

To:	Trust Board
From:	Louise Naylor, Project Manager
Date:	6 October 2011
CQC regulation:	

Title:	EMERGENCY DEPARTMENT CAPITAL RECONFIGURATION BRIEFING
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Author/Responsible Director:

Suzanne Hinchliffe

Purpose of the Report:

The purpose of the report is to brief the Trust Board on the current position of the Emergency Department Capital Reconfiguration and to seek endorsement to proceed to the next stage of the project

The Report is provided to the Board for:

Decision		Discussion	
Assurance		Endorsement	■

Summary / Key Points:

- £10 million of Transformational Funding has been awarded to the Emergency Department to redesign and refurbish the department
- The funding has been allocated to the project within a short timescale and through transformational funding therefore developing unconventionally from the traditional Trust capital application process
- A high level feasibility exercise of the layout of the department was undertaken to support the transformational bid
- The procurement route to deliver the refurbishment has been identified however detailed design will occur prior to the appointment of a supply chain partner
- The project structure is in place and being managed utilising the Prince 2 methodology
- The next stage of the project is detailed design and development of the Outline Business Case (OBC)
- The timescales will involve detailed planning for the project with refurbishment occurring throughout 2013
- The project will work collaboratively with the respective Transformational projects and Site Reconfiguration Board to ensure a seamless planning process

Recommendations:

The Trust Board is being asked to endorse the next stage of the project and to be assured that the project is following due process in order to progress to a detailed design, construction and delivery

Previously considered at another corporate UHL Committee ?

Endorsed by the Executive Team, 27th September 2011

Strategic Risk Register**Performance KPIs year to date****Resource Implications (eg Financial, HR)**

£10 million of revenue funding provided 2011/2012. Capital programme to incorporate ED capital expenditure

Assurance Implications

UHL have committed to deliver a refurbished and transformed Emergency Department that will improve the emergency process. The improvement will be reliant on a whole hospital transformational change alongside the internal ED process changes and environmental alterations

Patient and Public Involvement (PPI) Implications

The ED Capital Reconfiguration will be discussed with the respective Divisional patient representatives. A paper for information will be issued to the JHOSC

Equality Impact**Information exempt from Disclosure****Requirement for further review ?**

Review and approval of the Outline Business Case

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT TO: TRUST BOARD

REPORT FROM: LOUISE NAYLOR, PROJECT MANAGER

DATE: 6th OCTOBER 2011

SUBJECT: EMERGENCY DEPARTMENT CAPITAL RECONFIGURATION BRIEFING

1.0 INTRODUCTION

1.1 The aim of the paper is to brief the Trust Board on the current position of the Emergency Department Capital Reconfiguration and to seek endorsement to proceed to the next stage of the project.

2.0 PROGRESS TO DATE

- 2.1 A paper was presented to the Trust Board in January 2011 detailing at a high level the transformational change required to the emergency flow and Emergency Department (ED) in order to improve patient experience, efficiencies, productivity and performance.
- 2.2 The paper identified the requirement to improve the physical ED environment whilst increasing ED capacity to support new ways of working.
- 2.3 High level feasibility studies were undertaken to ascertain the impact and cost of such environmental changes that informed the development of a bid to secure transformational funding where the Trust were successful in receiving £10 million of funding for the ED refurbishment.
- 2.4 As a result of the funding being allocated to the project within a short timescale the project has developed unconventionally from the traditional Trust capital application process.
- 2.5 The Project Board is now established with a dedicated Project Manager managing the project utilising Prince 2 Project Management methodology.
- 2.6 The procurement route required to deliver the scheme has been identified early on in the process as Procure 21 + to ensure the project progresses the necessary detail to utilise the route. The procurement

route has been endorsed by the Project Board, Divisional Board and Commercial Executive.

3.0 CURRENT POSITION

- 3.1 The Emergency Flow Model of Care (MOC) across UHL is developing facilitated by a recent workshop hosted by the Acute Division. The workshop is expected to enable the delivery of transformational change across Divisions in order to improve patient flow within the emergency process and ultimately maximise the patient experience prior to the completion of the ED refurbishment.
- 3.2 The design is currently developed at a high level (1:200) within an identified footprint. In order to develop the project to enable appointment of a Procure 21+ partner, further design is required to modify the internal layouts in order to achieve the internal patient flows within and through the department that will accommodate any significant change to working practices from the MOC work.

4.0 NEXT STAGE

- 4.1 The architects, Gelder and Kitchen have been appointed to develop the design and will commence this process in October 2011, working with the clinical team from ED, Facilities and the Project Manager.
- 4.2 The project team are working to develop the transitional plans and the delivery of an Outline Business Case in December 2011 following the development of the design.
- 4.3 The procurement and subsequent appointment of the Procure 21+ partner will then commence in the last quarter of 2011/12.
- 4.4 The appointed partner will then work with the project team for a period of months in 2012 to develop the technical detail required to construct the department with construction estimated to commence last quarter 2012/13 (this is subject to minor amendments following appointment of the Procure 21+ partner).

5.0 CONCLUSION

- 5.1 The initial project development and funding has been secured through the unconventional route of a transformational bid instead of the traditional internal Trust process.
- 5.2 The project detail requires development in order to progress the key milestones and approvals – OBC development and approval, Procure 21+ Partner appointment, FBC development and approval, Construction.
- 5.3 The project team will work in partnership with the Site Reconfiguration Project Board and relevant Transformational Programmes to ensure

transparency and collaboration on project planning across the organisation.

6.0 RECOMMENDATIONS

- 6.1 The Trust Board are being asked to endorse the next stage of the project and to be assured that the project is following due process in order to progress to a detailed design, construction and delivery.