



HEALTH & WELLBEING BOARD

Title:	St George's Hospital Redevelopment Update
Board Lead:	Dr Gurdev Saini, Havering CCG
Report Author and contact details:	Alan Steward Chief Operating Officer, Havering CCG Alan.Steward@Haveringccg.nhs.uk 01708 574918

The subject matter of this report deals with the following priorities of the Health and Wellbeing Strategy

- Priority 1: Early help for vulnerable people
- X Priority 2: Improved identification and support for people with dementia
- Priority 3: Earlier detection of cancer
- Priority 4: Tackling obesity
- X Priority 5: Better integrated care for the 'frail elderly' population
- Priority 6: Better integrated care for vulnerable children
- X Priority 7: Reducing avoidable hospital admissions
- X Priority 8: Improve the quality of services to ensure that patient experience and long-term health outcomes are the best they can be

SUMMARY

The report updates the Health and Wellbeing Board on the progress of the redevelopment of the St George's site.

The 12 week consultation exercise on the redevelopment plans closed on 12 May 2013 and the consultation responses have been reviewed and analysed. This report summarises the main findings of the consultation exercise, the CCG's proposed response

and next steps. This will be communicated to local stakeholders directly and through the media.

Following the submission of the strategic outline case (SOC), work has focused on developing the business cases for submission to NHS England and NHS Property Services Ltd.

The aim is to have the Outline Business Case by August / September 2013. Four work streams have been established to deliver this – Estates; GP Services; Service Model for Centre of Excellence; and Communications and Consultation – each with detailed project plans. Project support is now provided through the North East London Commissioning Support Unit (NELCSU).

The St George's Steering Group has revised its governance so that there is a wider range of stakeholders at a six weekly steering group meeting which includes representatives from Havering Council, NHS England, NHS Property Services Ltd and the Havering CCG Patient Engagement Reference Forum. Fortnightly meetings of a Delivery Board will continue to undertake the detailed work and this will be accountable through the lead clinical director and chief operating officer to the Governing Body.

RECOMMENDATIONS

The Health and Wellbeing Board is asked to note the findings of the consultation and the CCG's response and support the next steps in developing the Outline Business Case.

REPORT DETAIL

1.0 Purpose of the report

1.1 This report advises the Health and Wellbeing Board of the outcomes of the St George's consultation, proposed response and next steps.

2.0 Background

2.1 A strategic outline case (SOC) for the redevelopment of the St George's site was developed and approved by the CCG and NHS North East London and the City (NELC) PCT Cluster Board in 2012/ 3. This was submitted to NHS London at the end of March 2013.

2.2 The site is 11.9 hectares (29.3 acres) and is owned by the NHS. Most of it is unused and over half has never been built on. The CCG would require around 10% of the site (subject to analysis of the space requirements) for any of the proposed options. The sale of the remaining land, now owned by NHS Property Services Ltd, would raise enough to fund the redevelopment.

Health and Wellbeing Board, 10 July 2013

2.3 The exact approval process required by NHS England and NHS Property Services and the use of the capital receipt from the sale remains unclear. The CCG continues to liaise closely with NHS England and NHS Property Services so that it will meet any requirements for the business case and the use of the capital receipt.

2.4 The aim is to develop an enhanced primary care service that will serve local residents; a centre of excellence for older people, with a multi-disciplinary team led by local GPs providing care tailored to individual needs, in purpose-built facilities that will help to keep older people well and active and reduce the need for hospital admittance.

3.0 Report

3.1 The 12 week consultation exercise on the redevelopment plans closed on 12 May 2013. A full report on the consultation is available on the CCG website [he](#), as well as the CCG's response.

3.2 The consultation exercise used extensive promotion to engage with local communities and stakeholders including:

- Documents and publicity on the Havering CCG website
- Media releases and advert
- Distribution of the consultation document to local stakeholders, including the Council, MPs, local health providers, GP practices, voluntary and community groups and local schools
- Havering Council Overview and Scrutiny Committee – presentations and Q&As
- Havering Health and Wellbeing Board discussion
- Drop-in sessions at Hornchurch (14 March) and Romford (2 April) libraries
- Public meeting at Hornchurch Library (1 May)

3.3 Response to consultation

Total number of responses: 127

- Questionnaires (printed and emailed): 108
- Letter/email responses: 19

People who engaged at drop-ins and/or attended meetings: over 200

- Drop-in session in Hornchurch Library, 14 March: around 100 people engaged
- Drop-in session in Romford Central Library, 2 April: around 50 engaged
- Public meeting in Hornchurch Library, 1 May: around 60 attended

Website downloads: 364

- Consultation document: 219
- Questionnaire: 145

The detailed analysis of the responses has been undertaken and shows general support for the CCG's proposals to create a centre of excellence for older people on part of the St George's site.

3.4 Local stakeholders and residents also gave some excellent suggestions to help improve our proposals – ranging from recognising some of the history behind the

old hospital and its links with the RAF, looking at the size of the new facility, to making it as easy to access as possible – particularly for older people.

- 3.5 The CCG considered the report at its governing body meeting on 26 June. It agreed to take the suggestions on board for what a new health facility for Havering residents will actually look like in terms of the services it provides. The proposed centre of excellence would include integrated health, community and social care services for frail elderly residents together with a GP practice and an on-site centre offering specialist tests and clinics such as ultrasound, screening and blood tests.
- 3.6 The results of the consultation are being promoted widely through the local media and with local stakeholders.
- 3.7 The next step in developing the plan is to have an Outline Business Case completed by September 2013. This will be submitted to NHS England and NHS Property Services for approval. The CCG has established 4 work streams to deliver this:

Primary care

- Develop and agree the enhanced primary care service model.
- Establish decision making process for primary care commissioning with NHS England.
- Engage with local practices to gauge interest and identify issues.

Service Model for Centre of Excellence for Older People

- Develop and agree the clinical service model for centre of excellence for older people
- Hold workshops to establish options for the clinical model involving key stakeholders
- Undertake option appraisal including contractual option, affordability and value for money

Estates/ Commercial

- Establish decision making framework within NHS Property Services Ltd
- Develop outline design options based upon proposed service specifications
- Agree commercial options for development of the site and associated costs
- Agree procurement framework and contractual options for the development

Communications and Consultation

- Ensure outcome of public consultation is used to inform development of OBC
- Provide feedback to stakeholders on the consultation outcome
- Agree and deliver further consultation and engagement activities as the case develops.

- 3.8 The CCG is working closely with relevant stakeholders and partners in all the work streams but particularly on developing the service model for the Centre for Excellence for Older People. This work stream will take account of the major initiatives that the CCG and the Council are commissioning to improve care closer to people's homes. Some examples include the development of community services and integrated care, developments at King George's hospital, the development of the Community Treatment teams and Integrated Case Management. It will also consider lessons from previous local developments and

good practice from other parts of the country. Once the service model is developed there will be wider engagement with other partners and local people.

- 3.9 The CCG has also established a St George's Steering Group so that there is a wider range of stakeholders at a six weekly meeting to consider issues and progress and advise the CCG. This includes Havering Council, Havering Healthwatch, Havering Patient Engagement Reference Forum, NHS England and NHS Property Services.

IMPLICATIONS AND RISKS

Financial implications and risks:

The key risk attached to this project is that the capital receipt is not available to the CCG to resource the redevelopment. In the meantime the CCG is liaising closely with NHS Property Services and local stakeholders to ensure that the capital receipt is available to support investment in the Havering health economy.

Legal implications and risks:

There are no immediate legal implications.

Human Resources implications and risks:

There are no immediate HR implications.

Equalities implications and risks:

An outline Equality Impact Assessment has been conducted that shows no negative equality impacts from the proposed development. The equalities implications will be kept under review as the more detailed plans are developed.

BACKGROUND PAPERS

- First Class Health and Social Care at St George's Havering: Strategic Outline Case
- St George's Hospital: a centre of excellence for older people in Havering: Consultation document
- Report of the public consultation on the redevelopment of St George's Hospital, Havering
- Havering CCG Governing Body report on St George's Hospital Update