

NHS Trust

10/06

Report From: Director of Planning and IiYH Project Director on Behalf of the Chief

Executive

To: Trust Board, 26th January 2006

Subject: Investing in Your Health Project Update

Action: To Note Contents

1. Introduction

The purpose of this document is to provide The Trust Board with an update on Investing in Your Health (IiYH) in West Hertfordshire, this includes the Service Redesign Group, the West Hertfordshire Hospitals NHS Trust (WHHT) IiYH Project Team and the Watford Health Campus.

This paper outlines a summary of the proposed hospital facilities at Watford in terms of beds, outpatient consultations, A&E attendances and diagnostics and a comparison with the IiYH Strategic Outline Case (SOC.) Progress reports from the WHHT IiYH Project Team and the Watford Health Campus include updates on work to date and the current situation.

2. Service Redesign Group

The Service Redesign Group was established to provide a commissioner led overview group to report to the West Hertfordshire Hospitals NHS Trust (WHHT) Project Board, the Partnership Board and the liYH Programme Board the Service Redesign information required for the development of the West Hertfordshire Outline Business Case (OBCs) for the liYH programme.

The assumptions in the SOC have been tested and validated through five key workstreams, each group was chaired by a senior manager in commissioning, the Vice Chairs from WHHT with senior management and clinical input from all provider organisations, including Adult Care Services. Clinical engagement was ensured by the appointment of Clinical Champions for each workstream from both primary and secondary care and through the wider group membership.

This cross-organisational and commissioner led process ensured that the validation of the SOC assumptions and rationale was correct, relevant and achievable. This group ensured that the assumptions are fully in line with future commissioning arrangements.

2.1. Long Term Conditions and Intermediate Care:

All assumptions agreed.

2.2. Diagnostics

Location, activity and flows all broadly agreed, dependant on the unscheduled care and long term conditions workstreams.

2.3. Unscheduled Care

All assumptions agreed, further work required on A&E attendances shift from Hemel to Hatfield to be discussed through the Urgent Care Centres Project Team.

2.4. Elective

All length of stay assumptions have been agreed. Amendments were made to the assumptions for Day Surgery and Outpatients. It was agreed that Day Surgery should be included in the West Herts Acute Hospital PFI to ensure flexible planning for the future. Non

-inpatient space needs to be included in the Acute Hospital to ensure maximum efficiencies, enabling fully integrated services centred on the patient. This will include potential for Discharge and Admission facilities.

2.5. Children's Services:

Bed numbers are reduced from 44 to 26 as in the current acute model for West Hertfordshire.

3. IiYH Project Team Update

3.1. Development of the OBC - Proposed Facilities, Comparison with SOC and Master Plan

Following the appointment of Avanti as technical advisers, current work is focusing on validating and translating the outputs of the Service Redesign Group and testing the translation of the SOC assumptions into acute facilities for the Public Sector Comparator (PSC). Current work is underway on generic spaces, adjacencies and clinical functionality.

The following table compares the SOC as developed by the SHA and provisional figures for the PSC and OBC based on validation by the Service Redesign Group workstreams:

Facilities	SOC	OBC	Changes
Beds	603	595	- 8
In summary 10 additional HDU 18 less Paediatric beds.			
Outpatients and	4106 m ²	5800 m ²	
other non inpatient			
A&E	75,000	75,000	
	attendances	attendances	
Diagnostics	Plain X ray 8	Plain X ray 8	
	2 CT suites	2 CT Suites	
	1 MRI	2 MRI	1 MRI
	5 Ultrasound	8 Ultrasound	3 Ultrasound

3.2. Gateway Review

The Project Team conducted a Risk Potential Assessment (RPA) as part of the Health Gateway Process. The RPA score indicated the Project as high risk, meaning that Gateway review is compulsory.

The Gateway process provides the Project with a confidential, independent expert, peer review of the Project and its readiness to proceed at key points throughout the life of the Project. During the necessary planning meeting, the Project was assessed as being ready for a Gate 0, which investigates commitment to key strategies and objectives and checks alignment of those objectives with government policy and agenda.

The Gateway review was conducted over the period $10^{th} - 13^{th}$ January 2006, with 38 individuals having been interviewed by the Gateway team.

The draft Gateway report is available to the Senior Responsible Owner (SRO), the Trust's Chief Executive, though further dissemination is entirely at the discretion of the SRO. We have received the draft report and will be formulating the response and taking to the next IiYH Project Board and then for ratification at the February Trust Board.

4. Watford Health Campus

4.1. Organisational Aspirations

The Watford Health Campus came about due to the identification of significant potential synergies in conducting a joint redevelopment of the West Watford area to include the West Hertfordshire Acute Hospital development. The key aspiration is for a sustainable and integrated redevelopment of the Watford General Hospital, Cardiff Road Industrial Estate, Watford Football Club and Carriage-shed sites. There is a strong emphasis on the hospital as a place of healing and an employer of choice, access to the site and shared facilities including a combined Heat and Power plant.

The Stakeholder Organisations are: the East of England Development Agency; Hertfordshire Partnership Trust; Watford Borough Council; Watford & 3 Rivers PCT; Watford Football Club; West Hertfordshire Hospitals NHS Trust; Bedfordshire & Hertfordshire Strategic Health Authority; and Hertfordshire County Council

4.2. Technical Advice

The Trust has agreed to extend the Avanti consortium appointment for the Acute Hospital Public Sector Comparator to include the outline planning application for the overall Watford Health Campus. This work is for and on behalf of the other stakeholder organisations as well as for the Trust. All work conducted is warrantable across to those other stakeholders and indeed to any bidding PFI consortia.

It is worth noting that much of the work being conducted under the Campus banner, would have had to be commissioned by each individual stakeholder if running "standalone" Projects namely all Outline Planning Application supporting reports (TIA/ EIA/ HIA/EconIA etc). It is believed therefore that the Campus approach prevents significant duplication of effort and cost for all stakeholders.

4.3. Memorandum of Understanding (MoU)

The other stakeholder organisations have agreed to fund the work in agreed proportions. This commitment is confirmed in the Memorandum of Understanding, which is pending signature by the various Parties. Signing of the MoU is expected prior to the launch event planned for 17th March (subject to agreement at Campus Strategic Management Group, 16th January 2006).

Commitment to the development is evidenced by the funding received from the East of England Development Agency, who have now confirmed their contribution of approximately 50% of the forecast Outline Planning Application costs (circa £750k).

4.4. Access

Access and Highways Issues still remain high on the agenda for the Campus group – a specific workstream will be established following the MoU to pursue funding.

Sarah Shaw Director of Planning and Project Director IiYH

16th January 2006