



Royal United Hospitals Bath
NHS Foundation Trust

Health Infrastructure Plan - RUH HIP2

BaNES Children, Adults Health
and Wellbeing Panel
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Everyone
Working Matters
Together
Making a
Difference

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Contents

- Health Infrastructure Plan Overview
- Programme Plan Overview
- A Once in a Generation Opportunity
- Clinical Vision
- Investment Objectives and Critical Success Factors
- Cancer Centre – first phase of our HIP2
- Plans for Further Engagement

Health Infrastructure Plan 2 (HIP2)

“The biggest, boldest, hospital building programme in a generation ... [initiating] more than 40 new hospital projects across the country” (SoS)

Second phase announced October 2019 (HIP2) – a rolling five-year programme of investment in health infrastructure, encompassing:

- capital to build new hospitals,
- modernise our primary care estate,
- invest in new diagnostics and technology, and
- help eradicate critical safety issues in the NHS estate

Health Infrastructure Plan 2 (HIP2)

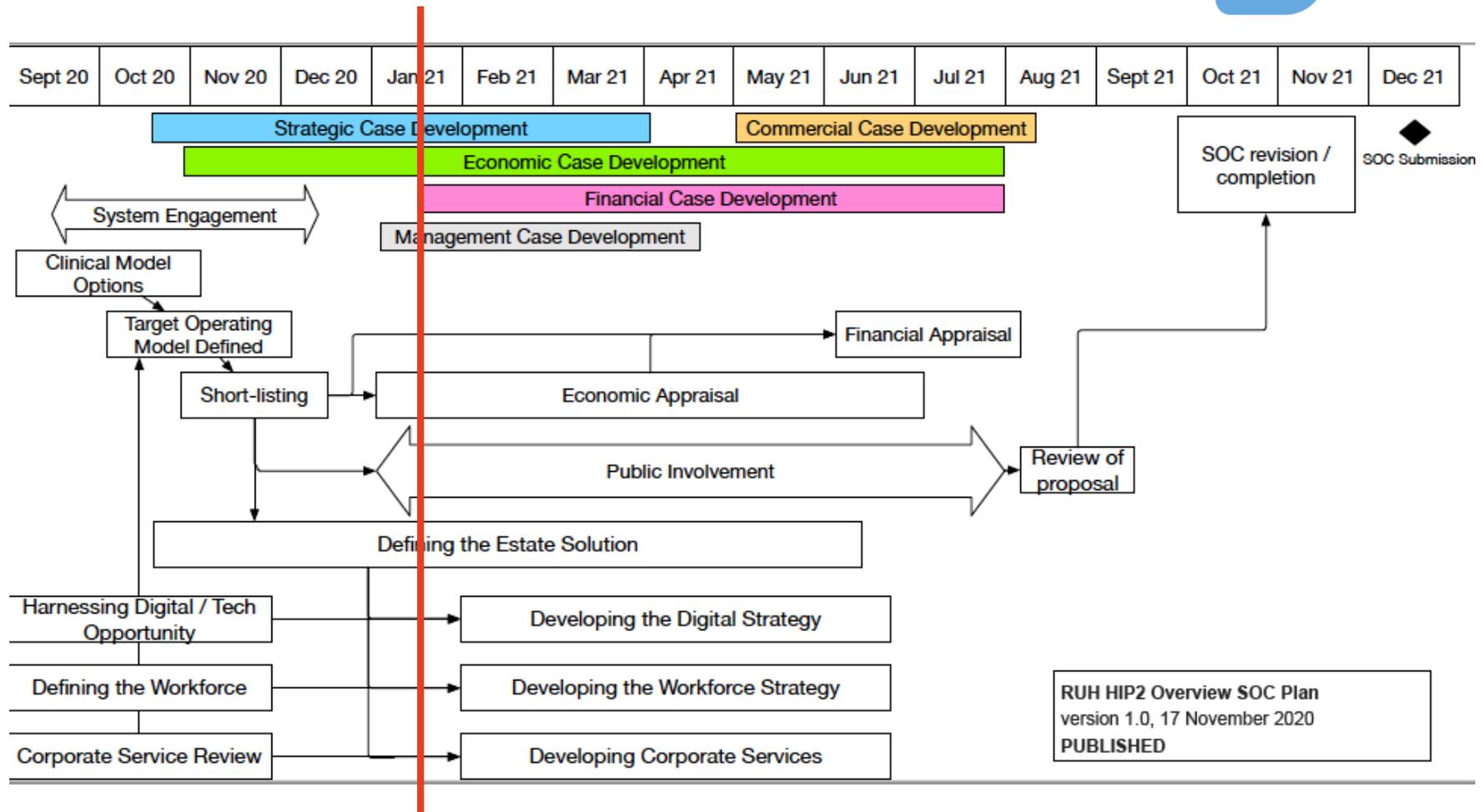
RUH is one of 21 schemes selected as part of the HIP2 programme nationally

The other HIP2 trusts within the South West are:

- Dorset Healthcare University NHS FT
- Northern Devon Healthcare NHS Trust
- Royal Cornwall Hospitals NHS Trust
- Taunton and Somerset NHS FT
- Torbay and South Devon NHS FT
- University Hospitals Plymouth NHS Trust

This is a once in a generation investment and an opportunity we are excited to seize

Programme Plan Overview



A Once in a Generation Opportunity

- We are working with our system partners to ensure that the plans we develop will be fit for the future of health and care for our population
- We need to submit a Strategic Outline Case (SOC) by December 2021 and are keen to go faster if possible to improve the chance of securing the funding for the local system
- HIP2 will introduce the much needed capital investment (up to £450m) to the local economy
- HIP2 is a catalyst for change across the local health and care system - we are challenged and excited by the need to consider what the future model of care will look like
- HIP2 is not simply about buildings – it demands an integrated approach to future service delivery
- We would like your help to seize this opportunity while we can

Our HIP2 ambition:

“Achieving better outcomes and experiences for patients and families through flexible integrated care using innovations that work, and supporting ageing well”

Clinical Vision and Model of Care

The following has been developed with input from partners including the BaNES Integrated Care Alliance:

- 1 Proactive, preventative care that plans to maintain health and wellbeing, continuously improve clinical outcomes, and reduces healthcare inequalities for our population at all stages of life, supported by the right infrastructure at a health and wellbeing campus
- 2 A population health approach – supported by data and analytics in a transformed digital and IT infrastructure – to intervene early and prevent deterioration, with patient-held data and interaction through apps as the default, improving the experience of healthcare for our population
- 3 Full integration across the system (primary care, social care) to meet the breadth of needs, based on a stratified model of population health
- 4 These principles start from the beginning of each person’s life, evident in maternity and children’s services equally, to drive optimal outcomes and ideal experience in interacting with the Trust
- 5 An optimized urgent/responsive service for individuals who are ‘off plan’ – hot clinics, frailty ambulatory pathways – and a modern emergency department when needed that delivers the safest care in a crisis

Investment Objectives

The following **Investment Objectives** and **Critical Success Factors** have been developed with input from the BaNES Integrated Care Alliance and will be used to evaluate options and inform the optimal solution:

1. Underpin achievement of our clinical transformation objectives, and hence improve patient outcomes & experience: providing care closer to home through integrated local models of care, reducing health inequalities, contributing to delivery of the Trust Strategy, BSW Strategy and NHS Long-Term Plan commitments by 2030 or earlier.
2. Provide a feasible solution for resolving operational challenges, including:
 - a) Clinical quality and risk, guided by RUH's strategy and working with all other elements, working towards delivering a CQC rated 'Outstanding' service across our entire clinical portfolio and addressing unwarranted variation seen in GIRFT findings and health inequalities throughout the system.
 - b) Operational pressures, meeting statutory access standards for Planned and Unplanned Care by 2030 through a robust year-round service, rationalising and reducing demand on acute services through new clinical models by 2030.
 - c) Workforce, be an outstanding place to work by developing flexible, sustainable new staffing models that promote equality, inclusion and diversity. The Trust will excel in staff engagement.
 - d) Financial performance, making a positive contribution to Trust financial sustainability and supporting BSW ICS financial sustainability, by 2030.
 - e) Backlog maintenance, Significant reduction in 'High' and 'Significant' Backlog by 2030.
3. Develop a sustainable estate solution: providing flexible capacity to serve our population for the next 25 years and beyond, adapting to future changes in service delivery; building a Net Carbon Zero estates footprint by 2030.



Critical Success Factors

Strategic fit

- Enable delivery of excellent patient care incl. care closer to home & reduced health inequalities through integrated local models of care, realising the BSW Strategy and NHS Long-Term Plan commitments
- Provide a feasible solution for addressing and resolving operational challenges
- Develop a sustainable estate solution with flexible capacity to serve population into the future and adapt to future changes in service delivery.

Value for money

- Maximise broader economic benefit for Bath and North East Somerset, including:
 - Efficient use of healthcare resources across the system
 - Strengthening of local economy through creation of local jobs during the development of the site
 - Support for local skills development by providing careers for staff working at the site
 - Improved population health and wellbeing outcomes
 - Attraction of inwards investment to further transformation of health and care delivery

Supplier capacity and capability

- Demonstrate the solution is deliverable, there are likely to be suppliers in the market able to provide the services required to deliver and that this is likely to be attractive to them

Potential affordability

- Demonstrate affordability against the £450m capital allocation, releasing additional funding where possible (e.g. through sale/ development of excess land)
- Enabling platforms can be funded

Potential achievability

- Level of patient and public behaviour change is deliverable
- Acceptable to and supported by patients, staff and the public, place (B&NES), region (BSW STP), regulators (NHSE/I), and local political leaders
- Robust plan to maintain safety and continuity of services through redevelopment
- Enables progress at pace, meeting or ahead of key milestones set out by RUH, regulators (NHSE/I) and DHSC HIP2 programme



Cancer Centre – first HIP2 deliverable

The Cancer Centre will be the first phase of the RUH HIP2 programme:

- £51m (£42m of HIP2 funding)
- Site already cleared
- Subject to final approval, construction mobilisation due to commence in February 2021
- Opening due 2023
- 7,000m² of new build providing high quality cancer services, improving the experience for both patients and staff



Subject to agreement from the national programme, the intention is also to fund an
Alongside Midwifery Unit via HIP2

Plans for further engagement

- We are working in conjunction with local system comms and engagement teams, developing our plans together and we plan to co-host a lot of the meetings and engagements going forward – this plan is for the system, not just about hospitals
- We are developing an engagement plan that breaks activity out by stakeholder audience. Audiences will include local government scrutiny, staff, general public, patients and their reps, local councillors, GPs, MPs, RUH FT Governors and members, local charities and local health system partners. For all stakeholders, we are keen that this is not just about communicating to them, but actively listening to their views and involving them in the development of the plans
- We are planning a series of online ‘workshops’ for patients and other key stakeholders to discuss different aspects of the proposals. For example, the treatment of long term conditions, emergency care pathways or the use of new technology. We would welcome Select Committee members involvement in these

Next steps

- Deliver a comprehensive engagement plan for local people and stakeholders
- Work with system partners to further develop the clinical model and vision
- Develop strategic options for our estates solution
- Meet with yourselves and other local authorities formally and informally to share more details as they develop and work together to ensure effective engagement with the local population and enable a swift submission of the Strategic Outline Case