

Document 3

Weighting Information Pack

As set out in the accompanying letter, what we need to do is to judge the relative importance of each of the criteria below when we use them to score all of the options (so, do people believe, for example, that looking at contamination at any site is more or less important than looking at how easy it is to get to and from any site to other hospitals?). This is called 'weighting', and it involves setting a percentage of importance against each criterion, so that the total adds up to 100%. It is a way of putting the criteria in order of importance.

An information pack on all of the sites (Site Information Pack) has been included with this letter detailing each of the criteria and a summary of the available data.

We ask that you to read the information and come to a judgement on how much weighting should be given to each of the criteria and write these down on a form have provided. Further guidance is included in the accompanying letter.

As explained in the introductory letter, a few months ago a group of people (that included hospital staff, residents and patients from across the area) helped agree the following criteria by which to judge which site might be best.

Criteria	Title	Question description
1	Travel times by road and public transport – patients	Please tell us how easy or difficult you think travel would be for patients to and from each of the possible sites
2	Travel times by road and public transport – staff	Please tell us how easy or difficult you think travel would be for staff to and from each of the proposed sites
3	Access/connectivity to regional centres (including other NHS Lanarkshire hospitals)	For the possible sites, please tell us what you think of the ease of transfer between each site and the regional centres
4	Contamination	Each of the possible sites requires a degree of work to remove contamination left over from its previous use How would you rate our proposals for removing this contamination for each of the possible sites?
5	Impact of cross-boundary flow	Please rate how well you believe each site will be able to deal with the impact of cross-boundary flow.

The group concluded that travel times for patients and staff should be considered separately as both are likely to travel at quite different times of the day and therefore in different circumstances.

Criterion 1. Travel times by road and public transport – patients. Please tell us how easy or difficult you think travel would be for patients to and from each of the possible sites.

Weighting info: The following information is presented to allow you to consider how this criteria should be weighted against the others, i.e. is this more or less important than the other criteria in deciding the location of the new hospital.

The successful day-to-day operation of the hospital relies on good accessibility for patients from across Lanarkshire.

For all candidate sites, we have assessed the existing accessibility of each site by a variety of modes of transport and presented this information. The drive time analysis has been carried out with a consistent methodology but, it is acknowledged that individual experiences may differ from the results presented.

The summary of existing accessibility is presented for information. It is more important to consider what the anticipated accessibility of each of the sites could be if they were selected as the preferred site. The potential accessibility of each site has been assessed by a variety of modes of transport and it was concluded that there is little difference in the accessibility of each of the candidate sites, once measures for walking, cycling, public transport and road infrastructure are put in place. Each site can be made accessible by these modes of transport. There are however differences in accessibility and journey time for the three sites depending on where patients live.

For bus access, there is a planning requirement on the NHS to provide at least the same level of service as that currently available at the existing Monklands.

For rail access, there is a station at the Gartcosh candidate site within 800m. At the Wester Moffat candidate site there is a station within 1.3km. At the Glenmavis candidate site there is a station within approximately 5km. For car access, the Gartcosh site is located near the M73 motorway.

For both the Glenmavis and Wester Moffat sites, it is assumed that the East Airdrie Link Road would be in place.

Criterion 2: Travel times by road and public transport – staff. Please tell us how easy or difficult you think travel would be for staff to and from each of the proposed sites.

Weighting info: The following information is presented to allow you to consider how this criteria should be weighted against the others, i.e. is this more or less important than the other criteria in deciding the location of the new hospital.

The successful day-to-day operation of the hospital also relies on good accessibility for staff who live both locally and across the wider central Scotland. Good transport links are also seen as a factor in recruiting and retaining staff, including medical nursing and non-clinical staff.

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For bus access, there is a planning requirement on the NHS to provide at least same level of service as that currently available at the existing Monklands.

For rail access, there is a station at the Gartcosh candidate site within 800m. At the Wester Moffat candidate site there is a station within 1.3km. At the Glenmavis candidate site there is a station within approximately 5km.

For car access, the Gartcosh site is located near the M73 motorway.

For both the Glenmavis and Wester Moffat sites, it is assumed that the East Airdrie Link Road would be in place.

Criterion 3: Access/Connectivity to regional centres. For the possible sites listed below, please tell us what you think of the ease of transfer between each site and the regional centres.

Weighting info: The following information is presented to allow you to consider how this criteria should be weighted against the others, i.e. is this more or less important than the other criteria in deciding the location of the new hospital.

Travel to the hospital is vital for patients, however internal hospital transfers of patients are also important, especially in emergencies. Access to regional services is becoming increasingly important in modern healthcare as services become more specialised. Not all specialist services are provided at every hospital and it is vital that patients are transferred quickly between these sites when required.

NHS Lanarkshire's centres of excellence model for the provision of services across the three hospitals is an example of this with different specialist services provided across the three sites. Further to this, NHS Lanarkshire patients benefit from regional specialist centres in Glasgow, such as those for brain injuries or childhood emergencies.

Criterion 4: Contamination. Each of the possible sites requires a degree of work to remove contamination left over from its previous use. How would you rate our proposals for removing this contamination for each of the possible sites?

Weighting info: The following information is presented to allow you to consider how this criteria should be weighted against the others, i.e. is this more or less important than the other criteria in deciding the location of the new hospital.

All the sites shortlisted contain a degree of contamination due to their former land use. This is not unusual within Lanarkshire or the wider area. The use of a brownfield site or a site which has had a previous industrial use is public policy as greenfield sites should be protected where possible to encourage bringing previously used land back into beneficial use whilst protecting our green spaces.

To allow you to consider the importance of contamination, comments from WSP's Regional Director for Ground Risk & Remediation Andy McCusker are included below:

'Whilst the groundworks and remediation required at any of the sites will result in engineering issues to be addressed by the contractor these are not unexpected and will not require any operations which would be considered unusual within the context of site redevelopment. The information contained in the information pack allows an understanding of the magnitude of difference across the three sites, however, it is stressed that all three sites would be suitable for use as a hospital following the necessary works.

Short-term, during the construction phase, the ground conditions and contamination present on site will result in construction challenges which are generally consistent with those present on all large civil engineering and construction projects but which will require, for example, the removal of significant in-ground structures, the excavation of potentially contaminated soils or the drilling and grouting of mineworkings to prevent subsidence/settlement. These risks will result in cost impacts to the project which have been estimated within the financial mode. During the operational phase of the project, the previous land-use will pose no significant risk to patients or staff as any potential issues will have been addressed either as part of the remedial phase of works or through the measures incorporated in the final development.

In my professional view, once the remediation and redevelopment works are undertaken, all 3 sites will be suitable for use as a hospital. Consequently, it is the costs associated with the remedial measures required at each of the sites, rather than the nature and extent of the works themselves, which will be the principal differentiating factor in terms of addressing the contamination and geotechnical issues as identified.'

Criterion 5: Impact of Cross Boundary Flow. Please rate how well you believe each site will be able to deal with the impact of cross-boundary flow.

Weighting info: The following information is presented to allow you to consider how this criteria should be weighted against the others, i.e. is this more or less important than the other criteria in deciding the location of the new hospital.

Cross Boundary Flow describes the situation when patients resident in one health board area use services within an adjoining health board area. This can be disruptive as services can be overloaded if not planned for and taken in to account in the sizing of the new hospital.

The impact of cross boundary flow can be seen as both a negative and a positive. While cross boundary flow can have a disruptive impact if a hospital is not appropriately sized for patient flow, it can also benefit patients as they are free to access healthcare in neighbouring health boards if this is desired or necessary. NHS Lanarkshire is the 'biggest exporter of healthcare in Scotland' with more Lanarkshire patients being seen out with Lanarkshire than any other health board. This primarily as a result of patients in the 'Northern Corridor' – Muirhead/Chryston/Moodiesburn and 'CamGlen' – Cambuslang/Rutherglen areas continuing to receive healthcare within Greater Glasgow & Clyde Hospitals as they did prior to the boundary changes in 2014. There are no plans to change this arrangement.

It is important to note that patients who are resident of Lanarkshire but access healthcare in Glasgow (or elsewhere in Scotland) do so free of charge, however money does flow from NHS Lanarkshire to NHS GG&C in this case. Similarly, if a resident of Glasgow accesses healthcare in Lanarkshire money flows from NHS GG&C to NHS Lanarkshire.

The hospital will be sized to allow for the estimate of future attendances at the hospital, with allowance made in for this in the financial model for the hospital cost. The likely impact of cross boundary flow on each potential site location is provided within the site information pack.