tell their story once regardless of organisation
- People's health and social care needs are considered as a whole instead of multiple conditions
- Services must be designed to support and encourage people to manage their own conditions where possible
- Focused action to tackle inequalities in areas of deprivation and greatest need
- We are committed to shift the focus of clinical attention towards prevention while recognising the need to deliver high quality, sustainable services when people need them.

*Both organisations are supportive of Dorset ICB's design Principles from its infrastructure strategy document 2025

Strategic Objective	Goals and Benefits
Care	● Providing a clean, safe, well-maintained environment. ● Aligning infrastructure/assets to clinical priorities, to support delivery of the joint Clinical & Quality Strategy. ● Enhanced infrastructure and compliance to ensure safety and increase the quality and outcomes of care.
	● Reviewing property use so services are delivered from locations that best meet community needs. ● Developing 'One Public Estates' opportunities, to service broader community needs. ● Addressing health inequalities through integrated neighbourhood services (right care, right time, right place). ● Developing social value through local supply chain.
	● Providing a working environment that is safe, environmentally sustainable and has suitable well-being spaces. ● Reducing dependence on outdated facilities to improve staff morale. ● Aligning space usage to modern ways of working. ● Key worker housing to support recruitment and retention.
Sustainability	● Developing our built environment and transport services to be as environmentally sustainable as possible. ● Coordinating contracts across both Trusts. ● Sharing expertise, digital systems and support functions to maintain efficiency and build in business continuity. ● Meeting net zero obligations. ● Monitoring infrastructure performance using shared metrics.