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Pre-application community consultation on the outline plans for a new Airedale Hospital

Feedback from exhibitions for residents

June 2026

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Executive summary

This report summarises feedback from three exhibitions held to gather views from local residents on the proposals for new hospital facilities at Airedale. In total, 90 people attended the exhibitions held at Eastburn Methodist Church, Steeton Hub and Silsden Town Hall.

Attendance and feedback varied by location, and findings should be interpreted as qualitative insight from residents who chose to attend rather than as statistically representative of the wider local population.

Residents from Eastburn, the closest settlement to the new building, expressed the greatest concerns, reflecting their proximity to the proposed development. Steeton feedback was more mixed, with residents raising concerns but also engaging with the rationale behind the proposals. Silsden had the lowest attendance, and feedback was generally more exploratory and, in some cases, supportive.

The most frequently raised theme across all exhibitions was traffic, access and parking. Residents were concerned about road capacity, new access arrangements, parking overspill, pedestrian safety, public transport links and how parking would be managed during and after the build.

Healthcare experience and facilities was the second most common theme. Feedback highlighted mixed views on single rooms, with residents recognising benefits for privacy, dignity and infection control while also raising concerns about loneliness, observation and the need for sufficient staff contact. Residents asked how the new hospital would provide capacity for future demand and how specialist services, including emergency care, and community-based care would be planned.

Building design and impact was also a significant theme. Concerns centred on the proposed height and scale of the building, its visibility in the landscape and the effects on views and light.

Residents sought more information about project timescales, costs, alternative options, construction impacts, local infrastructure and environmental mitigation, and emphasised the importance of ongoing communication.

Alongside concerns, residents made constructive suggestions for the project team to consider. These included providing clearer visualisations to help understand impact, explaining access and parking arrangements in more detail, strengthening pedestrian, cycling and public transport links, showing how construction activity will be managed, explaining the rationale for the preferred option, and setting out how environmental mitigation, landscaping and resident impacts will be addressed.

Overall, the exhibitions provided valuable insight into the issues residents consider most important as the proposals develop. The findings highlight support for clear, proactive communication and for further detail on how the project will respond to local concerns, particularly for those living closest to the site. This feedback will be considered alongside wider consultation findings, including online survey responses, community roadshow

feedback, door knock feedback and community panel input, and will inform the Statement of Community Involvement.

1 Introduction and methodology

This report presents the findings from three exhibitions for residents held to understand views on the outline proposals for new hospital facilities at Airedale. The exhibitions provided an opportunity for residents to view the proposals, ask questions and share feedback. The exhibitions formed part of the wider pre-application community consultation programme and should be read alongside other engagement and consultation evidence.

The exhibitions were designed as informal drop-in sessions. This allowed residents to attend at a convenient time for them, move around the exhibition at their own pace, speak directly with members of the programme team and subject specialists, and raise issues most relevant to them.

Each event was supported by three groups of staff:

- The programme team welcomed residents, helped them navigate the displays, provided overall programme information and introduced specialists where needed.
- Subject specialists answered technical questions within their areas of expertise.
- Engagement facilitators listened to conversations, captured feedback and questions, managed the flow of discussions and helped direct residents to the right person for more detailed conversations.

Feedback was captured through written notes, comment cards, the capture wall (a visual space designed to capture ideas and observations), and where consent was given, voice recordings. Residents were also encouraged to complete the online survey.

Feedback received at the exhibitions was coded thematically. The themes identified through this process are discussed in this report. This will be considered alongside wider consultation findings to inform the Statement of Community Involvement.

Findings should be interpreted as qualitative insight from residents who chose to attend rather than as statistically representative of the wider local population.

Venue	Date and time	Number of attendees
Eastburn Methodist Church, BD20 8UA	Monday 8 June 5.30-8 pm	34
Steeton Hub, Stone Grove, BD20 6DE	Thursday 11 June 5.30-8pm	43
Silsden Town Hall, Kirkgate, BD20 0AJ	Thursday 25 June 5.30-8 pm	13

Table 1 Exhibition details and number of attendees

2 Thematic analysis

2.1 Overview of themes

To provide a quantitative overview of feedback, comments were coded against a thematic framework. Feedback included concerns, positive comments and suggestions for the project team. Naturally some comments overlapped across more than one theme, so where this occurred, comments were assigned to the most relevant theme or, where appropriate, to more than one theme.

Theme frequencies are shown overall and by exhibition location. The table shows how often each theme occurred as a proportion of the number of event attendees. Each theme is discussed in more detail in this section.

Across the three exhibitions, feedback broadly correlated with proximity to the proposed site.

Residents from Eastburn, the closest residential area to the new building, expressed the greatest concerns. Many residents were direct neighbours to the site and engaged with a strong sense of personal stake, often focusing on immediate and tangible impacts such as traffic issues, construction disruption, and the scale of the building relative to their own homes.

At Steeton, feedback was more mixed. Concerns about height, traffic and construction remained, but residents engaged more with the rationale behind design decisions once explained by the project's technical experts, asking detailed questions on topics such as flood plain positioning and phased construction.

Silsden recorded the lowest turnout of the three events, potentially suggesting a lower overall level of concern. However, attendance may also have been affected by other factors, including the high temperatures at the time.

Feedback in Silsden was positive in tone, with residents more often seeking to understand the building’s landscape impact and design rationale than expressing concern. There were several clearly supportive comments about the new hospital and its benefits for the local community.

Overall, residents living closest to the site tended to focus on direct physical and environmental effects, while those further away were more likely to ask for clarification and suggest refinements to the proposals.

	Eastburn	Steeton	Silsden	Total no. of attendees
No. of attendees	34	43	13	**90**
Theme	**No. (% of event attendees)**	**No. (% of event attendees)**	**No. (% of event attendees)**	**No. (% of event attendees)**
Traffic, access and parking	16 (52%)	12 (28%)	13 (100%)	**41 (46%)**
Healthcare experience and facilities	13 (42%)	11 (26%)	8 (62%)	**32 (36%)**
Building design and impact	7 (23%)	14 (33%)	6 (46%)	**27 (30%)**
Project timescales, cost and alternative proposals	9 (29%)	5 (12%)	6 (46%)	**20 (22%)**
Impact on local residents	5 (16%)	7 (16%)	2 (15%)	**14 (16%)**
Construction impact	5 (16%)	3 (7%)	4 (31%)	**12 (13%)**
Local infrastructure and environment	5 (16%)	4 (9%)	2 (15%)	**11 (12%)**
Communication, engagement and trust	2 (6%)	2 (5%)	2 (15%)	**6 (7%)**

Table 2 Frequency of themes, with percentages shown as a proportion of attendees at each exhibition

2.2 Traffic, access and parking

Traffic, access and parking was the most frequently mentioned theme across the three exhibitions, particularly in Silsden where it was mentioned by all attendees.

The comments suggest strong concern about how the new access arrangements and the multi-storey car park will affect local roads, residential streets, pedestrians, public transport users, staff, patients and visitors.

Summary of concerns and questions

- **Traffic congestion and road capacity:** Residents were concerned that existing roads, particularly Skipton Road, Keighley Road, Thornhill Road and smaller local roads, are already busy and may not cope with additional hospital, staff, visitor and construction traffic.
- **New access arrangements:** There were repeated questions about how the proposed new access road and second junction would operate and whether the arrangements would make congestion better or worse.
- **Parking capacity and overspill:** Residents questioned the number of current and future parking spaces, the size and height of the multi-storey car park, whether parking is future-proofed, and whether staff and patients will continue to park on

residential streets. Several comments highlighted existing problems with inconsiderate parking, staff parking in nearby estates, pavement obstruction and safety issues for residents.

- **Pedestrian and cycling safety:** Concerns were raised about safe pedestrian routes, road crossing points, access via Haxton Boulevard and Thornhill Road, links to the station and lack of pavements on some local roads.

2 **Security and management of parking areas:** Some comments were made about car park security, people sleeping in their cars, and whether expensive parking charges would encourage people to park on nearby residential areas.

Specific comments and suggestions made by residents for the project team to help address concerns:

- Provide clear information on how the new access arrangements will work, including roads, junctions, traffic lights, filter lanes or roundabouts, ambulance routes and whether buses will come onto the site.
- Show the location and design of the multi-storey car park, including images, height, layout, current and future parking numbers, and how parking capacity has been modelled.
- Review how parking will be managed, including car park security and CCTV, short-stay parking arrangements, and longer drop-off times or bays near A&E for emergency drop-offs.
- Improve public transport links to the hospital, including clear information on bus routes and stops, a possible shuttle bus, and options for direct access between the hospital and the railway station.
- Improve walking and cycling routes, including safe pedestrian access through Haxton Boulevard and the north-east of the site, clear walking routes to the station, dedicated cycle routes from several directions, and lockable bike storage, including for electric bikes.
- Work with West Yorkshire Combined Authority (WYCA) and other relevant partners on active travel, public transport and wider access improvements.
- Consider wider traffic management options to reduce pressure on local roads, such as peak-time traffic lights, a park and ride near the A629, or longer-term highway options such as a bypass, flyover or connecting road.
- Review the proposed location of the access road, including whether it could be positioned further down Skipton Road.

Implication for the project team: Residents need clearer, accessible information about the transport assessment, access strategy, parking numbers, management of staff and visitor parking, pedestrian safety and links to public transport. This should include clear visuals showing how the proposed access arrangements would work in practice.

2.3 Healthcare experience and facilities

Residents made a wide range of comments about healthcare experience and the future hospital development.

The comments show concerns about the impact of single rooms on patient care and social interaction, whether the new hospital will have enough capacity for future demand, and how services such as mental health, outpatient care and community provision will be planned.

Notably, some positive comments were made about the opportunity to improve the hospital environment and provide modern facilities.

Summary of concerns and questions

- **Patient environment and facilities:** Although some recognised the benefits of single rooms, concerns were raised about loneliness, reduced social interaction, and how patients would be observed and supported.
- **Staffing and human contact:** Some residents questioned whether staffing levels will be sufficient to support single rooms and stressed that digital technology should not replace human interaction, observation and reassurance.
- **Capacity and future demand:** Questions were asked as to whether the new hospital will be large enough to cope with population growth, housing development and future healthcare needs over the next 50 years.
- **Emergency, helipad and ambulance access:** Residents asked how ambulances will access the helipad, whether the helipad will remain where it is, and how emergency routes will work.
- **Specialist and community services:** Residents asked for clarity on how services will be organised across the hospital and wider community, including access to emergency care and mental health services.

Positive comments

- Some residents expressed their support for the proposal and felt it was a positive and much-needed development for the area.
- Comments were made about the benefits of single rooms in terms of privacy, dignity and infection control.
- There was some recognition that more clinics, tests and services closer to home reduces the need for people to travel to hospital.

Specific comments and suggestions made by residents for the project team to help address concerns:

- Improve signage and wayfinding, including provision for partially sighted people and people who use different languages.
- Design the hospital with enough capacity for future population growth.

- Make better use of community-based care, including local community health centres, GP-based blood tests and appropriate off-site clinics or outpatient services to keep people closer to home.
- Open clinics at weekends to help reduce waiting lists.
- Use an opportunity zone for care homes to support timely discharge from hospital.
- Provide social, outdoor and fresh-air spaces alongside single rooms, including potential roof or external areas.
- Improve specialist patient facilities, including oncology spaces and lounges.
- Provide a large multi-faith space.

Implication for the project team: Feedback on wayfinding, single rooms, internal facilities and access to outdoor space should inform design development. Comments about staffing, weekend clinics, community care and discharge should be shared with the relevant operational and service planning leads.

2.4 Building design and impact

Residents shared both concerns and positive views about the proposed hospital's design and likely impact. The height of the main building and multi-storey car park was the strongest concern, particularly for nearby residents and those viewing the site from Skipton Road or across the valley.

However, some residents were positive about the idea of a new hospital, liked the proposed internal layout, or felt reassured by the logic of a taller building if it reduces travel distances inside the hospital.

Residents wanted visual information that made the scale and impact of the building easier to understand from familiar local viewpoints.

Summary of concerns and questions

- **Height and scale:** Some residents were surprised by the proposed 10-storey height and felt it would be very visible in a rural setting. Some described the scale as out of keeping with the area and asked why the building needs to be so tall.
- **Views, shadowing and line of sight:** Concerns focused on the effect on views from nearby homes, Skipton Road and across the valley, as well as potential shadowing and loss of light.
- **Emergency evacuation:** A small number of comments questioned how evacuation would work in a taller building, especially if lifts were unavailable during a power failure or major incident.

Positive comments

- Several comments recognised the benefits of a more compact vertical layout if it reduces long internal walking distances and makes the hospital easier to navigate.
- One resident positively described the hospital as a potential "monument".

- Some residents liked the look of the design or trusted the project team's expertise in designing a modern hospital.
- The proposed undergrounding of power lines was noted positively by one resident.

Specific comments and suggestions made by residents for the project team to help address concerns:

- Provide clearer visual information showing how the building will look from different locations, including larger maps, perspective images, views from nearby homes and roads, and an eastern view perspective.
- Show the proposed height and scale in a way residents can easily understand, such as through a 3D model or height markers.
- Use external materials, colours and cladding that are sympathetic to the rural landscape and consistent with other design features, such as the active travel bridge where appropriate.
- Use planting, trees, live greenery, living walls or façade greenery to soften the building edges and help screen the building.
- Improve green space so landscaping can provide a visual screen and sound barrier between the new building and immediate neighbours.
- Consider whether the building could be repositioned, including whether it could be moved further to the right.

Implication for the project team: Residents need clearer visualisations showing the proposed building height, scale, massing, relationship to nearby homes and appearance from key local viewpoints.

2.5 Project timescales, cost and alternative proposals

Residents asked a range of questions about why this design and site option have been chosen. Many comments focused on whether alternatives had been fully explored, whether the project is affordable and deliverable, and whether the new hospital will be future-proofed.

Summary of concerns and questions

- **Rationale for the preferred option:** Residents wanted to understand why the current site and 10-storey design have been chosen, and why other options or lower-rise approaches were not considered viable.
- **Alternative proposals:** Comments questioned whether different sites, phased construction, temporary buildings, Gateway House or moving more services off site had been fully explored.
- **Cost, funding and value for money:** Residents asked about the budget, cost-benefit analysis, whether the project is publicly funded, and how cost escalation will be managed.

- **Programme and deliverability:** There were questions about why the project is taking so long, whether the timeline is realistic, whether planning permission will be granted and whether the new hospital will be built.
- **Future-proofing and lifespan:** Residents asked how long the new hospital is expected to last, whether it can expand if needed and whether the materials and design will be durable.
- **Operational viability:** Concerns were raised about whether there will be enough staff and funding to make full use of the new facilities.

Positive comments

- The alliance-style approach to appointing contractors was viewed positively by one resident as a possible way to reduce the risk of spiralling costs and delays.

Specific comments and suggestions made by residents for the project team to help address concerns:

- Explain the rationale for the preferred option, including the cost-benefit analysis, what was factored into decision-making, the next best option and why it was not chosen.
- Provide an explanation as to why alternative approaches are not viable.
- Consider whether decanting services or moving services to Gateway House could reduce pressure on the main site.
- Consider whether temporary buildings or phased construction could reduce the need for one permanent 10-storey building.
- Consider more efficient heating and ventilation options, including ground source heating.

Implication for the project team: Residents need a plain English explanation of why this option has been selected, what alternatives were considered, why they were not progressed, and how cost, deliverability, future proofing and expansion have been assessed.

2.6 Impact on local residents

Residents living closest to the proposed development expressed strong concern about the direct impact on their homes, gardens, outlook, privacy and quality of life. The comments show anxiety from residents near Thornhill Road and nearby estates.

Residents whose homes are closest to the proposed development tended to focus on direct impacts on their day-to-day lives. Other residents living locally were more likely to comment on the wider benefits of the new hospital or ask questions about how the plans would develop.

Summary of concerns and questions

- **Loss of light, views and privacy:** Nearby residents were worried about the height and proximity of the building, overlooking, loss of views and reduced sunlight, particularly in gardens and during winter.
- **Property value:** Some residents felt the development could reduce property values or make homes harder to sell.
- **Night-time lighting and headlight intrusion:** Residents asked whether the hospital and car park would be lit overnight and whether headlights from parking areas could affect nearby homes.
- **Noise from infrastructure:** Concerns were raised about possible substation noise, plant equipment and the location of infrastructure close to homes.
- **Feeling overlooked or deprioritised:** Some comments expressed a view that residents closest to the site had not been properly considered, and that impact on homes should carry more weight even if mitigation costs more or takes longer.
- **Safety and antisocial behaviour:** One resident raised concerns linked to people entering gardens from the current hospital site.
- **Parking impacts:** Existing problems with inconsiderate parking and pavement obstruction were linked to wider concerns about resident safety and quality of life.

Positive comments

- One local resident noted they felt fortunate that the plans would not directly affect their home because they do not overlook the site.

Specific comments and suggestions made by residents for the project team to help address concerns:

- Provide clear visual and technical information showing the likely impact on nearby homes, including perspective views from residents' homes and the village, light modelling and other relevant studies.
- Consider measures to reduce overlooking, loss of light, night-time lighting impacts, headlight intrusion and substation noise for nearby homes.
- Prioritise the impact on local residents when developing mitigation, even where this may take longer or cost more.
- Provide clear information on whether any property related mitigation or compensation arrangements apply to residents directly affected by the development.

3 Improve parking in nearby residential areas, including reviewing or removing restrictions where appropriate.

Implication for the project team: Residents living closest to the site need clear, specific information on how impacts on homes, gardens, privacy, light, outlook, noise and night-time lighting will be assessed and mitigated. The project team should show how resident impacts have influenced design development and mitigation proposals, particularly for those most directly affected.

2.7 Construction impact

Residents were concerned about how construction will affect nearby homes, patients, staff and local roads during the build. The main concerns related to noise, vibration, dust and construction traffic and parking. Some residents expressed apprehension about the level of disruption they expected construction to cause. These concerns are likely to be particularly important for residents living closest to the site and for people accessing hospital services during the build.

Summary of concerns and questions

- **Noise, vibration and piling:** Residents asked whether piling will be needed and raised concerns about construction noise, vibration, possible structural damage and effects on nearby residents and hospital patients.
- **Dust, fumes and plant equipment:** Residents asked what dust control measures will be used and whether plant equipment will create noise, gases or other impacts.
- **Construction traffic:** Residents wanted to know where construction vehicles will enter the site, whether heavy vehicles will use Skipton Road and how disruption will be managed.
- **Contractor parking:** Concerns were raised about where contractors, visitors and staff will park during the build and whether parking will spill into residential streets.
- **Phasing and site movement:** Residents asked how people will move around the site during construction, where services and administration support will go, and how changes will be communicated.

Specific comments and suggestions made by residents for the project team to help address concerns:

- Provide a clear construction plan explaining how and when the build will take place, where construction traffic will enter the site, and how access will be managed.
- Manage contractor, visitor and staff parking during construction to reduce pressure on residential streets.
- Reduce disruption from construction activity through measures such as silent piling, restricted working times and dust control.
- Provide clear communication about changes affecting services and access during construction.
- Make temporary vacant spaces wild or green while they are waiting to be redeveloped.

Implication for the project team: Residents wanted early and clear information about the construction management approach, including construction traffic routes, working hours, noise, vibration, dust control, contractor parking and changes to hospital access during the build.

2.8 Local infrastructure and environment

Some residents raised concerns about how the development will interact with local infrastructure, land conditions, flooding, drainage, green space, trees and existing community routes. Comments focused on protecting the rural character of the site and making sure environmental mitigation is visible, credible and beneficial to the wider community.

Summary of concerns and questions

- **Flooding and drainage:** Residents asked how surface water, hillside run-off and flood risk will be managed, particularly given existing pooling and flooding concerns near nearby housing.
- **Ground conditions:** Residents questioned whether the land can support the new hospital and how foundations will work with the terrain.
- **Substation and infrastructure noise:** Residents asked whether substations, generators, transformers or other infrastructure will create noise or pollution.
- **Loss of green space and routes:** Concerns were raised about losing walking routes used by residents, families, dog walkers and schools.
- **Trees, biodiversity and planting:** Residents were concerned about trees being removed and wanted reassurance that replacement planting and biodiversity improvements will be meaningful.
- **Pressure on village infrastructure:** Some comments linked the hospital project to wider concerns about housing growth, traffic, sewage capacity and whether local infrastructure can cope.

Positive comments

- Information that some infrastructure, such as transformers, would not create noticeable noise was reassuring where it was explained.
- Residents were interested in environmental improvements and biodiversity if these are delivered visibly and sensitively.

Specific comments and suggestions made by residents for the project team to help address concerns:

- Explain the flooding and drainage plan in more detail, including how risks to nearby homes and existing surface water issues will be managed.
- Protect and enhance green infrastructure, including replacing removed trees, retaining apple trees, pear trees and blackberries where possible, and ensuring landscaping supports biodiversity and looks appropriate.
- Retain local walking routes where possible and consider improving poor-quality local open space as a benefit returned to the community.
- Recognise and protect local heritage and community features, including memorials, stained glass and statues.

- Consider renewable energy measures such as solar panels.

Implication for the project team: Residents wanted environmental mitigation that is practical, visible and meaningful, rather than generic reassurance. This should include clear information on drainage, flood risk, biodiversity, tree loss and replacement planting.

2.9 Communication, engagement and trust

Six residents made a comment about communication, engagement and trust. This included comments that they felt shocked by the scale of the proposals and did not feel they had been directly informed or meaningfully involved.

Although this was the least frequently coded theme, it is strategically important because concerns about trust and communication can influence how residents interpret the whole proposal.

Summary of concerns and questions

- **Feeling unheard:** Some residents felt the plans had already been decided and questioned what aspects of the design could genuinely still be influenced.
- **Shock at the height and scale:** Some residents said they had not expected a 10-storey building and felt earlier engagement had not prepared them for the scale now proposed.
- **Lack of direct communication:** A few residents said they had not heard about the events directly or had not been informed about related works such as power line changes.
- **Unclear branding or messaging:** One resident felt the phrase “Securing the Future” did not clearly signal that the information related to the hospital redevelopment.

Positive comments

- One resident said feeding in views is important to help get things right, particularly based on their experience as a patient.

Specific comments and suggestions made by residents for the project team to help address concerns:

- Share information directly with residents, rather than relying on the planning process or residents having to search for updates.
- Provide regular and proactive updates about issues affecting residents’ daily lives, including traffic disruption, construction changes and access arrangements.
- Inform residents in advance about specific enabling works, including works to move power lines.

Implication for the project team: Residents need regular, direct and proactive communication about issues that may affect their daily lives, including enabling works, construction activity, traffic, parking, access and design changes.

3 Conclusion

The exhibitions provided a valuable opportunity to hear directly from local residents about the proposed new hospital facilities at Airedale. Feedback showed recognition of the need for modern, fit-for-purpose healthcare facilities, alongside significant concern about how the proposals may affect local roads, parking, nearby homes, the landscape and wider community infrastructure.

The strongest messages from residents were the need for clear explanations, practical mitigation and continued engagement as the proposals develop.

Residents asked for more detail on traffic and parking arrangements, building height and visual impact, construction management, environmental mitigation and the rationale for the preferred option.

Some feedback related directly to planning considerations, including traffic, access, parking, height, visual impact, drainage, construction and environmental mitigation. Other comments related to wider hospital design, service planning and future operational arrangements. These wider comments have been included because they are important to residents and should be shared with the relevant programme leads.

Overall, the feedback provides an important evidence base for the project team as it prepares the planning application and associated Statement of Community Involvement.