

# Longridge Hospital

## Update on temporary changes and continued provision of services

7 May 2026

# Introducing



**Craig Harris, chief commissioning officer**  
NHS Lancashire and South Cumbria Integrated Care Board



**Donna Robinson, chief operating officer**  
Lancashire and South Cumbria NHS Foundation Trust



**Alistair Rose, director of strategic estates, infrastructure & sustainability**  
NHS Lancashire and South Cumbria Integrated Care Board



**Sarah James, integrated place leader – Central Lancashire**  
NHS Lancashire and South Cumbria Integrated Care Board

# Together, we will talk through

- What services are delivered from Longridge Hospital?
- Why have we had to make some temporary changes?
- What actions we have taken?
- What happens next?
- We will have time for Questions

We know that you are passionate about you local NHS services, and we are grateful for the opportunity to explain where we are in more detail and to hear from you.

# Longridge Hospital

- **Longridge Hospital** is owned by **NHS Property Services**.
- **NHS Lancashire and South Cumbria Integrated Care Board** is the organisation responsible for commissioning (planning and managing) health and care services.
- **Lancashire and South Cumbria Foundation Trust (LSCFT)** is the main tenant providing community clinics and bedded care, including 15 intermediate care beds primarily for post-surgical, medical, rest and palliative care.
- **No decisions** have been made about the future of Longridge Hospital.
- Any process for changing services will require full engagement, involvement and listening to the community as part of the service change process.

# NHS organisations involved

- **Building owners**
  - NHS Property Services
- **Decision-makers and planners**
  - NHS Lancashire and South Cumbria Integrated Care Board (ICB)
- **Provider of services**
  - Lancashire and South Cumbria NHS Foundation Trust



# How we got here

- In February 2025 there were fire safety concerns raised at Longridge Hospital
- Patient safety is our priority, and as a result the Longridge Ward was temporarily relocated to the ground floor, reducing bed capacity from 15 to 5. This was to allow for safe evacuation of frail and older patients and staff should the need arise.
- After a further building inspection as part of the planned works, some additional fire safety issues being identified. The decision was therefore taken to temporarily relocate the whole ward in November 2025.



# What were the fire safety concerns?

- The building was constructed before the current fire regulations came into place.
- As part of planning to return the beds to the upper floor, structural surveys of the building were completed. Results from a technical survey identified further structural issues.
- This made the building unsafe for bedded patients because the regulations stipulate a 60-minute minimum evacuation time.
- The remaining services are able to continue in the building as the site meets evacuation standards for patients who are well enough to come and go on their own (mobile/ambulatory)

# Actions taken so far

- ‘Longridge@Cuerden’ ward established at Chorley Hospital.
- The ward contains the full compliment of 15 beds and is supported by the same group of nurses and staff
- This is working well for patients and staff, though we appreciate it is a longer journey for some.
- This change will remain temporary.
- **Longridge Hospital remains open.**
- **Outpatient services continue to be provided as normal.**



# Services still at Longridge Hospital

The following services were not impacted and continue to be open as usual:

- LSCFT memory assessment clinic
- ASCENTI physiotherapy
- LSCFT community neuro rehab team
- LSCFT speech and language therapy
- East Lancashire diabetic eye screening
- LSCFT talking therapies (including Talking Therapies – Rosa)
- LSCFT heart failure service
- LSCFT treatment room services
- LSCFT podiatry
- LSCFT adhoc therapy Services (gymnasium use)



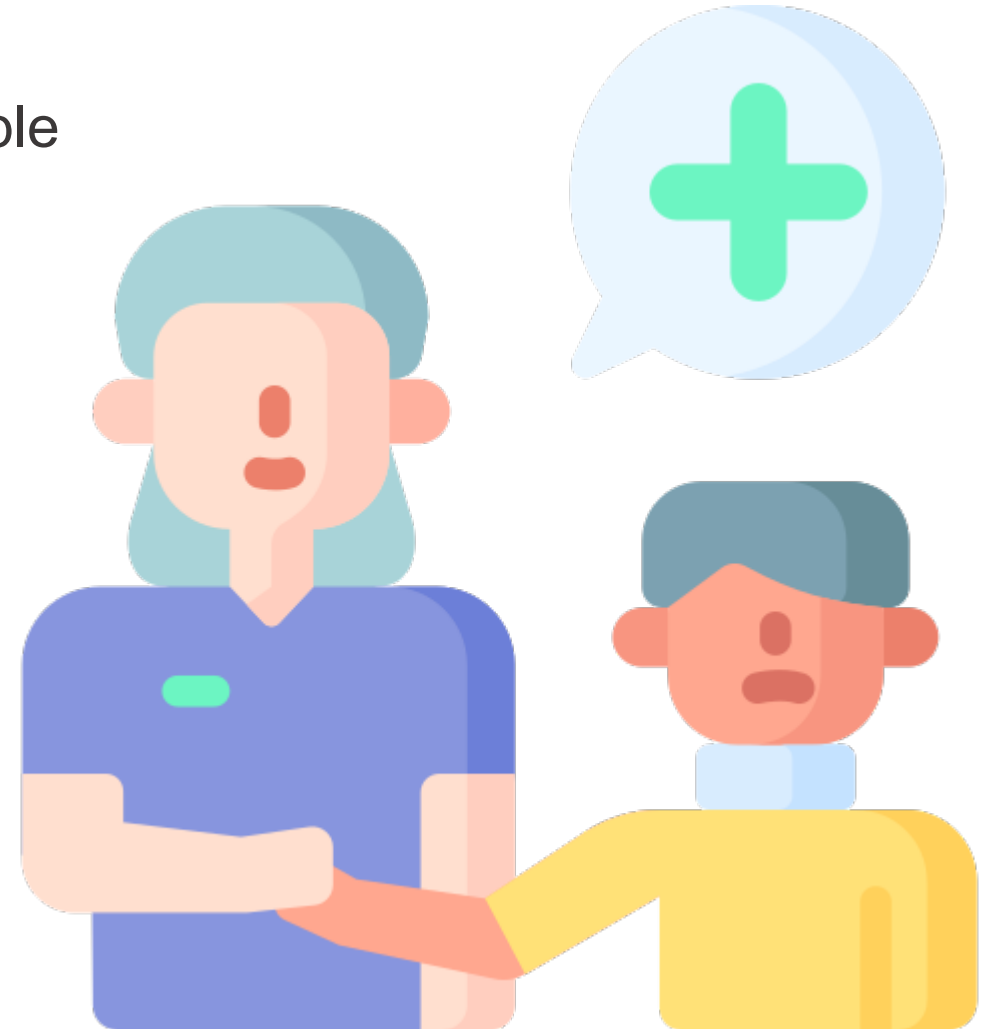
# Workforce impact

- Around 30 colleagues have been affected by the temporary change. We are working closely with all colleagues on a case-by-case basis in line with policy, and if needed staff side where required to ensure any change is managed correctly and colleagues remain supported.
- Recognition of significant emotional impact sudden relocation can have on staff.
- HR and union engagement to support Longridge team.
- Colleagues were engaged in conversations during the incident response and have received regular updates.
- Ongoing support in line with LSCFT policy around change of base.

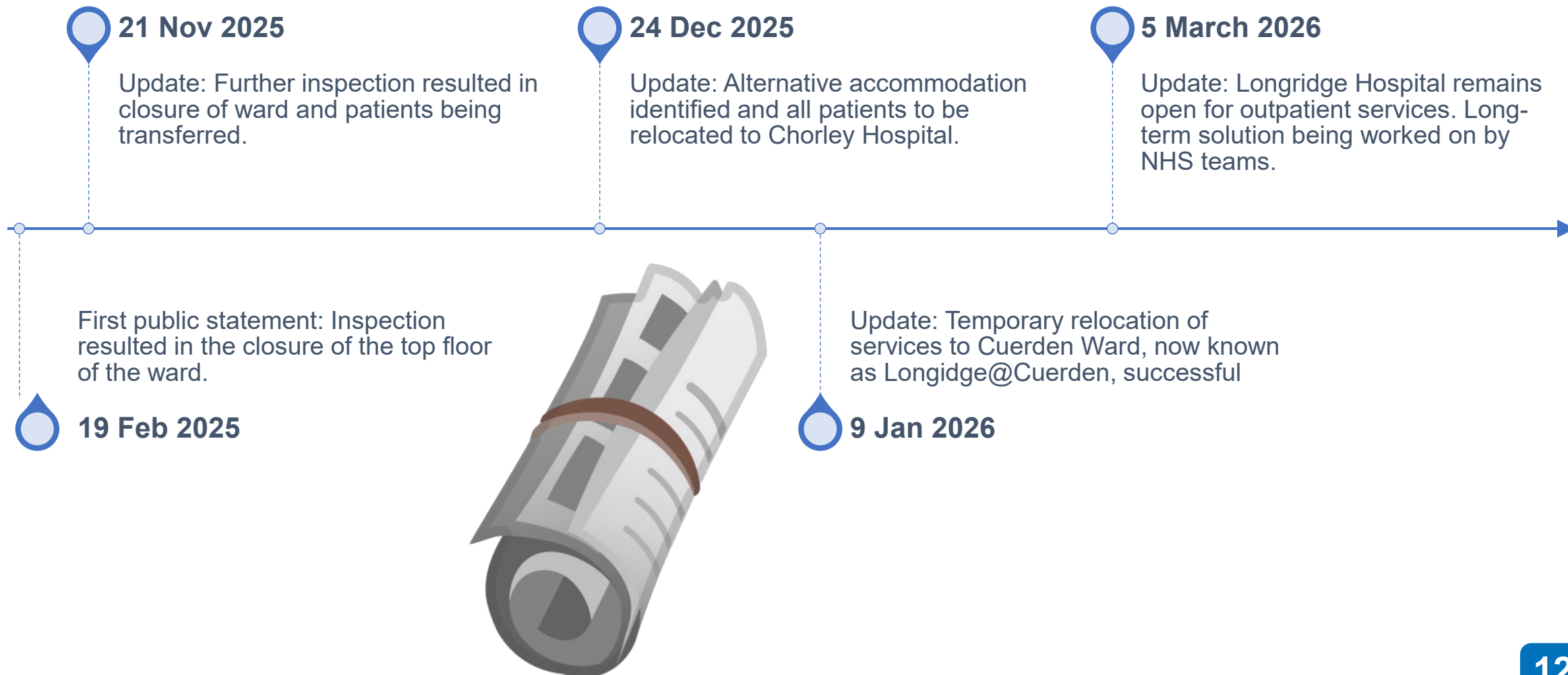


# Longridge@Cuerden

- Since reopening in December, more than 85 people have received care and treatment on the Longridge@Cuerden ward.
- Patients receive nursing care and, as needed, occupational therapy and physiotherapy, all supported by primary care doctors.
- Service available for patients across the whole of central Lancashire.
- Average length of stay on the ward is two weeks, the same as it was in Longridge.
- The team continues to receive positive feedback and compliments from patients they care for.



# Commitment to communication



# What happens next

- Intention has always been to repair the building and reinstate the beds, provided this could be done safely and in line with regulations.
- However, the estates feasibility work carried out so far has shown significant investment required, potentially costing up to £8million. We do not currently have this capital funding available.
- It is important to make sure we are planning the right services and the right building design, not just for today, but for the future.
- We now have an opportunity to ensure the services provided here are right for local communities, reflect how care is changing, offer good value for money and are supported by a clear and deliverable plan for capital funding.

# What happens next

- Reaching a conclusion on this will take time. We are required to follow a national NHS process, which typically takes around two to three years, to make sure any decisions are properly evidenced and include public involvement.
- **During this period:**
  - The change to the beds will remain temporary.
  - Other health services will continue to operate from the site.
  - We will continue to seek opportunities for additional funding.
  - **We will continue to engage with local communities, listen to concerns and views, and keep people informed as plans develop.**

# Questions