

Hillingdon Hospital Redevelopment

Outline Business Case Development

Update to the Hillingdon External Services Select Committee (HESSC)

28 April 2021



The Hillingdon Hospitals 
NHS Foundation Trust

1. Introduction and context – Jason Seez, Deputy CEO / Director of Strategy / SRO for the redevelopment programme

2. Progress update – Rachel Benton, Programme Director

3. Clinical model – Professor Abbas Khakoo, Clinical Strategy Lead & Caroline Morison, Managing Director, Hillingdon Health and Care Partners

4. Design development and planning application – Tahir Ahmed, Director of Estates and Facilities

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To deliver a new hospital, we must follow the HM Treasury Green Book business case process

- The Trust is working towards delivering an **estates solution** to operational and clinical issues with the current **Hillingdon Hospital** estate, and enabling the Trust to make the most of modern design and technology.
- We must follow the **HM Treasury's Green Book business case process** to justify the significant public investment in the estate and to show that all options have been considered and the best option selected.
- The Green Book has three stages:

SOC

- The **Strategic Outline Case** confirms the strategic context of the proposal, makes a **robust case for change** and uses **stakeholder input** to develop a proposed way forward. Approval of this rests with the **Trust Board**.
- Support is required from the **main Clinical Commissioning Group (CCG) and Integrated Care System (ICS)** who will in turn require that the proposed way forward is aligned to the needs of the wider health and social care system. **NHS England /Improvement (NHSE/I) and the Department of Health and Social Care (DHSC)** will provide feedback and approve the SOC and release of funding required to progress the OBC.

OBC

- The **Outline Business Case** provides the **detailed architectural design** of the solution, demonstrates value for money and adds detail to how the solution will be delivered, e.g. procurement and commercial approaches. Planning discussions with the **local authority** occur at this stage.
- In addition to the SOC requirements of approval from the Trust Board, main CCG and ICS, the OBC requires approval of **NHSE/I**, as well as sign-off of the procurement documentation by **DHSC**. **Treasury** approval may be required at this point.

FBC

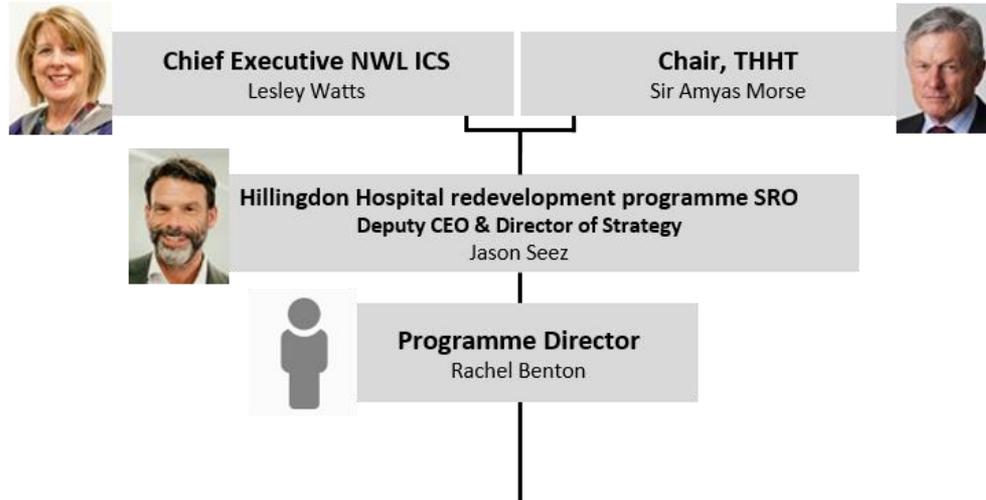
- The **Full Business Case** adds further detail to how the solution will be managed and delivered, including running the necessary **procurement process(es)**. At the conclusion of this, contracts can be signed and the project transitions into delivery
- Again Trust Board approval is needed, and **NHSE/I and DHSC approval** is required for the signing of contracts. **Treasury** approval is required to release the required funding.

- The Trust met with the HESSC on 8th September 2020 to provide an update on progress with the development of proposed plans for the redevelopment of Hillingdon Hospital. Feedback was provided to the HESSC on the proposed redevelopment plans and the approach to involving the public in the development of these.
- It was confirmed that the new hospital will 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 that in designing this, the Trust will continue to work with system partners to improve the integration of care across Hillingdon.
- At this meeting, the HESSC expressed full support for the redevelopment as well as for the Trust's engagement strategy.
- Following the meeting, the Trust received a letter of support from the Leader of the Council confirming that the requirement for public consultation had not been triggered. This was submitted with the Strategic Outline Case for the redevelopment of the Hillingdon Hospital estate to NHS England / Improvement.
- A summary of the draft Strategic Outline Case was also considered at the Redevelopment Partnership Board on 22 July 2020, which involved a broad range of local stakeholders including the main commissioners, North West London STP, local acute Trusts, London Ambulance Service, Healthwatch, and key local partner organisations such as Brunel University London and Heathrow Airport. The proposed approach to the redevelopment was endorsed by the Partnership Board.
- Since last meeting with the HESSC, we have made strides in progressing plans for the redevelopment of the Hillingdon Hospital estate by working together as a health and care system.

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After many years of trying to get a new hospital for the people of Hillingdon, huge strides have been made over recent months by working together as a health and care system.

- The Integrated Care System Lead is the Accountable Officer for the programme and the redevelopment of Hillingdon Hospital is a top priority for the North West London Integrated Care System.
- We are taking forward the development of the business case for the redevelopment of Hillingdon Hospital in partnership with the local system.



Redevelopment Workstream leads							
Clinical	Workforce	Estates	Finance & Procurement	Digital	Equipping	Strategy (Trust)	Strategy (Estates)
Abbas Khakoo	Susan Nwanze	Tahir Ahmed	David Meikle	Robbie Cline	Tina Benson	Neetu Sharma	Paulina Zakrzewska
							

The Strategic Outline Case for the redevelopment of the Hillingdon Hospital estate has been approved in writing by regulators and by Department of Health and Social Care Ministers (26 February 2021)



- This follows approval from the Department of Health and Social Care and NHS England / Improvement Joint Investment Committee of the Strategic Outline Case on 5th October 2020, which was subject to a number of conditions being met at Outline Business Case stage with key examples including:
 - The development of a balanced revenue plan
 - Demonstrating how the scheme supports NHS sustainability and carbon reduction goals
 - Ensuring consideration of Modern Methods of Construction to support carbon reductions
 - Demonstrating that the clinical model underpinning the redevelopment plan aligns with the North West London STP clinical and estates strategies
 - Development of a Trust estates strategy
 - Demonstrating how activity to calculate the required bed numbers has been modelled and therefore how the hospital has been right sized.
- The approval received from Ministers reiterates these approval conditions.
- We are now working through implementing these conditions as part of the development of the Outline Business Case.
- The preferred way forward remains to re-build Hillingdon Hospital on the current hospital site.

We have entered into a Collaboration Agreement with the Department of Health and Social Care and NHS England / Improvement New Hospital Programme

- Investment in new hospitals is now being run as a 'New Hospital Programme' managed centrally by the Department of Health and Social Care and NHS England / Improvement jointly through the **New Hospital Programme** team.
- In December 2020, we received a copy of a **Collaboration Agreement** from the New Hospital Programme team, which set out the principles and ways of working that will exist between the New Hospital Programme function and NHS Trusts. The Trust signed the Collaboration Agreement in January 2021.
- As part of this new collaborative approach to hospital redevelopment, we are **fully committed to working with the New Hospital Programme team** to ensure the successful delivery of the programme and **to share information and learning** that could help to support other schemes that are less advanced in the process.
- Accordingly, we are **continuing to engage extensively with the New Hospital Programme team** as plans for the new hospital progress.
- A New Hospital Programme **design and cost review** of the scheme to date recently concluded.
- Feedback on the outcome of the review was received on 9 April 2021 and **good progress is being made with implementing the recommendations of the review**.

Since last meeting with the HESSC, significant progress has been made on the development of the Outline Business Case, working closely with our local partners

- **The Board has agreed the Schedule of Accommodation for the new hospital**
 - This maps out the space requirements for all clinical and non-clinical areas to be incorporated in the new Hillingdon Hospital
 - This reflects the Needs Case for the new hospital which builds on work undertaken at Strategic Outline Case stage and reflects extensive engagement with clinical teams and partners including the North West London Integrated Care System, Hillingdon Health and Care Partners, the London Borough of Hillingdon, and the Greater London Authority
- **The Trust Board has also agreed the 1:500 design layout of the new hospital, for discussion with Hillingdon Town Planners**
 - These were informed by the Schedule of Accommodation, extensive engagement with clinical and operational teams and national guidance including, for example, new standards for single room provision
 - The plans were reviewed by the New Hospital Programme team and feedback received in April 2021 will inform the more detailed design stage
- **A decant and enabling works plan has been developed and was approved by the Hospitals Redevelopment Programme Board on 24th March 2021**
- **Mobilisation for the more detailed 1:200 scale design stage is now underway**
 - We have developed a detailed programme plan for the 1:200 design stage, which builds on the learnings from the 1:500 design process
- Work is continuing to **further progress the development of revenue and wider economic benefits of the scheme**, to support the **development of an updated affordability position**
- The initial focus of our internal and external communications campaign was **raising awareness of the project** and we are now preparing to **share designs with stakeholders**

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During 2019 the Trust developed a Clinical Services Strategy, which has informed the development of the clinical/functional brief

The Clinical Services Strategy

- The Trust's Clinical Services Strategy was signed off by all partners including Social Care in April 2020.
- As discussed with the HESSC in September 2020, the new hospital will 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. In designing this, the Trust will continue to work with system partners to improve the integration of care across Hillingdon.
- The key elements of the Clinical Services Strategy are:
 - a) The implementation of a fully integrated health and care system, Hillingdon Health and Care Partners, with a focus on prevention and strengthening primary, community and social care.
 - b) Closer collaboration with North West London Trusts to better network secondary and tertiary services.
 - c) Combining the power of education and research, therapies, and digital technology to transform health and social care.
- The successful delivery of the Clinical Services Strategy will rely on building on existing health and care workstreams linking into the hospital and increasingly within the framework of Hillingdon Health and Care Partners (for example, but not limited to, frailty assessments, same day emergency care, earlier safe discharge of inpatients not requiring ongoing hospital care, children's safeguarding, adult and child mental health) and better develop others such as end of life care and elective care.
- This will lead to a more joined up health and social care system within the Borough so that more high quality and safe care will be provided outside of a hospital setting, whilst improving the quality of emergency and elective hospital care for those who need it.

- Proactive, preventative care will be delivered by our Hillingdon neighbourhood teams: embedding population health information to support proactive management of physical and mental health and wellbeing, reducing variation in outcomes and access.
- The design of the new hospital, supported by digital and workforce transformation and a significant expansion in emergency and elective diagnostic imaging, will allow the correct sizing and co-location of services to facilitate patient and staff flow and to help delivery of new models of care, the key of which are as follows:

Urgent and emergency care:

- Greater use of same day emergency care and ambulatory care, as well as a dedicated frailty unit in the Urgent and Emergency Care floor, supported by community health and social care, will significantly reduce hospital admissions.

Inpatient care:

- Early discharge planning, provision of community support with integrated social care, and provision of appropriate step-down services including intermediate care will all together reduce length of stay for admitted patients.
- A bed base based on 85% occupancy will allow more efficient bed use, and minimum 70% single rooms will allow better patient experience and better infection prevention and control.

Critical care:

- Expansion and co-location with medical high dependency to allow flexing of critical care numbers.

Elective care:

- More one stop shop including same day diagnostics, and access to digital, including virtual consultations, along with more community based clinics with access to specialist advice and key diagnostics, all taken together will allow less hospital based new and follow up consultations.

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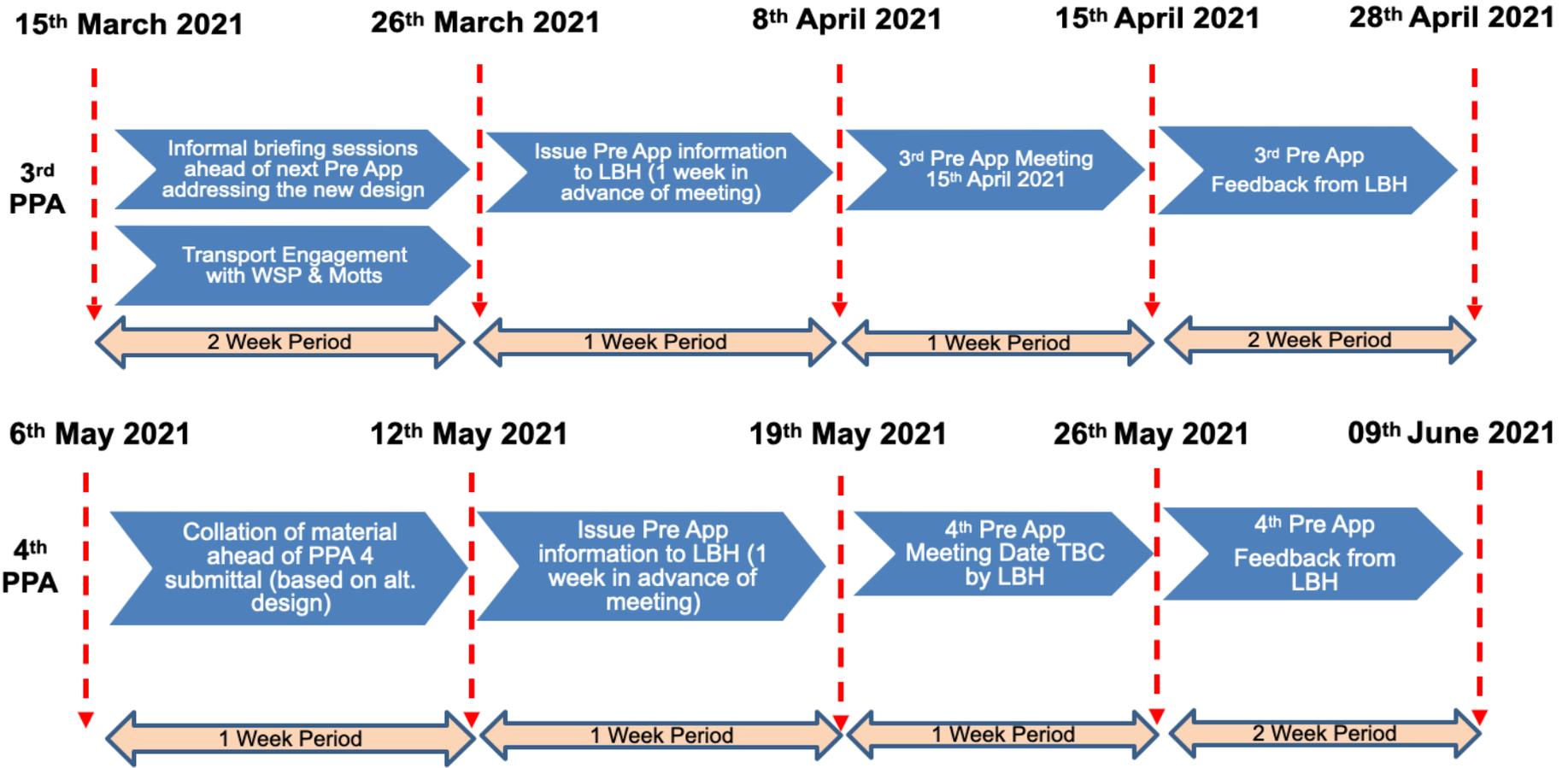
The design for the new hospital has been developed through extensive engagement with Trust stakeholders

- 1:500 scale design layouts have been developed based on the approved schedule of accommodation and through extensive engagement with Trust stakeholders to ensure that they fully align with the clinical brief. They were agreed by the Trust Board on 6 April 202 for discussion with Hillingdon Town Planners.
- The designs have been further informed by national guidance, including new standards around single room provision.
- The designs have responded to comments from the London Borough of Hillingdon planners that were raised as part of pre-application discussions and a formal planning performance agreement.
- Collaborative meetings have also taken place between the Trust, the London Borough of Hillingdon and the Greater London Authority in relation to the designs for the new hospital with designs refreshed to reflect feedback received.
- The Greater London Authority has advised that the replacement hospital is strongly supported in line with London Plan Policies S1 and S2 and Good Growth Objective GG1.
- The latest iterations of the 1:500 scale designs were provided to the Department of Health and Social Care and NHS England / Improvement New Hospital Programme team as part of their design and cost review. The Trust is working to address feedback from the review.
- The design stage is now moving from RIBA stage 1 in to RIBA stage 2 for the more detailed 1:200 scale design phase in collaboration with our clinical and operation working groups.

Engagement with the London Borough of Hillingdon Planning Department is continuing ahead of submitting the planning application in September 2021



- Set out below is a summary of the planning engagement process:



Following this:

- Trust approvals:** September 2021; **Planning submittal:** September 2021; **16 week planning determination period:** 31st December 2021

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We are refining the financial model to ensure that the new hospital is affordable

- Key revenue components of the business case include:
 - **Cost of capital** (Public Dividend Capital (PDC) and depreciation)
 - **Financial opportunities (benefits)** from redevelopment
 - Avoided and reduced **depreciation charges**
- PDC represents the Department of Health's equity interest in assets in the NHS, which NHS Trusts have to generate a **return on of 3.5%**
- The required capital of the redevelopment can create a **cost pressure** that has to be matched by financial opportunities and benefits of new ways of working and by reduced capital charges on assets no longer in use.
- In addition, the affordable evaluation will be supplemented by an assessment of **system-wide economic impacts**

Mitigations to improve affordability

- **Capital costs** – continually assessed through the business case process to assure the Trust Board and regulators that the capital required is optimised.
- **Benefits** – these will also be tested with regulators and need to be set in the context of the Trust's baseline Cost Improvement Programme (CIP) and financial position
- **Land receipts** – confirmed land sales will be included and reduce the overall capital required
- **Additional mitigations** – additional potential mitigations to support financial affordability need to be explored e.g. impairment / revaluation of asset on day 1, PDC sensitivities, stretch benefits and other potential structural factors

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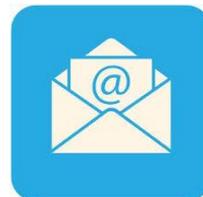
- Phase one refers to the communications and engagement activity undertaken since the Trust Board approved the submission of the draft Strategic Outline Case
- This activity covers the five months from late July 2020 until December 2020
- The core objectives of this phase were:
 - To development clear and robust communication and engagement plans
 - To build relationships externally and internally
 - To create core channels of communication specific to the redevelopment programme
 - To begin raising awareness of the Trust plans
 - To begin involvement of the public and staff in shaping the plans



6 webinars



50 people recruited to the new Public Participation Forum



6 newsletters/updates with 650 subscribers



Community engagement activity with resident associations, community groups, schools, place of worship and patient groups



Staff engagement through existing Trust channels



Over 620 survey responses



Over 7000 visits to our microsite



35 tweets
52 retweets



26 posts
108 shares
Reached 48,000 people



11 posts
237 likes



15 posts
234 likes

- Phase two communication and engagement activity will begin in May 2021 and continue through the remainder of the Outline Business Case development.
- There will be three core objectives:
 - To build enthusiasm about the rebuild of Hillingdon Hospital
 - To update on clinical and planning progress made to date
 - To encourage feedback and involvement in the next stage of planning
- As with early work this will reach all our audiences:
 - Internal (staff, governors, NEDs, membership)
 - Public & patients
 - Stakeholders

April: Preparation

May: Set expectations

June - July: Exhibition live

All

- Website and social media
- Newsletter
- Public exhibition
- Advertising
- Regular feedback reports
- Online exhibition
- Video of exhibition
- Media activity

Public & patient

- Public Participation Forums
- Letters to local residents
- Public webinars
- Community engagement – places of worships, RAs, Healthwatch, schools, community groups etc.
- Public workshops
- Translations
- Possible design competitions

Stakeholders

- Scrutiny meetings
- Partner updates
- Briefings to political stakeholders
- HHCP Board
- HWBB
- NW London Primary care bulletin
- ICS exec

Internal

- Staff webinars
- E-news
- Team brief
- In-hospital display (tbc)
- Governor's involvement session
- Members news
- Screensavers

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