

3 December 2021

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Sent via email only

Watford General Hospital Deputy Chief Executive's Office

Willow House Vicarage Road Watford Hertfordshire WD18 0HB

## Dear Sir Mike

Thank you for your letter of the 2 December which I have not yet received but have seen courtesy of local media this morning. I expect it will arrive in the post next week.

This is my understanding of what you said at PMQs on the 24 November:

The Prime Minister cheered all of my constituents up when he came to south-west Hertfordshire and said that we were going to have a new hospital. Sadly, even though the money is there, the local management of our trust have blocked it; they are going to refurbish Watford's hospital and not give us a brand-new hospital on a greenfield site, which is what we want. Will the Prime Minister meet me and some of my constituents to unblock this and tell the NHS that it needs to build a new hospital for Hemel Hempstead?

I acknowledge that building a new hospital 'for' Hemel Hempstead is not quite the same as building a new 'in' Hemel Hempstead, for which I apologise.

In your letter to me you say you have "for a long time now, supported a new hospital on a new site to serve the people of Watford, Hemel Hempstead, St Albans and other parts of West Hertfordshire equally". This too, though, is not the same as 'building a new hospital for Hemel Hempstead'.

As you know the Trust has been trying to secure funding for new and improved hospital facilities for our patients for many years. Most recently, in 2017 we submitted a strategic outline case making the case for a major investment in new emergency care facilities at Watford General as well as improvements to our other two sites. The estimated cost in (2017 prices) ranged from approximately £600m to £800m dependent on the exact option chosen and the amount of new build, both subject to further work at a later stage in the process. We were advised at that time by NHS England that this was unaffordable and asked to resubmit a revised strategic outline case for a scheme costing no more than £350m (in 2019 prices), approximately £410m including inflation. We did so, proposing a new clinical block at Watford to reprovide some, but not all of our clinical services at Watford, as well as some relatively modest investment to improve our hospitals at Hemel Hempstead and St Albans. We were always clear that this was not a full solution and that further investment would be required in the coming years.

In September 2019 the Prime Minister announced that the Trust would be one of "six new large hospital builds that are receiving funding to go ahead now". This was based on our 2019 SOC and a

<sup>1</sup> Health Infrastructure Plan (publishing.service.gov.uk)

figure of approximately £400m (including inflation) was quoted as having been allocated to our scheme; clearly not sufficient to build a whole new hospital, either on our existing sites or on a new site.

So, I believe it is misleading for you to say 'the money is there'.

As we have consistently communicated to stakeholders over the past 2 years, we are working to secure the necessary funding to allow more extensive improvements to our hospitals than can be achieved for the £400m funding that has been promised to date.

I know you have seen the letter we received from NHS E and the DHSC on this issue back in April of 2020, which we also published on our website. I provide a link below for ease of reference.

WHHT HIP Project Strategic Opts for OBC and MS Car Park Works 2.pdf (westhertshospitals.nhs.uk)

This letter gives the Trust permission to consider enhanced redevelopment options on the Watford General Hospital site, including a new build replacement of the Princess Michael of Kent main clinical block. It goes on to say:

"However, we would ask you to note that the adoption of this approach and the inclusion of options within the OBC that are in excess of the indicative envelope for the scheme of £400 million, should not be viewed as pre-judging a decision at OBC stage, and should therefore not be taken as an indication at this stage that a higher value scheme will be nationally affordable or supported".

To be absolutely clear, the Trust's ambition is for major new clinical facilities for emergency and specialist care services on the Watford General site and adjacent land at Watford Riverwell. Whilst some buildings could be retained for support accommodation, in our preferred option the only existing building that would be retained for clinical service delivery is the Acute Assessment Unit that was opened in 2009, which would receive a major upgrade to meet modern standards. To all intents and purpose therefore our proposals for emergency care are for a new hospital on the existing Watford Hospital site and neighbouring land. We do not wish to pursue a refurbishment option and will only do so if we are not successful in securing the funding needed for our preferred option.

It is also unfair to say that the Trust is 'blocking' a (by implication) agreed plan for a new hospital, on a new site (also by implication). No such plan has ever been agreed. Indeed, the plan has consistently been to redevelop on our existing sites as set out in our 2017 strategic outline case, our 2019 update and confirmed in October 2020 as the first stage in developing our outline business case.

I know that you do not support our plan to redevelop at Watford, however it is disingenuous to imply that we are blocking a plan that has never existed.

We stand by our view that the best route to achieving new hospital facilities for our patients and staff, as quickly as possible, is by major redevelopment at Watford General Hospital and improvements to our hospitals in Hemel Hempstead and St Albans.

It would be a crying shame if local differences of opinion get in the way of us securing funding for much needed and urgent improvement to our hospitals.

Thank you

Yours sincerely

Helen Brown Deputy Chief Executive

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