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| **Overview** |
| This progress report for the Hospital Expansion Programme covers the period from 23 November 2017 to 14 January 2018.  Key milestones within this reporting period include:   * Completion of Developed Design * Second stage of the AEDET (Achieving Excellence in Design Evaluation Toolkit) held |

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| **Key activities carried out in December 2017 / January 2018** |
| 1. **Principal Supply Chain Partner (PSCP) Project Team**   The ‘1:200’ Developed Design is now complete.  The second stage of the Achieving Excellence in Design Evaluation Toolkit (AEDET) process took place on 13 December 2017 and involved patients, staff and the wider GJF team.  A series of priority surveys have now been instructed, following a market testing exercise to establish the lowest cost compliant tender. The initial surveys identified include Site Investigation inspections. No formal M&E design submissions have been issued to date.  Initial dialogue has commenced with GJF Estates Team in relation to the proposed site establishment location for Phase 1. It is proposed that this will be positioned adjacent to the proposed Phase 1 site. Further dialogue to progress in due course in relation to site logistics and vehicle access.   1. **Gateway Review**   A Planning Meeting was held with the Review Team and the advance information required and interview schedule were agreed.   1. **Demand Modelling Progress and Engagement with West of Scotland (WoS) NHS Boards**   Demand modelling work was undertaken to understand the wider elective pressures within general surgery, urology and endoscopy within the West region. At the November National Elective Centres Programme Board meeting, Information Services Division (ISD) shared their demand modelling work for Scotland and the three regions. There is now a requirement to have a further meeting with ISD to discuss the planning assumptions and formalise/ agree the outputs of the Phase 2 modelling.  The phasing of activity for Phase 1 ophthalmology and Phase 2 is now underway, as is bed modelling work for Phase 2 of the expansion.  Seven engagement meetings have now been held with the West of Scotland NHS Boards. If an NHS Board representative hasn’t been able to join the meeting a follow up meeting or phone call has been undertaken to ensure we receive feedback and involvement from every Board at each stage of the process.  The WoS Engagement Group recently approved the orthopaedic demand modelling outputs for the West region. The Principal Supply Chain Partner (PSCP) and November meetings focussed on other forecast elective pressures within the region – namely general surgery, urology and endoscopy. The group have confirmed they support the Phase 2 expansion providing flexible space for additional diagnostic endoscopy and day case general surgery capacity. Significant regional work has already been undertaken to describe the move towards a regionalised urology service, therefore there is no requirement for urology services within the elective expansion.  The strategic case section of the Initial Agreementwill now be written up and shared with the WoS Engagement Group and a further meeting will be organised once the Initial Agreement is in final draft to seek their formal support for the document.   1. **Ophthalmology Workstream Group – (meets fortnightly)**   The Ophthalmology work stream group formally approved the developed design on 6 December 2017. The group’s other main focus is finalising the workforce requirements to support the model of care; the plan will include recruitment and training requirements. A sophisticated workforce planning template has been developed in partnership with the Finance team and will be used to identify the workforce requirements - phased by financial year.   1. **Ophthalmology Clinical Task Group – (meets fortnightly)**   The Clinical Task Group’s focus is on the design development, this is the forum where the GJF clinical team work with the PSCP design team to develop the design there are various stages to the design development process as follows:   * Developing the clinical brief - COMPLETE * Developing a schedule of accommodation- COMPLETE * Concept design (1:500 drawings) - COMPLETE * Developed Design (1:200 drawings confirming room adjacencies) - COMPLETE * Detailed design (this includes finalising 1: 50 drawings of individual room layouts)  1. **Orthopaedic Work Stream Group (Monthly at present)**   The Orthopaedic Work Stream Group have now met twice. The first meeting focussed on understanding the demand modelling work and the likely additional capacity requirements between now and 2035.  The group’s focus as now turned to the patient pathway to consider what could be improved further, a large part of the focus in on how we admit and care for patients prior to their surgery.   1. **General Surgery and Endoscopy Workstream Group (Monthly at present)**   The group had their first meeting in Principal Supply Chain Partner (PSCP); a further meeting is planned in November. The first meeting focussed on understanding the high level demand modelling work and the options for provision of additional general surgical capacity at the GJF. The second meeting is now being planned and following the recent West Boards’ Engagement meeting, it will focus on how GJF could support and expand a general surgical day case programme.  The third meeting of the group took place in December. Action plans have been developed to focus on improving future service models of care such as how consultants can review patient information in advance of surgery and if this would impact on cancellation rates. Work has also commenced on the preferred patient pathway and the necessary changes required to support this.   1. **Business Case Development and Assurance Group**   This group continues to meet and is supporting the development of the IA for Phase 2 and the Outline Business Case (OBC) for Phase 1 at present. Action plans have been developed using the IA and OBC key headings to measure and monitor progress against the agreed timescales.   1. **Local Authority Engagement**   Feedback is still awaited from the Planners with regard to the flood risk assessment requirements and building height. The design team continue to pursue the planners for a response. The full Planning Application and Stage A Building Warrant application are scheduled to be submitted on 12 March 2018.  **10. Community Benefits**  A series of meetings with Kier Construction have now been held and the reporting structure and timing of reports is now agreed as well as additional benefits to be explored.  A meeting with West College was held on 24 Principal Supply Chain Partner (PSCP) 2017 and aspects of possible support were discussed. A follow up meeting will be held in the coming weeks to finalise this.  A Community Benefits Report will be presented to a future Senior Management Team meeting. |
| **Key Risks and Mitigation** |
| A GJF risk workshop was held on 9 Principal Supply Chain Partner (PSCP) 2017 to update the risk register in line with the next stage of the programme. Cognisance was also taken of the wider risks to be considered as development of Phase 2 commences.  An additional risk workshop focusing on design and construction risks was held on 30 Principal Supply Chain Partner (PSCP) 2017 with Kier Construction, the Design Team and the Advisor Team.  A risk register has now been agreed and circulated which identifies the risks owned by GJF and those owned by the PSCP. These risk registers will now be combined to form the master risk register. This is covered in more detail in the Risk Management Framework. |
| **Programme Budget** |
| A project budget has been allocated for the internal Programme Team within 2017/18 and separate funds have been identified for External Advisors. These have been identified and approved in the Board’s Financial Plan.  Formal Cost Control Meetings continue to be held on a monthly basis. This is covered in more detail in the Cost Control Paper. |
| **Issues Affecting the Programme** |
| There is now a requirement to have a further meeting with ISD to discuss the demand modelling planning assumptions and formalise/ agree the outputs of the Phase 2 modelling. It is anticipated this will happen as soon as possible. Only once this is agreed can the phasing of activity be completed and shared with the wider GJF team who will then identify their workforce and equipment requirements. |
| **Programme Plan** |
| The Team are focused on completing the work associated with the Stage 2 report to align with the timing of the Phase 1 OBC submission. This is summarised as follows:-   * Clinical Brief October 2017 * Schedule of Accommodation October 2017 * Concept Design October 2017 * Completion of Demand Modelling November 2017 * Theatre Options Paper November 2017 * Risk Review November 2017 * Recruitment Training and Workforce Plan December 2017 * Developed Design December 2017 * Cost Plan January 2018 * Stage 2 Report Issued January 2018 |

| **Key Tasks for January 2018** |
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| Key tasks for the forthcoming period include:  **Gateway Review**  The Review will take place from 29-31 January 2018.  **Establishing the Clinical and Non Clinical Support Services Work stream Group:**  As soon as the phasing of activity for Phase 1 and or Phase 2 is confirmed the clinical and non clinical support services group will be established. This group will use the phased activity requirements to inform their workforce requirements for each financial year between now and 2035.  **Establishing an Equipment Group:**  Draft Teams of Reference for this Group will be agreed at the Steering Group in January 2018 with the first meeting to be arranged shortly thereafter.  **Development of the Phase 1 Design:**  The GJF team will continue to work with the PSCP to progress the ‘1:50’ Detailed Design.  **Development of the Phase 1 OBC:**  Continue development of the OBC.  **Development of the Phase 2 IA:**  Continue development of the IA.  **Communication and Stakeholder Engagement:**  The NHSScotland Design Assessment Process (NDAP) review will take place on 18 January 2018 with Architecture and Design Scotland and Health Facilities Scotland. |

**John M Scott**

**Programme Director**

**14 January 2018**