

UHL Reconfiguration Update

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Paper C

Purpose of report:

This paper is for:	Description	Select (X)
Decision	To formally receive a report and approve its recommendations OR a particular course of action	x
Discussion	To discuss, in depth, a report noting its implications without formally approving a recommendation or action	X
Assurance	To assure the Board that systems and processes are in place, or to advise a gap along with treatment plan	
Noting	For noting without the need for discussion	

Previous consideration:

Meeting	Date	Please clarify the purpose of the paper to that meeting using the categories above
Reconfiguration Committee	23/04/2021	Decision
Executive Board - ESB	04/05/2021	Decision
Trust Board Committee		
Trust Board		

Context

This paper provides the Trust Board with an update of progress since the last meeting, as well as key decisions required / issues arising, including:

- New Hospital Programme (NHP) Regulator Letter
- Progress with Approvals of the Submitted Business Cases
- EMCHC Update
- Risk Update
- Governance and Reporting

Questions

1. What are the key issues that the Reconfiguration Programme is facing this month?

Conclusion

New Hospital Programme (NHP) Regulator Letter

1. Following completion of the forty round table events across the New Hospital Programme, we received a letter on 8th April detailing the next steps for the NHP.
2. There were some key messages around funding, phasing, design and digital investment etcetera which are referred to in paragraphs 1-4 of the main report.

3. We are waiting for a date for the CEO and SRO to meet with Natalie Forest and Craig McWilliam to discuss the impacts of this for our scheme.

Progress with Approvals of the Submitted Business Cases - Programme Management Offices & Decontamination Case

4. The PMO office case was approved on the 27th April.
5. We are still waiting to hear the date of the National Joint Investment Committee which will hear the Decontamination Case.

EMCHC Update

6. As the Phase 1 of the Children's Hospital draws to completion, with the East Midlands Congenital Heart Centre (EMCHC) Service ready to move into the New Kensington EMCHC builds, it is time to reflect on the journey that the EMCHC team have travelled to get to this point.
7. Having been successful in retaining the EMCHC service in Leicester in 2017, the NHSE Standards required UHL to provide co-located Children's services to be able to continue to provide the internationally renowned EMCHC service. Hence the journey began to secure the long term future of not only EMCHC, but also Children's Services.
8. All elements of the move are now finalised with the specialty teams ready to move. More information on the project can be found in paragraphs 7-10 of the main report.

Risk Update

9. We agreed at the last Trust Board that we would present a focused review of risk on a quarterly basis.
10. We have had no new risks this month for escalation, and therefore have not presented a separate risk paper.

Governance and Reporting

11. The individual project highlight reports are available upon request. Any issues highlighted for escalation are either highlighted in this paper or as a separate paper and agenda item.

Input Sought

1. **Note** the content of this paper.
2. **Note** that feedback on the timings of projects in the New Hospital Programme will be provided at the end of April, and that guidance on standardisation will be provided at the end of May.
3. **Note that** the PMO office business case is now approved and that the decontamination case is now ready to be presented to the next Joint Investment Committee (date awaited).

For Reference:

This report relates to the following UHL quality and supporting priorities:

Equality Impact As

1. Quality priorities

Safe, surgery and procedures	[Yes]
Improved Cancer pathways	[Yes]
Streamlined emergency care	[Yes]
Better care pathways	[Yes]
Ward accreditation	[Yes]

2. Supporting priorities:

People strategy implementation	[Yes]
Investment in sustainable Estate and reconfiguration	[Yes]
e-Hospital	[Yes]
Embedded research, training and education	[Yes]
Embed innovation in recovery and renewal	[Yes]
Sustainable finances	[Yes]

3. Assessment and Patient and Public Involvement considerations:

- What was the outcome of your Equality Impact Assessment (EIA)? N/A
- Briefly describe the Patient and Public Involvement (PPI) activities undertaken in relation to this report, or confirm that none were required. Part of individual projects.
- How did the outcome of the EIA influence your Patient and Public Involvement? Part of individual projects.
- If an EIA was not carried out, what was the rationale for this decision? N/A at this stage

4. Risk and Assurance

Risk Reference:

5. Does this paper reference a risk event?	Select (X)	Risk Description:
Strategic: Does this link to a Principal Risk on the BAF?		PR 7 – Reconfiguration of estate
Organisational: Does this link to an Operational/Corporate Risk on Datix Register		
New Risk identified in paper: What type and description ?		
None		

6. Scheduled date for the **next paper** on this topic: [June 2021]

7. Executive Summaries should not exceed **5 sides** [My paper does comply]

UHL Reconfiguration Programme – Full Report

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT TO: TRUST BOARD
DATE: 06 MAY 2021
REPORT FROM: Nicky Topham & Justin Hammond
SUBJECT: UHL Reconfiguration Programme Update

This report provides a summary and overview of the current programme status, and is a reflection of recent discussions at the reconfiguration programme committee and project boards during April.

New Hospital Programme (NHP) Regulator Letter

1. Following completion of the forty round table events across the New Hospital Programme, we received a letter on 8th April detailing the next steps for the NHP.
2. Key messages are:

Phasing

- Whilst the Government has committed that all 40 new projects will be built by 2030, the funding available in the period to FY24/25 is a constraint on how many projects can start building prior to confirmation of further funding post April 2025. The projects within the programme are being reviewed to understand how ready they are to be built and how complementary these schemes are to the developing NHP programmatic benefits and approaches.
- The prioritisation process will be communicated by the end of April.

Design & Commercial

- The current Mott Macdonald review of the first eight schemes will inform what help define a robust preferred affordable option for each scheme.
- Opportunities for 'design synergy' between the schemes will be explored as well as designing a commercial strategy that delivers value for money. It will not be possible for schemes to go to market outside of this centrally managed route.

Digital Investment

- The NHP will be working with NHSX to define a level of investment that is expected.

Funding

- The release of funding to develop the business cases will be in line with the prioritisation process and tied to project gateway reviews.
- Funding for early enabling works will be supported where its affordable, proportionate to the scheme's scale and timing, delivers significant benefit in terms of speed of delivery or cost/risk reduction and where the investment is "solution agnostic", e.g. any early business case would need to show that the works would be necessary in any solution or that they can be reversed for no (or negligible) loss (e.g. any development land bought could be sold if not required).

Design guidance – intelligent hospitals

- Draft guidance will be provided to inform the approach to design across all projects, with the aim of maximising the project benefits around the use of repeatable and standardised design, modern methods of construction, digital and net zero carbon.
3. We are waiting for a date for the CEO and SRO to meet with Natalie Forest and Craig McWilliam to discuss the impacts of this for our scheme.

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7. Having been successful in retaining the EMCHC service in Leicester in 2017, the NHSE Standards required UHL to provide co-located Children's services to be able to continue to provide the internationally renowned EMCHC service. Hence the journey began to secure the long term future of not only EMCHC, but also Children's Services.
8. The finished new build and the refurbished Children's Cardiac Ward, Outpatients and PICU reflect the enormity of the work that has taken place, combined with creativity and passion, the new areas look truly transformed and what our children deserve. As part of every new build handover, all elements of the build must be checked as safe for patients. This includes testing the new water supply into the

building. The water samples cannot be signed off by our Infection Prevention team as this point and further cleaning processes are being carried out. With the ongoing work and further testing, a new move date has been set incurring a delay of 2 weeks which takes the move to 20-23 May 2021. The project and operational teams are continue the commissioning programme for the new area as planned with only the move of the services delayed.

9. All elements of the move are now finalised with the specialty teams ready to move. There has been enormous energy from all the staff to get to this exciting point. Staff orientation sessions have taken place. We have succeeded in our staff investment, equipment procurement and the installation of state of the art theatre and catheter lab equipment. The Charitable funds enhancements provide an exciting environment with areas specific for teenagers, children and parents. The Leicester Children's Hospital Appeal is in the final stretch, with just over £800,000 left to raise against its target of £7.5M. They are redoubling their fundraising efforts for the month prior to the official opening to ensure every supporter in our community has an opportunity to be part of this legacy project.

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Input Sought

The RPTB is requested to:

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