| **Overview** | **Status** | **Green** |
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| Key milestones within this reporting period include:   * Planning approval was received from West Dunbartonshire Council. * The Cabinet Secretary for Health and Sport confirmed on 10 September 2018 that there will be no repatriation of existing activity carried out at GJF. * Patient survey report was completed an an action plan developed and shared with the clinical team. | | |

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| **Progress Summary** | **Status** | **Green** |
| **Programme Update**  The project remains on programme.  **Commercial Summary**  Stage three market testing activities continue in accordance with the dates identified in the Contract Programme, and in line with target dates to achieve the stage three submission on 29 October 2018.  **Design Status**  Following a second virtual reality session with the architects, final comments have been issued to Kier on the 1:50s.  **Statutory approval status**  Planning approval was received from West Dunbartonshire Council on 14 September 2018. This included a number of conditions which the Principal Supply Chain Partner (PSCP) is working though in advance of construction commencing. One condition requires action from GJF: Eighteen months after the building becomes fully operational, a parking review, including a methodology statement, shall be undertaken to ascertain levels of parking and the associated impact of the implementation of the travel plan. The findings and recommendations of the review shall be submitted for the written approval of the Planning Authority.  As part of the planning approval, the works to erect the site hoarding will commence on 29October 2018. A risk assessment and method statement will be issued by the PSCP in advance and a scribe will be held.  The Stage 1 Building Warrant application was submitted on 10 October 2018.  **Ophthalmology Clinical Work Stream Group and Phase 1 Clinical and Non Clinical Support Services Work stream Group**  Work is ongoing with the development of the operational policies / procedures for the new unit. Existing Standard Operating Procedures and policies, where relevant and appropriate, will be linked to this document to ensure consistency across the wider organisation. Further unit procedures will be developed or revised by key staff from the individual areas concerned and with input from the other work stream groups and appropriate staff members.  The admin group has focussed on the potential to develop self check-in facilities  Remaining work of the admin group has been put on hold until the Electronic Patient Record (EPR) has been rolled out as some processes will change as part of this. Links have been made with the EPR team to ensure all areas for improvement are being considered.  A decision is required on the specification of theatre doors..A visit will be arranged to the Neurology theatres at the Queen Elizabeth University Hospital to assist with the review, choice, and evaluation of automatic theatre doors. The group will include representation from theatres, programme team, estates and infection control.  The architect will liaise with the workstream group and consultants regarding the options and specification of blinds for the external theatre windows.  **Equipment Work Stream Group**  The equipment contained with the Equipping Bills of Quantity has been checked as reflecting the actual requirements of each planned room or space. Key individuals for each area have been engaged in the validation process. An interim version of the equipment list was provided by Kier in August and this has shown only minor changes in the list of required equipment. However, as a further list is anticipated in October, it was determined to wait until then to undertake any detailed work.  The requirement for collaborative procurement activity with other elective centres remains to be clarified. The planned meeting with other elective centres was held on 24 August to take forward opportunities to deliver best value from collaborative procurement activity, especially for equipment representing high value / or high volume across the elective centre programme.  Work is ongoing to develop route to market strategies for many of the high value equipment items required by the project. This work may be impacted by the volume and value of equipment identified for transfer.  **Business Case Development and Stakeholder / Regional Engagement**  **Full Business Case (FBC)**  Following the decision that Health Boards will not be repatriating, the year on year phasing described in Forecast 1 of the Outline Business Case (OBC), no change to the Golden Jubilee current activity plus forecast additional cataract surgery to support to the requirements of the WoS population, will be used to develop:   * detailed workforce plan * recruitment and training plan * equipping plan * Commissioning plan   Target date for FBC completion in full draft is 12 November 2018, for consideration at the 5 December Board meeting.  A West engagement meeting will be held on 23 October – the meeting will focus on agreeing the final demand modelling outputs for the phase two OBC, however the phase onw design will also be shared with the group at this meeting.  **Other Tasks**  Early discussions have started with Infection Control and the Scottish National Advanced Heart Failure Service regarding transplant patient pathway during the construction period.  The Phase one Workforce plan is under development; this is being coordinated by the Associate Director of Human Resources.  **Community Benefits**  An update meeting will be held during October to review the Community Benefits tracker.  **Key Risks and Mitigation**  A workshop has been scheduled for October to review the Phase One risk register in detail; this will follow the approach used for the OBC submission with key staff and the PSCP invited to support discussions. In parallel with this, a risk review workshop will be held with the Advisor Team and PSCP Team to review the design and construction risks. | | |
| **Programme Budget** | **Status** | **Green** |
| A project budget has been allocated for the internal Programme Team within 2018/19 and separate funds have been identified for Advisors and the PSCP. | | |
| **Issues Affecting the Programme** | **Status** | **Green** |
| None. | | |
| **Communications and Stakeholder Engagement** | **Status** | **Green** |
| In the last month, stakeholders involved in our public participation groups have received a flash report (a summary update) of the project so far. The public version of the Outline Business Case for phase one is now online and the Initial Agreement public version will follow shortly.  The Communications team are working on the press release on the move to Full Business Case (phase one) in collaboration with Government colleagues. There is also a media plan around expansion for our Annual Review on Monday 12 November 2018.  Video collaboration with West College Scotland students has started and a number of staff involved in the expansion have already been interviewed. Public participants and build partners will also be captured in the coming weeks.  Links have been made with West Dunbartonshire Council (WDC) to support both organisational development, organisational change, and recruitment information. In addition, WDC methodologies and lessons learned from moving to smarter offices have been shared with the GJF.  A meeting was held with WDC regarding the possibility of an arrangement to support the recruitment process by facilitating access to key working housing.  A first meeting was held with Strathclyde Partnership for Transport (SPT) and WDC to identify ways to support the programme. | | |
| **Key Tasks for between now and next reporting period ( 27th November 2018)** | | |
| Key tasks for the forthcoming period include:   * Complete FBC drafting by 12 November 2018. * FBC Risk Review Workshop. * Hoarding works to commence on site (HAIscribe will be completed ahead of works commencing). * Formal sign off of 1:50 room layouts. * Review of options for automated theatre doors – including lessons learned from the Queen Elizabeth University Hospital. * Review products for external window blinds in theatre. * Document overarching workforce Plan. * Define the specific nursing roles required within the unit and identify rotational and core roles. * Develop draft training plan for existing, newly qualified nursing staff. and unregistered staff. * Continue to progress development of accessibility for self check-in with partner(s). * Lessons learned session re other recent hospital developments led by Dr Emma Watson. | | |

**John M Scott, Programme Director**

**Claire MacArthur, Programme Manager**

**11 October 2018**