**TRUST BOARD – 26th January 2011**

Our Changing Hospitals - Progress Report

<table>
<thead>
<tr>
<th>PURPOSE:</th>
<th>To provide the Trust Board with a progress report on the Our Changing Hospitals programme, the Trust’s programme forming part of the Hertfordshire-wide DQHH Programme.</th>
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| PREVIOUSLY CONSIDERED BY: | Our Changing Hospital Programme Board  
Finance and Performance Committee |

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<th>IMPLICATIONS:</th>
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| Objective(s) to which issue relates: | Patient safety and clinical efficiency:  
➢ To consolidate acute services on to a single site  
➢ To improve the quality of all aspects of our service |
| Risk Issues: | Risks have been identified on individual projects and phases and these are being reviewed and managed at the Our Changing Hospitals Programme Board. |
| Financial: | The financial impact of any changes to the projects and any business cases are considered at the Programme Board. |
| HR: | At this stage staffing issues relate to the Lister Surgicentre and Maternity projects both due for completion in 2011. Detailed workforce planning is underway to support these specific projects and the Our Changing Hospitals programme. |
| Legal Issues: | None Identified |
| Equality Issues: | None Identified |

**RECOMMENDATIONS:**
The Board is asked to note the current position.

**DIRECTOR:** Director of Strategic Development  
**PRESENTED BY:** Director of Strategic Development  
**AUTHOR:** Assistant Director, Hospital Project Team  
**DATE:** 13th January 2011
1 Purpose

1.1 This paper provides an update to the Trust Board following the Trust’s Our Changing Hospitals Programme Board and the Finance and Performance Committee meetings in January 2011. The paper sets out the progress to date.

1.2 The OCH master programme continues to expand as more detailed tasks are included as the projects move through the project life cycle. An abridged version of the current programme is appended to this report.

2 DQHH Planned Developments

2.1 Phase 0 – Master Planning and Site Infrastructure

2.1.1 The second phase of the electrical works, is progressing well. The two new generator sets have been delivered and are in storage whilst the building works are being undertaken in the existing generator hall.

2.1.2 It is currently anticipated that the two new generators will be installed by the end of July 2011, in line with the revised programme. All contracts placed remain within the budgets approved in the FBC.

Combined Heat and Power Plant

2.1.3 Following submission of tenders at the end of November 2010, a detailed evaluation process has been completed and the Project Team has selected two candidates to be taken through to the Invitation to Competitive Dialogue Stage 2 of the selection process. The recommendation was approved at the Project Board meeting on the 15th December 2010 and reported to the January OCH Programme Board.

2.1.4 During Stage 2 the Project Team will work with each candidate in order to obtain the optimum technical and financial solution. This will result in the candidates submitting their final bids by the 14th March 2011. These dates are in line with the agreed programme.

2.1.5 The FBC is currently being developed, with a view to being submitting for approval in April 2011.

2.2 Phase 1 – ISTC/Lister Surgicentre

2.2.1 Carillion, the building contractor, are reporting that they remain three weeks behind schedule on the building works. Carillion’s recovery programme is being monitored by Currie and Brown, the Independent Tester and has been drafted in association with all the contractors currently working within the new building. Currie and Brown attend the site at least weekly to assess progress against the schedule and report back to Clinicenta Hertfordshire Limited on the agreed level of progress. The latest review of the programme targets realignment with the original construction programme in February with building handover still scheduled for the original date of 15th March 2011.

2.2.2 The Operational Group is continuing to plan for the reconfiguration of the Trust’s surgical services post the Surgicentre go live date and is split into three workstreams; theatres, beds configuration and the referral pathway process.
2.2.3 The new theatres schedules for the reconfigured surgical service have been finalised and this is now being used to complete the job planning process for individual medical staff.

2.2.4 The staff consultation officially closed on 4th January 2011. The exception to this is the Ophthalmology service. Once Clinicenta have finalised their requirements the consultation for this group of staff can recommence. As part of the consultation process over 250 individual meetings have been held with affected staff and work/location preferences are being matched against both the Surgicentre and Trust requirements during January. This process will be completed by the end of January, giving the staff certainty on their future roles within the organisations. Attention of the workforce group will be then focused on pre employment checks and recruitment to any vacancies identified and staff training.

2.2.5 Both the Trust and Clinicenta have commenced the development of a transition plan to ensure the smooth transfer of services not only into the Surgicentre but also the changes planned as a result of the reconfiguration of surgery between the Trust’s sites.

2.3 Phase 2 – Maternity Services

2.3.1 The confirmed date for overall completion of construction remains at 11 October 2011, one day later than the original programme.

2.3.2 Phase 1 works have been completed and administration, delivery, neo-natal and theatres services have now moved into the new building. The moves were successfully carried out without any adverse impact on services and operations. These moves mean that the vacated areas can be re-modelled and refurbished as a part of Phase 2.

2.3.3 Phase 2 and Day Assessment Unit (DAU) re-modelling and refurbishment works commenced on 20 December 2010.

2.3.4 Commissioning meetings are being held regularly in preparation for the move back to the refurbished areas in summer 2011.

2.3.5 All other non-construction workstreams are working according to the project plan and timescales therein. Work is being carried out by the project team to review and reconfirm the FBC financial assumptions and plans.

2.4 Phase 3 – Car Parking

2.4.1 Works on site are progressing with the erection of the steel frame underway and the second installation team is due to begin on site mid January so the speed of the erection will increase in line with programme. The contractor is reporting the MSCP is on budget and on programme.

2.4.2 The S.278 North Road/Graveley Road junction improvement design is being progressed. To mitigate any potential timing issues the MSCP project team have now informally agreed with planners that junction improvement works can be deferred from the MSCP completion date if necessary. A formal application request will be submitted if this amendment is required. Therefore highways works will not impact on MSCP programme.

2.4.3 The staff use of St.Georges has increased further during December and activity still being monitored including ways to promote use of this facility.
2.4.4 The EEDA Evaluat8 bid has been successful and therefore subsidised higher specification fast charge points will be installed in the MSCP together with an additional small cost saving on the MSCP budget.

2.4.5 Further work has been undertaken on the demographics in connection with the Travel Plan for Lister and other hospital sites to inform the Green Travel Plan project.

2.4.6 Indicative design options for the potential main entrance reception have been progressed and initial budget costs are currently being sought. A site visit to inspect retail opportunities was made to a neighbouring Trust in December.

2.5 Phase 4/5 – Acute Services Consolidation

2.5.1 The Department of Health continue the process of reviewing the Phase 4 OBC which was approved by the Trust Board, PCT and SHA in September 2010. Once they have completed their assessment they will forward to HM Treasury for further review. Queries raised by the DH have been responded to rapidly to prevent any further delay.

2.5.2 As part of the autumn comprehensive spending review HM Treasury have requested that the economic appraisal of major capital investments are strengthened. In particular all major new build schemes must now produce a net present value analysis to demonstrate that the expected benefits of the investment outweigh the costs. This has resulted in a need to monetise where possible all benefits associated with the capital investment. The Trust has completed this analysis.

2.5.3 Following approval of the ward 11A business case preparatory surveys have commenced, an application for the loan to fund the scheme will be completed in February.

2.5.4 Following the appointment of our P21+ partner for the emergency department scheme the development of the full business case is underway. This will see consolidation of the emergency department in autumn 2013 providing the programme is not subjected to further delay.

2.5.5 Following joint work with the commissioners a satisfactory resolution has been achieved in respect of the outstanding issues around the emergency department design. We will continue to work very closely with the commissioners as the design is refined and developed to include the necessary detail to reach a Guaranteed Maximum Price (GMP) within the timescales outlined.

2.5.6 Following approval by the Trust Board of the mortuary scheme no further work will be progressed on this project until the Phase 4 OBC is approved.

2.6 PCT Led DQHH Developments

2.6.1 New QEII Hospital (Local General Hospital)

The QEII site was chosen as the Local General Hospital site, by the PCT in 2008. This development has also been subject to the DH review but work has now recommenced to develop the OBC for submission to the PCT Board in early 2011.

2.6.2 Cancer Satellite

NHS Hertfordshire has agreed to the Trust’s request to revise the timetable for providing a full response to the commissioner service requirements for the provision of Satellite Radiotherapy services in northern Hertfordshire and south Bedfordshire. The process will now commence in Spring 2011. The next meeting of the Trust’s Cancer Satellite Project Board is due to be held in February 2011.
3 Recommendations

3.1 The Trust Board is asked to note the progress report.

Wendy Scarr
Assistant Director, Hospital Project Team