

NHS Board Meeting
30th July 2019

Lanarkshire NHS Board
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SUBJECT: Monklands Replacement/Refurbishment Project (MRRP) Independent Review Panel Report & Action Plan

1. PURPOSE

This paper is coming to the Board:

For approval	<input checked="" type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input type="checkbox"/>
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2. ROUTE TO THE BOARD

This paper has been

Prepared	<input type="checkbox"/>	Reviewed	<input type="checkbox"/>	Endorsed	<input checked="" type="checkbox"/>
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by the Corporate Management Team on 22nd July 2019.

3. SUMMARY OF KEY ISSUES

Background

The Report of the Independent Review Panel (IRP) on the process followed by NHS Lanarkshire's Monklands Replacement/Refurbishment Project (MRRP) was published on 27th June 2019. A copy of the report is available through this link [Monklands IRT Report](#).

On the same day the Cabinet Secretary for Health and Sport wrote to the NHS Board Chair on this matter, and a copy of the letter has been circulated to NHS Board Members (Appendix 4).

The Cabinet Secretary recognised in her letter that the options to either refurbish or redevelop the existing site of University Hospital Monklands are not viable, and so it is recommended that the designation of the project moving forwards becomes the "Monklands Replacement Project" (MRP).

The Cabinet Secretary also offered the ongoing advice to the Project from Dr Mike Higgins, Medical Director, Golden Jubilee Foundation, who was a member of the IRP. This has been welcomed by the Chair, and Dr Higgins, who will be engaged by the MR Project Team.

The response to the three IRP recommendations are described in Appendices 1, 2 and 3. The key points are summarised below:

Appendix 1 - Response to IRP Recommendation 1 - Project Governance

It is proposed that a new Monklands Replacement Oversight Board (MROB) be constituted as a Governance Committee of the Lanarkshire NHS Board.

This new Oversight Board will strengthen the governance and accountability of the work of the MR Project within NHS Board structures, and seek to build wider public confidence in the process moving forward.

Appendix 1 provides the proposed membership for the new Oversight Board which includes four NHS Lanarkshire Non-Executive Directors and a new, suitably qualified, independent member from outwith Lanarkshire NHS Board. The Board Chair is proposing that the chair of the MROB will be one of the four NHS Lanarkshire Non-Executive Directors, Dr Lesley Thomson, QC.

To ensure staff engagement at every level, Mrs Lilian Macer, Employee Director, will also be a Member. The Board Chair is considering Non-Executive Director portfolios for the remaining 2 Non-Executive Director positions and will bring nominations to the August Board for approval. Co-opted external membership will also incorporate four public/patient partners. Senior representatives from Scottish Government Health & Social Care Finance Directorate, and Health Facilities Scotland, will attend meetings of MROB to provide advice, but will not be Members.

The MROB will also be supported by members of the Corporate Management Team and the MR Project Team. The MR Project Team will comprise key clinical and technical experts from within the MR Project Team. Wider clinical engagement will be taken forward by each of the separate project workstreams, and the Area Clinical Forum will also be fully engaged in this process.

When constituted, the MROB will be asked to complete their terms of reference and consider the composition of the MR Project Team to ensure this is well placed to build on the work carried out so far, and to drive the Project to a successful conclusion.

Appendix 2 - Response to IRP Recommendation 2 - Identify Other Potential Sites, Take Account of the Views of the Public and Re-evaluate Site Options

A three-stage approach is recommended.

Stage 1 - to invite the Chief Planner in Scottish Government to work with North Lanarkshire Council - and others they deem necessary - to identify and assess potential sites beyond Gartcosh and Glenmavis. This process will include re-applying site selection criteria as described in the table, below.

Number	Benefit Criteria	Description
1	Location	Must sit within University Hospital Monklands unscheduled care catchment area.
2	Size of available site	Must be a minimum of 40 developable acres.
3	Impact on catchment areas	Site must have no detrimental impact on adjoining unscheduled catchment areas of hospitals in Lanarkshire, Glasgow or Forth Valley.
4	North Lanarkshire Council's Local Development Plan	Site must be designated to permit appropriate development.
5	Road and Transport Infrastructure	Site must have sufficient road and transport infrastructure to support the development of a major hospital site.

Stage 2 - to appoint an independent engagement adviser to plan an independently-facilitated public engagement process that seeks public feedback on the proposed hospital locations and proposed re-evaluation exercise. A procurement process will be required to allow this appointment to take place.

Stage 3 - to conduct a re-evaluation exercise on the highest scoring options, (including any new site options identified in stage 1) with a large group of stakeholders. The nomination of the members of the public to participate in the exercise will be undertaken under the advice and direction of the independent engagement adviser appointed in stage 2. Our current planning assumption is that that this re-evaluation and scoring exercise would involve around 100 stakeholders split by 50 members of the public and 50 other stakeholders including clinicians, staff and other partners.

Appendix 3 - Response to Recommendation 3 - Vision for the Monklands Site

A Place-based Approach is set out in Appendix 3 which would include the establishment of a new Partnership for the development of a set of proposals for the future use of the University Monklands Hospital Site. The recommendations of the Fairer Scotland Duty assessment will also be taken forward. Further discussion will take place with the proposed Partners, and a further paper will be brought to a forthcoming meeting of Lanarkshire NHS Board and North Lanarkshire Integrated Joint Board for consideration.

Indicative Timescale

There remain some key uncertainties in the programme to allow these actions to be concluded. The most significant factor is the potential for an alternate site to Gartcosh and Glenmavis being added to the list of viable sites. Such a site would require site investigation works to be completed to the same degree as at Gartcosh and Glenmavis: this could add 3 months to the key milestones described, below.

Timeline	Key Milestones
During August 2019	Commissioning of the site review process. Appointment of an independent engagement adviser. Identification of external membership and establishment of the MR Oversight Board.
Mid Sept - mid Oct 2019	Public engagement on site selections.
Late October 2019	Re-evaluation of viable site options and identification of a highest scoring site option.
November/December 2019	Meeting of Lanarkshire NHS Board to consider recommendation from the MR Oversight Board on site selection for the Outline Business Case (OBC).

Such a timescale could allow the completion of the OBC for respective approvals through autumn 2020.

All stages of the process will be supported by an overarching communications and engagement plan that ensures an open and transparent approach to informing and involving stakeholders. This will include regular and proactive updates throughout the process via stakeholder briefings, press releases, dedicated MR webpages, social media, video and meetings. A draft plan will be

shared with Board Members for comment in due course, and will be developed further with the input of the independent engagement adviser, to be appointed in August. The finalised plan will be presented to the August 2019 Board meeting for formal approval.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	<input checked="" type="checkbox"/>	AOP	<input checked="" type="checkbox"/>	Government policy	<input checked="" type="checkbox"/>
Government directive		Statutory requirement	<input checked="" type="checkbox"/>	Achieving Excellence	<input checked="" type="checkbox"/>
Urgent operational issue	<input type="checkbox"/>	Other	<input type="checkbox"/>		

The MR Project is a key deliverable within *Achieving Excellence*.

5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

Three Quality Ambitions:

Safe	<input checked="" type="checkbox"/>	Effective	<input checked="" type="checkbox"/>	Person Centred	<input checked="" type="checkbox"/>
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Six Quality Outcomes:

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	<input checked="" type="checkbox"/>
People are able to live well at home or in the community; (Person Centred)	<input checked="" type="checkbox"/>
Everyone has a positive experience of healthcare; (Person Centred)	<input checked="" type="checkbox"/>
Staff feel supported and engaged; (Effective)	<input checked="" type="checkbox"/>
Healthcare is safe for every person, every time; (Safe)	<input checked="" type="checkbox"/>
Best use is made of available resources. (Effective)	<input checked="" type="checkbox"/>

6. MEASURES FOR IMPROVEMENT

The benefits which will derive from this Project are set out in the Initial Agreement.

7. FINANCIAL IMPLICATIONS

The financial implication as a result of the current delay was set out in the last update to the Planning, Performance and Resources Committee in April 2019. It was confirmed that the Outline Business Case cannot now be completed in 2019/20, and this delay means that future inflation will add between £1.5m and £3m per month to the overall Project cost.

The financial cost of the process described in Appendix 2 are not yet known, but it will be of a scale which can be managed through the existing MRP and Communications budget allocations for 2019/20.

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

The preparation of the business case to replace Monklands District General Hospital began in 2008/09 in recognition of the ongoing risk to the Board's ability to deliver clinical services on that site. Significant delay was created in 2017 with the requirement to describe in the business case for the Initial Agreement, a regional facility, rather than one solely replacing the current hospital services.

Further delay in the decision making process around the Monklands Replacement Project adds to the risks in relation to the infrastructure on the current University Hospital Monklands Site, and the inability to invest in other capital schemes across NHS Lanarkshire, due to the level of expenditure required to sustain the Monklands site.

Board Members were provided with a detailed presentation of the risks being managed on the Monklands site at the Planning, Performance and Resources Committee meeting held on 11 April 2019.

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	<input checked="" type="checkbox"/>	Effective partnerships	<input checked="" type="checkbox"/>	Governance and accountability	<input checked="" type="checkbox"/>
Use of resources	<input checked="" type="checkbox"/>	Performance management	<input checked="" type="checkbox"/>	Equality	<input checked="" type="checkbox"/>
Sustainability	<input checked="" type="checkbox"/>				

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

Revised EDIAs for each aspect of these proposals will be prepared by the MR Project Team for consideration by the newly constituted MR Oversight Board in due course.

11. CONSULTATION AND ENGAGEMENT

The Board is asked to note that the proposals contained within this paper will require a revision to the Communication and Engagement Plan for the MR Project which will be shared with Board Members in draft in due course and presented to the August 2019 Board meeting for formal approval.

12. RECOMMENDATIONS

The NHS Board is asked to:

1. Note the report from the Independent Review Team;
2. Note the letter of 27 June 2019 from the Cabinet Secretary to the NHS Board Chair; and
3. Approve all of the actions detailed in Appendices 1 – 3, and specifically to
 - a) Approve the establishment of a Monklands Replacement Oversight Board (MROB) as part of its governance structure;
 - b) Agree to remit to the Board Chair to progress the appointment of a suitably qualified independent member of MROB;
 - c) Approve the appointment of Dr Lesley Thomson QC, Non-Executive Director of Lanarkshire NHS Board as Chair of MROB;
 - d) Approve the appointment of Mrs Lillian Macer, Employee Director of Lanarkshire NHS Board, as a Member of the MROB; and note that the Board Chair will bring nominations for other Non-Executive Directors to the August Board for approval;
 - e) Approve the 3 stage process in response to recommendation 2, as set out in Appendix 2;
 - f) Note the future advisory role of the Medical Director, Golden Jubilee National Hospital;

- g) Note the role of the Chief Planner and NLC Planning Department in the identification of any additional sites;
- h) Agree that a procurement exercise will be carried out to engage the services of an independent engagement adviser;
- i) Agree to take account of any recommendations or further proposals arising from Fairer Scotland Duty recommendations;
- j) Approve the establishment of a formal Partnership between the University of Strathclyde, North Lanarkshire Health & Social Care Partnership and North Lanarkshire Council to improve health care in Lanarkshire and reduce health inequalities with the existing Monklands site being central to this strategy;
- k) Note that a draft Communication and Engagement Plan will be circulated for comment to Board Members in due course, and that the Plan will be submitted to the August 2019 NHS Board meeting for approval; and
- l) Agree to receive further reports on the progression of the Action Plan.

13. FURTHER INFORMATION

For further information about any aspect of this paper, please contact Colin Lauder on 01698 858090 or colin.lauder@lanarkshire.scot.nhs.uk

Colin Lauder

Director of Planning, Property & Performance