

Hillingdon Hospitals NHS Foundation Trust

Report to the Hillingdon External Services Select Committee (HESSC) on plans for the redevelopment of Hillingdon Hospital

1. Why change is needed

The current Hillingdon Hospital is housed in old buildings with parts of the estate built in the 1930s as emergency wartime accommodation. Some of the older wards have become unsafe and have been closed to protect patients and staff.

81% of the hospital building will require major repair or replacement soon. Works have been undertaken and more are planned to enable the continued provision of services safely in the short term. If all the necessary repairs required were undertaken it would cost over £211m (the second most expensive maintenance bill for a hospital trust in England) and in many cases, would not provide a long term solution.

The layout of the current site can make it hard for patients to get around and the condition of buildings can make the experience of being in hospital more difficult. The Trust's most recent Care Quality Commission report (2018) highlighted issues of patient safety, dignity and patient experience which have directly resulted from the outdated estate.

The site layout and state of disrepair also makes it difficult for staff to do their jobs as efficiently and effectively as they would like.

These issues contribute to the Trust's financial deficit and hinder its mission to provide high quality, safe and compassionate care to improve the health and wellbeing of the people served by the hospital.

Given the above, there is an urgent need for significant investment to redevelop Hillingdon Hospital. Without this, the estate will continue to deteriorate until the delivery of modern healthcare on the site is no longer possible.

Investment objectives have been developed for the programme and can be found at **Appendix 1**.

2. NHS process required for new hospital developments

In September 2019, Hillingdon Hospital was announced as one of twenty-one hospitals to receive a share of £100m government seed funding to develop a business case for infrastructure investment.

Since then, good progress has been made on plans for the redevelopment of Hillingdon Hospital, in line with capital investment guidance for the NHS. To access the necessary funding to redevelop the hospital, the process set out by HM Treasury and the NHS's main regulator NHS England/Improvement must be followed to show that all options have been considered and the best option selected. The three stages are:

- Stage 1: Strategic Outline Case - sets out why a change is needed, reviews the options and sets out the preferred way forward.

- Stage 2: Outline Business Case – demonstrates that the chosen option is affordable and provides value for money. Planning permission from the local authority is required at this stage.
- Stage 3: Full Business Case - the final stage which provides detail on procurement and delivery. At the conclusion of this, contracts can be signed and the project transitions into delivery.

To inform the Strategic Outline Case, a Gateway Review was undertaken by NHSE/I in summer 2019 to assess the state of readiness. This identified that the most urgent step was to develop a vision and strategy for the clinical content for the new facility which would then allow the Trust to prepare a Strategic Outline Case covering all feasible options.

The Trust refreshed its clinical services strategy during autumn/winter 2019/20 and it was approved by the Trust Board in April 2020. The process was led by clinical staff and involved local stakeholders and patients. The strategy was developed in the context of the NHS Long Term Plan (2019), North West London Integrated Care Partnership and Hillingdon Health and Care Partnership plans. It involves continued provision of the current range of services at Hillingdon Hospital with greater integration of local health and care services through close working with partners in primary care, community care and social services as well as with other acute trusts. Demand and capacity modelling was undertaken to assess future requirements at the hospital and was then used to inform the clinical content and the development of options for the Strategic Outline Case.

On 28 July 2020, the Trust Board approved the submission of the draft Strategic Outline Case to NHS England/Improvement for the redevelopment of Hillingdon Hospital, with a full rebuild on the Hillingdon Hospital site identified as the preferred way forward. The draft Strategic Outline Case has now been submitted to NHS England/Improvement for review and more detailed planning will start to develop the Outline Business Case.

By working together as a local health and care system, over the last year the redevelopment of Hillingdon Hospital has become one of the forerunner schemes in the NHS Health Infrastructure Plan with the expectation that this will be one of the first hospitals to be completed. All local partners are committed to maintaining this position and to progressing at pace to ensure that the opportunity to make a real difference to the provision of healthcare to local people is realised.

3. The appraisal of options

During the initial stages of developing the Strategic Outline Case, the potential different options to address the issues with the estate were considered and the following **long list** was identified:

- a) A part refurbishment and part rebuild of the current hospital
- b) A full redevelopment of Hillingdon Hospital on the current site (new build)
- c) A full redevelopment of Hillingdon Hospital on the Brunel University London (BUL) site (new build)
- d) A full redevelopment of Hillingdon Hospital on the Mount Vernon Hospital (MVH) site (new build), with the current MVH remaining as-is
- e) No Hillingdon Hospital

These options were evaluated to understand which ones would be the most feasible to take forward to a shortlist.

Option d) involving a new build on the MVH site was not taken forward to the shortlist as there is not enough space on the site to fit all of the services that would need to be provided and given its location in the north side of the borough, many patients in the existing catchment area would be at a disadvantage.

Option e) involving the closure of Hillingdon Hospital was not taken forward to the shortlist as it would cause significant disruption to the local healthcare system and is not consistent with the strategy of the wider North West London Integrated Care System.

The **shortlist** of options then evaluated was therefore:

- a) A part refurbishment and part rebuild of the current hospital
- b) A full redevelopment of Hillingdon Hospital on the current site (new build)
- c) A full redevelopment on the BUL site (new build)

A Business As Usual (no change) option was also considered as this is required as part of the business case process as a comparator.

An evaluation of these options was undertaken against agreed qualitative and financial criteria to identify a preferred way forward. The qualitative assessment was undertaken by a panel including hospital clinicians and key local stakeholders such as Healthwatch Hillingdon, Hillingdon CCG, NW London Integrated Care System, Hillingdon Local Authority, Brunel University London and Central and NW London Community Healthcare Trust. Feedback from the Trust's Council of Governors, as well as patient panels fed into the evidence that was used to inform the qualitative assessment of options.

The Business as Usual option was considered unviable as it would ultimately lead to the closure of the hospital.

Option a) involving part refurbishment and part rebuild of the current hospital, has higher capital costs (at £1.2b), fewer benefits and would take longer to deliver (13 years) than the full redevelopment (new build) options.

Option b) involving a new build on the current Hillingdon Hospital site was considered favourable to option c) involving a new build on the BUL site as:

- It has a shorter time to delivery – 5 years compared with 8 years for the BUL site option, therefore benefits can be realised sooner
- It has much lower risks to delivery. A new build on the BUL site presents a significant delivery risk due to the need to seek planning permission on greenbelt land when there is a viable brownfield site alternative. In addition, mitigations to flood risks on the BUL site would require development as part of the design. Finally, the Trust does not own the land on the BUL site and there is no agreed way forward on the land transaction
- It has lower capital costs - £805m compared with £888m for the BUL site option

A new build on the Hillingdon Hospital site was therefore identified as the preferred way forward as it performed best of both the financial and qualitative appraisal.

4. The preferred way forward

The preferred way forward involves a re-build of Hillingdon Hospital with c.569 beds, measuring 68,200 m² on the current site. This is an increase from the current c.510 beds, which will give the hospital the capacity required (in conjunction with development of integrated community and primary care services) to meet forecast population growth and deliver the clinical services strategy that was developed in the context of national and local strategies. Subject to the final actual size and design of the hospital, up to 47,000m² of land could be freed up for alternative uses including key worker accommodation and other health and social care services. The Trust will engage with partners in primary, community and social care during the Outline Business Case stage to review the use of this land.

The scheme has a provisional capital cost of £805m and an expected completion date of September 2025.

The specifics above reflect the position based on work undertaken to date and may be subject to alteration as more detailed planning is progressed. It should also be noted that activity at Mount Vernon Hospital is not affected by this scheme.

It is planned to provide the same range of services that are currently available at the hospital, but in a high quality, 21st century state of the art hospital and in designing this, the Trust will work with system partners to improve the integration of care across Hillingdon. Reconfiguration of the site in the preferred way forward will provide potential opportunities for further integrated development of the site with primary, community and social care.

Other key design issues that will be addressed in the Outline Business Case include future pandemic planning, ensuring lessons learned are reflected in plans and that the new hospital has flexible space and emergency preparedness built in.

A summary of the key benefits is provided below:

- A more attractive environment for staff and patients, improving their experience
- Full compliance with the latest safety standards
- Better connectivity between departments making it easier for patients to move through the hospital
- Greater adoption of digital technologies to enhance patient care and safety
- Improved privacy with significantly more side rooms
- A more efficient building that is environmentally friendly
- Inclusion of areas to benefit the wider community, including green spaces
- Flexibility to adapt facilities in response to potential future pandemics
- Improved ability to recruit and retain a high calibre workforce
- Potential for other health and social care facilities to be provided on the site in the future to create a health and social care hub
- Sufficient capacity for the future and further expansion potential

In taking forward the preferred option the Trust will work closely with Brunel University London and will explore opportunities to develop further the relationship, particularly in relation to the education and development of health care professionals.

A new build on the Hillingdon Hospital site can be completed alongside the continued delivery of existing services. Site enabling works would be undertaken in advance including decommissioning of old buildings and safe site clearance. This would ensure that once the main works commence, the existing hospital is unaffected and can safely provide services to patients. It is proposed to set up a haul road to ensure construction traffic minimises disruption. Construction traffic would also be managed to avoid congestion build up in the local area. Carefully engineered procedures would be adopted to ensure the noise, vibration and dust is contained and minimised.

The preferred way forward has the full support of the North West London Integrated Care System and North West London CCGs.

5. Next steps

Subject to approval of the Strategic Outline Case by regulators, the scheme will progress to Outline Business Case stage, during which a shortlist of options will be considered that includes the full rebuild on the current site (the preferred way forward), alongside Business As Usual and Do Minimum options as mandated by the business case process. For the preferred way forward, options will be considered around the phasing and procurement route. It is planned to submit the Outline Business case to regulators for approval in April 2021 with a view to seeking approval by July 2021.

From August 2020, the Trust will be engaging further with the community, patients and stakeholders to seek feedback, test thinking and develop plans further (see section 7). The Trust will remain open to considering any new options for the redevelopment of the hospital that were not considered at Strategic Outline Case stage, should these emerge.

6. Involving the public

As there is no intention to change the range of services offered or the site of the hospital, it is not currently planned to undertake a formal public consultation exercise. However, it is planned to undertake extensive engagement with the public and staff on the Trust's plans and to involve them, alongside the HESSC and other interested parties, in many aspects of the proposal including the design.

A communications and engagement plan has been developed outlining the approach to sharing information with, and seeking views from, staff, patients, residents and stakeholders as plans progress. The Trust will work collaboratively with Hillingdon CCG and Hillingdon Health and Care Partners to access existing communications channels and ensure joined up messaging.

During the Strategic Outline Case stage, the Trust has worked with its Governors and patient panels (both adults and young people) and has engaged with Healthwatch throughout. This has informed the assessment of options.

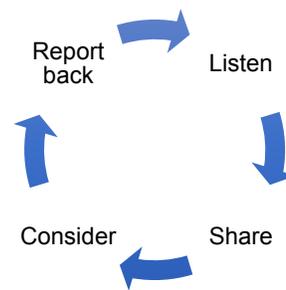
The public website for the redevelopment, launched on 4th August 2020, includes information on the process and initial plans. It also provides a feedback form to enable the Trust to understand early levels of support and interest and receive suggestions and questions from the public. Social media activity has been undertaken and contact has been made with community groups, places of worship, councillors, council officials, MPs and residents' associations. In addition, a conversation has begun using the 'Next Door' neighbourhood app

and feedback has been sought from the 500 Hillingdon residents recruited to the North West London Citizen Panel run by the CCGs.

From August 2020 onwards, the focus will be on reaching out across the community and listening to what people have to say. The Covid-19 pandemic creates some constraints as some of the traditional methods of community engagement, such as town hall events or feedback booths in the high street, cannot safely be undertaken. However, the Trust is working with community groups across the borough, as well as with Hillingdon CCG to ensure that there is effective engagement across all corners of the community, taking full advantage of digital opportunities. The plan recognises the importance of reaching out to people, including those people that will not be able to engage digitally, as well as ensuring clear feedback routes.

From September 2020 onwards, it is planned to establish a number of patient panels linked to the Clinical Working Groups that are driving the design of the new hospital and to strengthen further the lay representation in the governance arrangements for the programme.

The approach to feedback is simple, but essential. Every piece of feedback will be shared with, and considered by, the project team. A summary of the feedback received and how it has helped to shape plans will subsequently be shared on the website, used to update FAQs and will appear in the monthly newsletter.



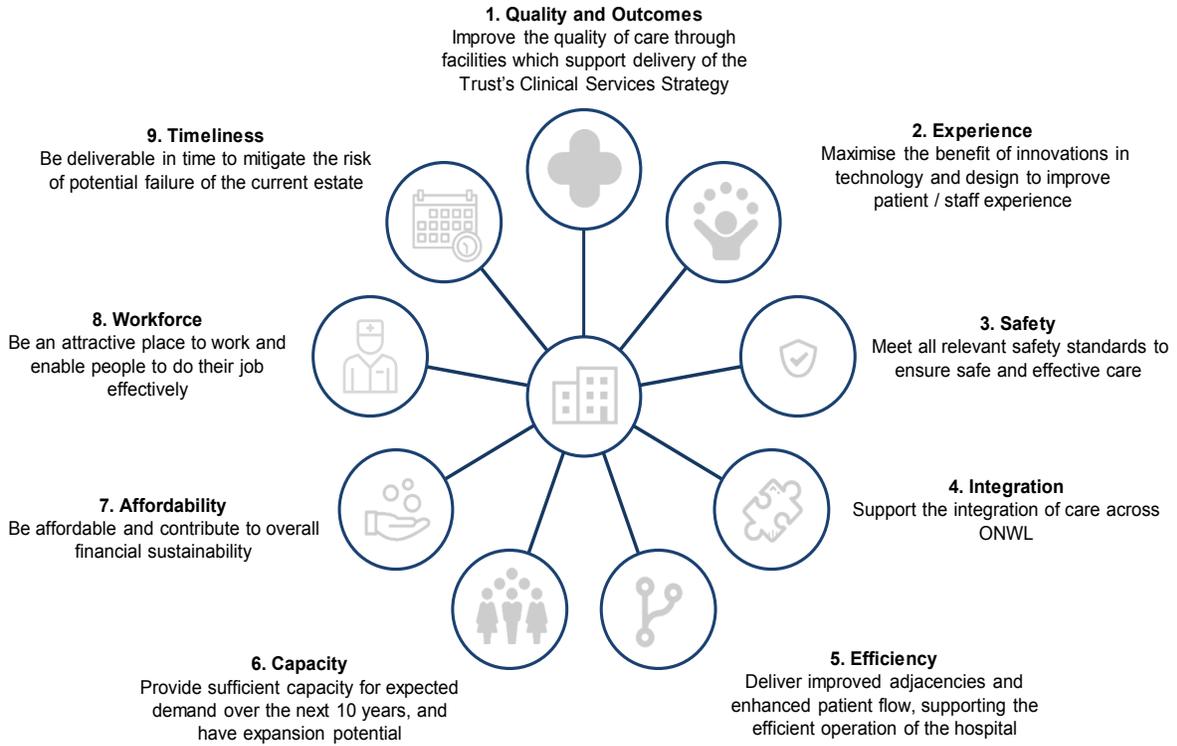
The engagement that will be undertaken over the coming months with different audiences is outlined at **Appendix 2**. Suggestions from the committee of further local opportunities are welcomed.

7. Recommendations

The HESSC is asked to:

- Note the progress to date on the development of proposed plans for the redevelopment of Hillingdon Hospital, and provide feedback on the proposed redevelopment plans and the approach to involving the public in the development of these
- Provide feedback on how the HESSC would like to be involved in the development of plans and kept informed of progress

Appendix 1 – Investment Objectives for redevelopment of Hillingdon Hospital



Appendix 2 – Planned engagement summary August 2020 – July 2021 (phase 1)

Audience	Channel	Summary
Public	Social media Website Engagement Print and online media Resident associations Forum for local residents Schools	<ul style="list-style-type: none"> • Invite to engagement sessions online and via social media • Outreach work to include seldom heard groups and those with protected characteristics • Review opportunities for face to face engagement • Launch website • Feedback form on website • Press releases • Journalist sit downs • Updates to all resident associations • Explore option for a schools competition • Updates on 'Next Door' platform • Information for PTA newsletters/Facebook groups • Specific approach to residents in surrounding roads
Patients	Patient panels Appointment letters Waiting room information	<ul style="list-style-type: none"> • Run further patient panels, virtually in the first instance • Explore whether information can be added to patient appointment letters – short paragraph and link to website on reverse • Posters and pop ups in waiting areas • Explore whether information can be added to page when you log in to hospital wifi or in waiting room for virtual appointments • Explore adding information to welcome to hospital digi screen
Healthwatch, lay reps	Hillingdon Healthwatch Hospital membership NW London Citizen Panel	<ul style="list-style-type: none"> • Early meetings to share planned approach and gain feedback • Expressions of interest to help develop public materials • Updates and questions via citizen panel
Community, voluntary, faith and third sector organisations	Newsletters Engagement	<ul style="list-style-type: none"> • Provide information for newsletters and websites • Request invites to engagement events and opportunities to speak to those groups • Virtual briefings

Audience	Channel	Summary
Hospital staff	Team Bulletin Chief exec blog Intranet Screensavers Staff rooms	<ul style="list-style-type: none"> • Regular updates on progress through blog and bulletin • Q&A sessions • Posters in staff rooms • Use of informal communications • Display in canteens – to be explored
Hospital Governors and NEDs	Newsletters Meetings	<ul style="list-style-type: none"> • Regular updates and progress reports • Provision of information to share with their own local networks • Opportunities to assist with engagement
GPs and their surgery staff	Network and federation meetings Practice Manager forums	<ul style="list-style-type: none"> • Information sent to all GPs in core catchment area • Clear and concise messages in case patients ask them questions • Provide detail to go on their websites
Political stakeholders – MPs, Councillors, Assembly Members	Meetings HESSC JHOSC Health and Wellbeing Board	<ul style="list-style-type: none"> • Regular updates to HESSC and involvement of members in development of plans as required • Update to JHOSC as appropriate • Regular updates to local politicians • Request invite to their ward forums/community meetings • Request feedback on engagement opportunities
NHS stakeholders	HCCP CCGs Meetings & updates	<ul style="list-style-type: none"> • Share progress and plans as part of assurance process including Redevelopment Partnership Board • Meeting with CCG engagement leads to discuss opportunities • Support conversations around Integrated Care System opportunities in new hospital.