

## Minutes of Board Strategy Committee

**Tuesday 3<sup>rd</sup> April 2012 WGH  
1400hrs West Herts Meeting Room**

### Attendees

Chris Green (CG) Non-Executive Director (Chair)  
Jan Filochowski (JF) Chief Executive  
Natalie Forrest (NF) Director of Nursing  
Louise Gaffney (LG) Director of Strategy & Infrastructure (Interim)  
Paul Jenkins (PJ) Director of Partnerships  
Kyle McClelland (KM) Associate Director, Strategic Developments

### In attendance

Tom Dobrashian [TD] Development Director, Watford Health Campus

### Apologies

Mahdi Hasan [MH] Non-Executive Director  
Liz Rippon (LR) Director of Communications & Corporate Affairs  
Robin Douglas (RD) Non-Executive Director

Agenda		Action
<b>Item 1</b>	<b>Minutes of the Last Meeting</b>	
	The DRAFT minutes of 7 <sup>th</sup> February 2012 Board Strategy Committee were reviewed for accuracy. NF noted that she had presented Item 3 as CP had sent apologies to the previous meeting. With this amendment, minutes agreed as an accurate record.	
<b>Item 2</b>	<b>Matters and actions arising</b>	
	<ul style="list-style-type: none"> <li>NF to circulate Maternity Strategy paper to Committee before 24<sup>th</sup> May.</li> <li>Capacity Strategy to be reviewed at 24 May meeting.</li> <li>Brief Patricia Duncan on need for Board discussion on 31<sup>st</sup> May.</li> <li>NF/CP confirmed patient representatives were now on the groups reviewing alternative pathway strategies.</li> <li>Estates Backlog progress to be tabled at each Strategy Committee</li> <li>Strategic review of five year Capital Budget at May 24 Committee</li> <li>LG reported Agency staff filling urgent Maintenance vacancies and permanent appointments underway. Three senior management posts out to advertised.</li> <li>Fortnightly asbestos management reports to CEO.</li> </ul>	<p>NF KM/LG</p> <p>LG LG</p> <p>LG</p> <p>LG</p>
<b>Item 3</b>	<b>Reshaping Strategy</b>	
	<p><b>Watford Health Campus Bids</b></p> <p>LG and team gave an overview of the three Campus bids:</p> <ul style="list-style-type: none"> <li>Three strong bids (Kier; Vinci/ St Modwen; John Laing)</li> <li>Reduce from 3 bids to 2 at 25 April Campus SMG</li> <li>OJEU process has allowed Campus bidders to deliver new Hospital but no commitment. Competing masterplans compared to the original with new hospital location proposals discussed in detail.</li> <li>Reviewed Impacts on allotments; road alignments and access routes</li> <li>Reviewed differing car parking strategies</li> <li>Reviewed more accurate flood plain modelling and cost mitigation</li> <li>Ground surveys (geo-tech and contamination) underway</li> </ul> <p>Next stage would be the selection of preferred bidder by September</p>	<p>LG</p>
	<p><b>Campus: Office Strategy</b></p> <p>Office case discussed in detail. Agreement from Strategy Committee that the approach for the future should be on an open plan basis as well as moving towards "Agile" working.</p>	

	<p>TD noted that Campus teams can help WHHT culture change. NF/ JF noted that not all WHHT work can be done on an “agile” basis, but that direction of travel was the right one. NF noted the difficulty of achieving this and agreed that Board support and leadership would be needed. KM flagged potential concern on this being an early deliverable, before clinical facilities.</p> <p>CG recommended a “pilot” area be developed and a proposal to be made to 24 May Committee.</p> <p><b>Campus: Car Park Strategy</b> Car Park strategy discussed in detail. Complexity of VAT arrangements on road, with link to car park was discussed. If road is accessing a chargeable commercial service, the VAT should be recoverable.</p> <p><b>Campus: Action Strategy</b> TD updated on ‘Growing Places’ funding application. Have applied for further £6m (but an interest free loan, not a grant). Bidders advised to assume £3m. Resolution advised w/c 16<sup>th</sup> April and Preferred Bidder selection expected September 2012.</p> <p>Agreed new road was on critical path. Planning permission and CPO are key. TD will provide a high level milestone summary.</p> <p>LG noted that Best &amp; Final Offer (BAFO) Stage provides opportunities for further WHHT input in to the process and designs. JF suggested that two short-listed bidders be brought to special Strategy Committee to present their masterplan proposals and hospital phasing (1 hr each).</p> <p><b>Campus: Check List</b></p> <ul style="list-style-type: none"> <li>• Endorsement of Preferred Bidder: Committee to endorse SMG selection</li> <li>• Land Equalisation: Need further follow up to Board Development Day Feb 2011</li> <li>• Campus Agreement: discussion regarding purpose and issues.</li> <li>• Collaboration Agreement: discussion regarding purpose and issues.</li> <li>• Business Cases: agreement of Business Cases for Office and Car Park</li> <li>• Legal advice: Nabarro to present to Committee when detail available.</li> <li>• Discussion on phasing of new hospital facilities and timing of business case</li> </ul>	<p style="text-align: center;">LG/MV</p> <p style="text-align: center;">LG</p> <p style="text-align: center;">TD/KM</p> <p style="text-align: center;">LG</p>
<b>Item 4</b>	<b>Strategic Estates Rationalisation Programme (SERP)</b>	
	<p>LG reported that PCT are pushing to see a Strategic Outline Case for the new LGH at their May Board meeting (30/5). This is critical issue in WHHT estate rationalisation.</p> <p>Site options appraisal process underway. Non-financial option scoring workshop on 20<sup>th</sup> April. NF asked that WHHT see the PCT Business case before it goes to the PCT Board. LG agreed and reminded that new approach was to secure best value for whole NHS, not just either WHHT or PCT.</p> <p>PCT new build proposal would be via a LIFTCo (Assemble). 25-30 year commitment from NHS. Option for refurbishment of existing building is to use Verulam. LG/ KM to bring an update to the June meeting.</p> <p>JF flagged need for WHHT to make decisions on where the major imaging equipment should be located. CT replacement in next 12-months. MRI in next 24-months. Co-location of these two is essential. Future direction with PCT needs to be economical and fit with acute proposals.</p>	<p style="text-align: center;">LG/KM</p>
<b>Item 5</b>	<b>Interim Strategies &amp; The Capacity Challenge</b>	
	<p>LG updated on progress with IHP. The key messages from C-Strat discussions were:</p> <ul style="list-style-type: none"> <li>• Willingness to investigate ambulatory pathways</li> <li>• Belief that there is a need for additional in-patient capacity, possibly delivered via:</li> <li>• Ambulatory care: 7-day working: Additional capacity</li> <li>• Relocation of additional surgical activity to SACH: possibly: Gynae Urology Breast, Ophthalmology</li> </ul> <p>JF noted that no clear consensus from clinicians on means of delivering capacity.</p>	

	<p>Watford Health Campus presented to C-Strat. Discussion regarding Mike van der Watt opportunities for Cardiology service.</p> <p>CG queried how C-Strat discussions could be included in Board Strategy discussion. JF supported continued NED participation in C-Strat, recognising significant demand on NED time, but felt it was important. May C-Strat to focus on Capacity and HH LGH.</p>	<b>KM/LG</b>
	<p>Capacity issues discussed. JF indicated that the additional in-patient capacity was likely to be needed but even if not required immediately would be usable to displace in-patient activity from Hemel or for alternative types of clinical usage.</p> <p>KM asked that JF/ KM have a discussion with Manny Lewis at WBC, REF Planning Application process. KM noted that we are only likely to get a 12-month permission, as has been achieved with the "Surge" ward created last year.</p> <p>JF indicated that WHHT were applying to PCT for transformation funding to deliver the proposed capacity works. Subject to outcome of the application, other capital works could be progressed.</p>	<b>KM/JF</b>
<b>Item 6</b>	<b>Estates Strategy</b>	
	<p>LG flagged that Estate Strategy needs a complete re-write. Recommendation is that we don't rewrite in full this year. Prepare an Exec Summary re-write this year, with a full review in following year.</p> <p>LG updated on developments in Estates Strategy. The following areas have changed: Compliance position: Sustainability issues: Composition of beds. Six-facet survey required with full survey of all buildings at c£100k indicated. Unfunded, but JF suggested transformation funding.</p> <p>The meeting AGREED the phased approach to re-writing the Estates Strategy.</p>	<b>LG</b> <b>All</b>
<b>Item 7</b>	<b>Any Other Business</b>	
	<p>Relationship Strategy: Relationships Strategy to be deferred to June Committee</p> <p>Board Strategy Day: CG flagged that the Trust Chair is expecting a Board Strategy Day. JF tested whether this should be before Summer break or after. Needs to link with FT application process. LR proposal is that this be held in September. A July Strategy Day may still be held to focus on FT and IBP Strategy.</p>	<b>PJ</b>  <b>LG</b>

<b>Item 8</b>	<b>Action Log from 3<sup>rd</sup> April 2012 Meeting</b>				
	<b>Issue</b>	<b>Action Agreed</b>	<b>Allocated</b>	<b>Lead</b>	<b>Status</b>
6.1	Maternity	Bring the Maternity Strategy to the May meeting	3 <sup>rd</sup> April	NF	Pending
6.2	Capacity	Agenda "Capacity" for May Meeting	3 <sup>rd</sup> April	LG/KM	Pending
6.3	Estates	Generate backlog progress reports and dashboard	7 <sup>th</sup> February	EF/LG	Pending
6.4	Campus	Circulate milestone summary programme	3 <sup>rd</sup> April	TD	Pending
6.5	Campus	Invite BAFO bidders to present at Committee.	3 <sup>rd</sup> April	KM	Pending
6.6	HH LGH	Update on progress/ issues to May/ June meeting	3 <sup>rd</sup> April	LG/KM	Pending
6.7	C-Strat	C-Strat in May to focus on Capacity and HH LGH.	3 <sup>rd</sup> April	LG/KM	Pending
6.8	Estates	Ask PCT for 6-facet survey transformation funding	3 <sup>rd</sup> April	LG	Pending
6.9	FT	Discuss timing of Board Strategy Days with LR	3 <sup>rd</sup> April	LG	Pending