

Date: 24 <sup>th</sup> July 2019	Time: 3.00pm – 4.30pm	Venue: 4 <sup>th</sup> Floor, Peter Crill House
Present:		
Caroline Landon	Director General	CL
John McInerney	Group Medical Director	JMcl
Rose Naylor	Chief Nurse	RN
Robert Sainsbury	Group Managing Director	RS
Darren Skinner	Interim HR Director	DS
Michelle West	Director of Operations	MW
Ashok Handa	Clinical Director	AH
Richard Bannister	Project Director	RB
Maria Benbow	Group Director Commercial Services	MB
Paul McCabe	Chief Pharmacist	PMc
Andrew Mitchell	Chief Clinical Information Office	AM
Miguel Garcia-Alcaraz	Head of Mental Health AMD	MGA

Jo Poynter	Director of Operations Community	

1	Welcome / Apologies	Action	
CL We	elcomed the Our Hospital Project attendees and introduced Ashok Handa Clinical Director for the		
Future	Hospital, Apologies were received from AH		

#### **Minutes of Previous Meeting**

No papers to note.

2	Terms of Reference CL	Action
The a	mended Terms of Reference were reviewed.	
	- Purpose	
	<ul> <li>Objective</li> <li>Responsibilities</li> </ul>	
_		
Respo	onsibilities;	
•	Care Model for Jersey – to review the Care Model for Jersey. There will be clinical representation on the Group from both the HCS Group Medical Director and the Clinical Director for the Future Hospital	
The p	roposed new Care Model will be presented end of September-October 2019	
the co	equirements set out in the model and, in consequence, changes in health and care delivery informing intent and capacity of the healthcare system will come to the group for comment before going to the al Oversight Group.	
The G	roup will have oversight and input into the outline and full business case produced by the Project Team	
ACTIC	ON Circulate the membership of the Political Oversight Group to the Group	CL
	arate Scrutiny Panel has been set up for Our Hospital. This is separate from the Scrutiny Panel hising the work of HCS.	
	the executive lead of the New Care Model and will cascade new information on the New Care Model h a programme of communication and roadshows.	

Action

New Care Model as an agenda item at the weekly AMD meetings	JMc
Programme of communication and roadshows to be drafted	RS
Re-circulate the revised Terms of Reference	

3	New Care Model SB	Action
lt will k	ew model will describe significant differences in the way that it informs delivery of the Future Hospital. be Clinician Led (Doctors, nurses, allied health professional, social workers and all professionals who be care for patients and clients)	
Execut	ive Leads for the New Care Model	
• •	Medical Director leading on the Primary Care Work Stream Group Managing Director Leading on Secondary Care Chief Nurse leading on the Third Sector	
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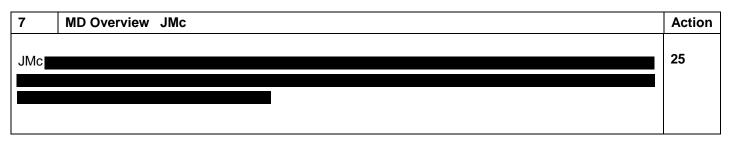
4	Project Team Update RB	Action
	tly waiting for funding to be confirmed for the project. Waiting for approvals to be able to appoint people project team. We now need to recruit.	
Action	from Human Resources start the recruitment process.	
down t	ent group will determine the size of the hospital and what is going to go in it. Clinical need will narrow he options very quickly to a small number of sites. The location is a political decision determined by itical Oversight Group.	
Action	Political Oversight Group to confirm who chooses the site	CL
Action	Locate the Project Team in Peter Crill House	RS
The Gi sites.	roup acknowledged that there will be many other interested stakeholders promoting their preferred	
	oup is working to a timetable with a presentation of Care Model to Political Oversight Group at the end tember 2019. It can then be 'stress tested' October / November 2019.	
By July	2020 (one year)	
1.	Appointment of the Delivery Partner envisaged to design and build the hospital or the buildings we believe are the solution.	
2.	Appointment of the health planner will have to convert all the information in the model (particularly the operational policies) into an area schedule and conclude departmental adjacencies	
After 6	months (January 2020)	
1.	Procure a strategic partner to work with	
	Work backwards to the point in which we need to go out to procure the strategic partner. We need all ails, the specifications, the site, the building, the construction, the plans.	RB
	e a timetable for completion of the Strategic Outline Case, Outline Business Case and a Full Business sing HM Treasury Green Book	RB
Indicati	ve discussion of the work to be done and the challenging timescale in which to do it.	
		35

**Our Hospital Project** 

We need to establish the clinical adjacencies group to set out the specification and content of the proposed hospital (How many CT scanners, MRI scanners etc.) and agree the demographics, disease prevalence and other planning demand and operational assumptions (e.g. 85% bed occupancy) that will inform its size and content. RB informed the group "Tell me what you want, and I will build it". If had confidence that most specialties could be clear about future needs for next 20 years. MB emphasised however that we need to reach these conclusions in partnership with a wide range of stakeholders. CL These stakeholder groups and individuals will be coordinated through a citizen's panel, public panel, and various engagement groups. The Group recognised that there were both strengths and weaknesses in the previous Future Hospital Project planning. There was a need to re-use material where helpful and exclude where not as well as recognise the new clinical brief e.g. including mental health. Site Analysis will remedy some of the weaknesses in the previous site selection process by working on a 'just in time' basis ruling out the unsuitable sites and then to develop a short list of sites and thoroughly investigate those sites to conclude a preferred site. This site appraisal work can, in part, happen in parallel to the	??
in time' basis ruling out the unsuitable sites and then to develop a short list of sites and thoroughly investigate	

5	Procurement Update MB	Action
Recruit Manag resourc A heal	proval gained by States Employment Board for recruitment and approval of funding for initial work. Itment can now start through Human Resources. Currently working to establish the Programme ement Office which will be key to supporting RB and coordinating all that is needed for the project. A ce profile needs to be agreed. Procurement of a lawyer is needed for early involvement. th data analyst is also needed early (to stress test the model, interrogate the data). RB will be mme Director to coordinate the overall programme and project governance processes.	

6	Finance Update	Action
All the budget is held by the SRO (CL). We will quickly need to have a finance tracker for recurrent and non- recurrent payments.		
	Start a Finance Tracker by next meeting (Steven Mair discuss with RB) – first payment need accounting payment for AH	RB
		35
forwar	e this d. We have a digital strategy agreed but it needs updating and aligning with new Care Model.	
	Digital Strategy expenditure will be set out at the Our Hospital meeting on the 21 <sup>st</sup> August 2019	



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JMc Sought assurance that there will be a planning law that will be fit for purpose to allow a hospital to be built. An outcome of the previous planning inquiry was that the Planning Minister could not recommend any site because the planning laws did not allow him to do so. What assurance is there that in eighteen months' time this will not happen again?	35
MB Asked if the new finance law had any bearing on the decision making in relation to the project.	MB 35

8	Any Other Business	Action
Nil		

9	Date & time of next meeting	
The d	ate of the next meeting is 21 <sup>st</sup> August 2019 11.30am to 1.00pm	
Actio	n Points	
To Ci	rculate the membership of the Political Oversight Group	CL
New (	Care Model as an agenda item at the weekly AMD meetings	JMc
Progr	amme of communication and roadshows to be drafted	RS
Re-ci	rculate Terms of Reference	
Neil V	Viseman from Human Resources start the recruitment process.	
Politic	al Care Oversight Group to confirm who determines site	CL
Locat	e the Project Team in Peter Crill House	CL
	n work backwards to the point in which we need to go out to procure the strategic partner. We need all etails for it, the specifications, to work with us the site, the building, the construction, the plans.	RB
	de a timetable for completion of the Strategic Outline Case, Outline Business Case and a Full Business using HM Treasury Green Book	RB
	input from the various heads of department or specialty as they have data activity of their own outside kCare	JMc
Digita	l Strategy spend available at the Our Hospital meeting on the 21 <sup>st</sup> August 2019	
	a Finance Tracker by next meeting (Steven Mair discuss with RB) – first payment need accounting for ayment for AH	RB
To dis	scuss at the Political Oversight Group the new hospital exemption in Public interest caveat	MB



Date: 18 September 2019	Time: 2.30 p.m. – 4.00 p.m.	Venue: 4 <sup>th</sup> Floor, Peter Cri	II House
Present:			
Caroline Landon	Director General Chair		CL
Rose Naylor	Chief Nurse		RN
Pamela Hobbs	Head of Finance Business Planning (joined t	he meeting at 15.03 p.m.)	PH
Robert Sainsbury	Group Managing Director		RS
Dr Andrew Mitchell	Clinical Chief Information Officer		AM
Michelle West	Associate Managing Director		MW
Maria Benbow	Group Director Commercial Services (joined	the meeting at 15.06 p.m.)	MB
Jo Poynter	Associate Managing Director Health Modernis	sation	JP
John McInerney	Group Medical Director		JMcI
Ashok Handa	Clinical Director for Our Hospital Project		AH

In Attendance:		
Karen Pallot	Executive Assistant	KP

#### Welcome / Apologies

1

The Chair welcomed the Our Hospital Project attendees.

Apologies for absence were received from Patrick Armstrong (Associate Medical Director Scheduled and Tertiary Care), Paul McCabe (Chief Pharmacist,

#### **Minutes of Previous Meeting**

The Chair apologised for lateness of agenda, minutes, papers and informed the Group that an administrative support officer has been appointed and will start soon.

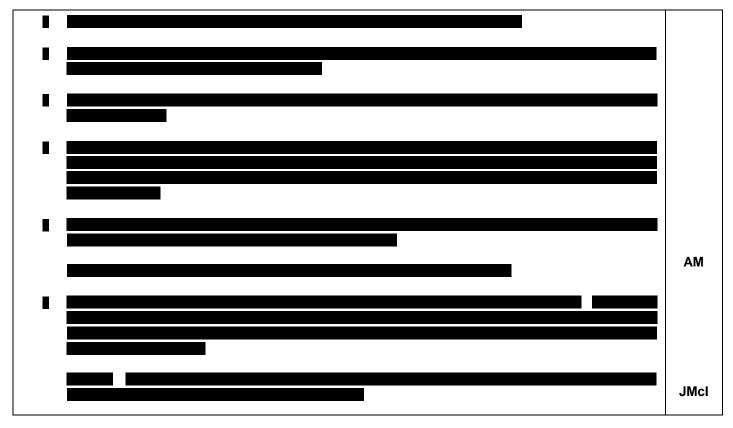
The Minutes were taken as read and approved.

2	New Care Model Update - RS	Action
The G	roup Managing Director	35

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Action

Action



3	Project Team update	Action
The Ch	nair updated the Group as follows: -	
•	The PMO has gone out to tender and we have shortlisted three and these bids will be coming to the Panel on 16 October 2019. Richard Bannister's contract ends 31 December 2019 and the post will be out for advertisement in the Island and UK in October. Remainder of posts out advert.	

4	Procurement Update	Action
Group	Director Commercial Services (MB) provided a verbal update to the Group, the main points: -	
	t Management Officers – went out for procurement, three bidders will support Procurement to find a bartner.	
Legal	Services tender went live on 16 <sup>th</sup> September 2019.	
The D	evelopment Partner Research is underway.	
are re Assoc	Planner and Health Design Team – The Chair (CL) and Clinical Director for Our Hospital Project (AH) viewing the specification. The Group suggested that the Medical Director for Primary Care (AN), iate Medical Director, Mental Health (MGA), Clinical Director for Our Hospital Project (AH) and Group al Director (JMcI) be part of the selection process for a Health Planner Team.	
The H	ealth and Social Care Planner going out to tender.	
Actior	n: Group Director Commercial Services to share PMO specification with Group.	МВ
Actior	a: Group Medical Director to take PMO specification to next meeting of the AMDs.	JMcI

5	Finance Update	Action
The Head of Finance Business Planning (PH) informed the Group of the following:		
•	Finance Tracker progressing.	

<ul> <li>Tracking down contracts out to Procurement.</li> <li>Update on actual spend and forecast to date will be taken to next meeting.</li> <li>Action: PH to bring report on actual spend to date and forecast to next meeting</li> </ul>		РН
6	Medical Director Overview	Action

The Group Medical Director g	gave a brief	update as follows: -
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- The New Care Model presentation has been rolled out to all HCS staff and all GP Practices and feedback has been positive.
- \_\_\_\_\_ 33

7	Clinical Director Overview	Action
	inical Director for Our Hospital Project (AH) gave a verbal update to the Group, the main points sed were: -	
•		35
•	Recruitment underway for Team.	
•	Waiting on PMO appointment.	
•		
•	AH invited the Communications Officer to brief the group on Care Model communications plan	
	also informed the Group that a New Hospital Communications Lead has been appointed, namely Mr. Carl Walker.	
	Action: It was agreed that Carl Walker be invited to attend Hospital meetings.	
The Gr	oup agreed that a Customer and Local Services representative be invited to join the Board.	
Action	: Ian Burns be invited to attend Our Hospital Meetings.	CL

8	Any Other Business

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#### 9 Date & time of next meeting

The date of the next meeting takes place on Wednesday 16th October at 10.00 a.m. – 11.30 a.m., 4<sup>th</sup> Floor, Peter Crill House



Date: 6 November 2019	Time: 2.00 p.m. – 4.00 p.m.	Venue: 4 <sup>th</sup> Floor, Peter Crill House
Dueseut		
Present:		
Caroline Landon	Director General Chair	CL

Rose Naylor	Chief Nurse	RN
Patrick Armstrong	Group Medical Director and Associate Medical Director Scheduled and	PA
	Tertiary Care	
Paul McCabe	Chief Pharmacist	PMcC
Richard Bannister	Project Director (dialled in)	RB
Miguel Garcia Alcaraz	Associate Medical Director for Mental Health	MGA
	Finance Business Partner	
Michelle West	Associate Managing Director	MW
Maria Benbow	Group Director Commercial Services	MB
Jo Poynter	Associate Managing Director Health Modernisation	JP

#### In Attendance:

Welcome / Apologies	Action
air welcomed the Our Hospital Project attendees.	
ies for absence were received from	
Robert Sainsbury (Group Managing Director), Dr	
(Clinical Director for Our Hospital Project), Panela Hobbs (Head of	
)	hair welcomed the Our Hospital Project attendees. gies for absence were received from Robert Sainsbury (Group Managing Director), Dr w Mitchell (Clinical Chief Information Officer), Ashok

## Minutes of Previous Meeting Action The Minutes of the meeting held on 18 September 2019, were taken as read and approved. Image: Comparison of the september 2019, were taken as read and approved.

2	New Care Model Update - CL	Action
The D	irector General provided a verbal update as follows:-	
•		35
•	Presentation given to States Members and media briefing. HCS received positive feedback.	
•		33
•	Next steps – presentation to the Comite Des Connetables on 11 November 2019 and then public briefings to all Parishes. AMDs, Paul McCabe and Lead Nurses will be invited to attend.	
•		35
Tha D	irector General expressed her thanks to	

#### 3 **Project Team update** Action The Project Director (RB) updated the Group as follows: -Interviews for Health Planning Advisers take place on 12 November 2019. • Project Management Team have been appointed but not formally - now waiting on due diligence. • Procurement of Lawyers - contracts to be put in place. Clinical Director for Our Hospital Project (AH) is working on the following:-Site Selection Criteria - this will be clinically led. Questions to analyse the various site options • and to steer consultation which will begin January 2020. Reviewing work from the previous Future Hospital Project by EY and MJM (previous Health Planners) Options for hospital - hospital/hospital and campus/multiple sites Action: Group Medical Director and Clinical Director for Our Hospital Project to meet to discuss PA/AH size and specification options. **RB/MB** Action: Project Director to confirm the Commercial Lead

4	Procurement Update	Action
Group	Director Commercial Services (MB) provided a verbal update to the Group, the main points: -	
•	Health Planner and Clinical Design Team interviews take place on 12 November 2019.	
•	MB met with Steven Mair, HCS Finance Director regarding	35
•	Appointment of legal services – subject to contract.	

5	Finance Update	Action
The F	inance Business Partner ( informed the Group of the following:	
• •	Spend as at 30 October 2019 - £150k. Forecasted spend by year end - £460k. Longer term forecasts available later this month. Currently working through tenders and work packages.	
Actio	n: to provide monthly finance reporting	PH
Ageno	Group Director Commercial Services (MB) informed the Board that a draft template for P59 requests for cy Staff will be presented to the Government of Jersey Chief Executive. Going forward the template will be compliance and transparency for Scrutiny.	
	n. Taranlata ta ka aant ta UCC Financa Disastan	MB

Action: Template to be sent to HCS Finance Director

6	Any Other Business	Action
The Bo	pard discussed Our Hospital Meetings .going forward and agreed:-	
•	Meetings take place monthly on a Wednesday afternoon, 2.00 p.m. – 4.00 p.m.	
•	Group Medical Director (PA) and Clinical Director for Our Hospital Project (AH) to review Agenda.	AH/PA

7	Date & time of next meeting
The da House	ate of the next meeting takes place on Wednesday 4 December at 3.30 p.m. – 5.00 p.m., 4 <sup>th</sup> Floor, Peter Crill



Date: 4 December 2019 Time: 3.00pm – 4.30pm	Venue: 4 <sup>th</sup> Floor, Peter Crill House
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Present:		
Robert Sainsbury	Group Managing Director (Chair)	RS
Patrick Armstrong	Group Medical Director	PA
Rose Naylor	Chief Nurse	RN
Michelle West	Director of Operations	MW
Ashok Handa	Clinical Director	AH
Richard Bannister	Project Director	RB
Maria Benbow	Group Director Commercial Services	MB
Paul McCabe	Chief Pharmacist	PMc
Andrew Mitchell	Chief Clinical Information Office	AM
Miguel Garcia-Alcaraz	Head of Mental Health AMD	MGA
Jo Poynter	Director of Operations Community	JP

### 1 Welcome / Apologies Action RS welcomed the Our Hospital Project attendees. Apologies were received from Caroline Landon, Director General, Maria Benbow, Group Director Commercial Services and Serv

2	Minutes	Action
The M	nutes of the meeting held on 6 November 2019, were taken as read and approved	

3 Jersey Care Model - Update	Action
The Group Managing Director informed the Group that public meetings have be St. Mary, St. Helier and Trinity, and overall, the meeting have been well atte positive. Key themes raised at the meetings are: -	
<ul> <li>Workforce and recruitment</li> <li>Finance - Anxieties around paying more for health care</li> <li>Engagement before appointment of Health Planner</li> <li>Will the Care Model hold up the future hospital project?</li> <li>GP's capacity and recruitment</li> <li>Impact on volunteers and voluntary sector</li> </ul>	
The Health and Social Care Scrutiny Panel have called for a review into the Je	rsey Care Model.
	35

4	Lines fiel Declard lie date	Action
4	Hospital Project Update	Action
	inical Director and the Project Director gave a presentation to the Group on the proposed site selection that was presented to the Political Oversight Group.	
The ke	y areas discussed: -	
<u>Seque</u>	ntial Testing	
• • • • •	Look at clinical and patient priorities 50 sites down to a small number of shortlisted sites. Compiling a list of clinical questions. Formation of Citizens Panel to scrutinise consisting of 24 individuals. The test will be applied to the list and the team and the Political Oversight Group will sign off in principal on 16 December 2019. The agreed questions ready for January to allow the process of elimination of sites. Call for sites will go out week commencing 9 December 2019. Pre-Qualification process – questions that will have a large impact and significantly reduce risk Tests around meeting patient needs	
Next S	teps: -	
•	Tendering for a delivery partner/design and build contractor.	
•	The Clinical Director will require support from Our Hospital Group – Ashok will send the presentation to the AMDs for comment.	
•	The Project Director would like discussions to take place about when the hospital is built, how are we going to run and maintain it so that it maintains, i.e. uplift in skills, equipment, identifying gaps in technical abilities or outsource in the future etc.	
•	Appointment of design and planning team who will visit areas already completed. RB and AH are looking for volunteers to visit these facilities which will involve two days travel.	
•	Meetings have taken place with the Health Planner. AH suggested that he provide a short presentation and briefing to AMDs from mid-January	
Ac	tion: PA to invite AH to AMD meeting.	ΡΑ

5.	Procurement Update	Action
In the follows	absence of the Group Director Commercial Services, the Project Director provided a brief update as	
• • •	Mace have been appointed to run the Project Management Office (PMO) PWC and MJM have been appointed as Health Planner Tender out for small specialist services Tender out for Design and Build Contractor	

6.	Finance Update	Action
	oject Accountant ( led the Group through the Financial Position Summary as at 30 November 2019. ain points to note: -	
•	Annual Budget of £845k. Because of the delay with the Project Team the forecast for the year end expected to be £492k. We have drawn down £500,000 and delivered back to Treasury and are putting in a bid to have refunded in 2020.	

• The total spend to 30 November is £190k. The recent appointments of the Health Planner and PMO December costs will bring spend up to the forecast for year end.

The Project Accountant is currently working on the forecast for the next two years to deliver the project and when funding is agreed LJ will report back to the Group.

7.	Group Medical Director Update	Action
invited	roup Medical Director expressed his full support together with the Associate Medical Directors and the Clinical Director to describe the site selection process to the MSC at their next meeting, and ter an update on the Hospital Project become a standing item on the Agenda.	
Action	: PA to invite AH to give presentation to MSC.	ΡΑ
Action	: Our Hospital Project to be an agenda item at monthly MSC Meetings.	РА

8.	Any Other Business	Action
Nil		

9.	Date & time of next meeting
The da	ate of the next meeting Wednesday 8 January 2020 at 3.30 p.m.



Present:		
Caroline Landon	Director General (Chair)	CL
Robert Sainsbury	Group Managing Director	RS
Patrick Armstrong	Group Medical Director	PA
Rose Naylor	Chief Nurse	RN
Michelle West	Director of Operations	MW
Ashok Handa	Clinical Director	AH
Paul McCabe	Chief Pharmacist	PMc
Andrew Mitchell	Chief Clinical Information Office	AM
Jo Poynter	Director of Operations Community	JP
In Attendance:		

1	Welcome / Apologies	Action
	Apologies were received from Richard Bannister, Project Director, Miguel Garcia-Alcaraz, Head of Mental Health AMD, Maria Benbow, Group Director Commercial Services,	

2	Hospital Operational Update	Action
		35

3.	Minutes	Action
	The Minutes of the meeting held on 4 December 2019, were taken as read and approved.	

4.	Jersey Care Model (JCM)- Update	Action
•	600 people attended the Jersey Care Model Engagement Sessions held at Parish Halls around the Island. The Communications team are collating feedback and questions from the meetings and a report to follow.	
•	Overall, the public were very supportive of the JCM and are keen for a Hospital to be built as soon as possible. The public welcomed the HCS Team and were interested in HSC work plans. HCS will arrange more public engagement sessions in the future focussing on areas.	

•	Price Waterhouse Coopers (Health Planners) are stress testing the JCM will be attending Care Groups and meeting with clinical staff. Staff and other interested parties will be invited to participate in working groups. Points will be available from PWC around February and this will be shared with the Group. PWC will end their work in March and a report on their findings will be shared with the Political Oversight Group (POG.	
	Action: Interim Director of Modernisation to circulate to Group biography of	HL

4	Hospital Project Update	Action
	The Clinical Director updated the Group on progress on six work streams as follows: -	
	Project Brief –	35
	• <b>Delivery Partners</b> - tendering underway for a delivery partner/design and build contractor. Three bids have been received, two with local experience. The potential delivery partners have visited Jersey, and representatives from the Our Hospital will be visiting examples of their work across the UK and Europe. The deadline is to appoint by 1 April.	
	• <b>Citizens Panel</b> - closing date for expressions of interest from the public will be on 24 January 2020. 24 panel members will be appointed at the end of January. The Citizens Panel will scrutinise questions on site selection and sequential test.	
	<ul> <li>Site Selection – Citizens Panel and Public Consultation to feed into site selection.</li> <li>Preferred Site – By June deliver the outline business case</li> <li>Planning Application –</li></ul>	35
	Action: Hospital Project meetings to take place bi-weekly from April 2020	35 35

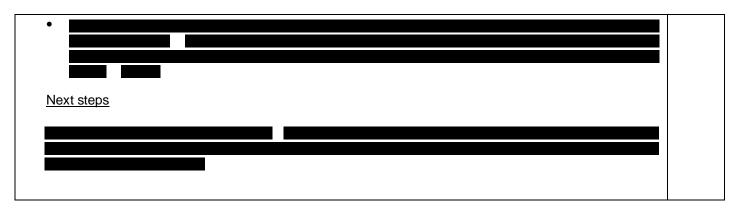
Procurement Update	Action
Nothing to report.	
	Nothing to report.

6.	Finance Update	Action
	The Head of Finance Business Partnering (LJ) led the Group through the Financial Position Summary as at 31 December 2019. The main points to note: -	
I		
	The next procurement will be the Delivery Partner.	

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**Our Hospital Project** 



7.	Group Medical Director Update	Action
•	The Clinical Director has been invited to attend monthly AMD and MSC meetings.	
•	The Group Medical Director emphasised the need to look at engaging clinicians within the Community communicating through internal then external open hospital meetings and messages.	

8.	Any Other Business	Action
	There was no other business.	

9.	Date & time of next meeting
	The date of the next meeting Wednesday 12 February 2020 at 10.00 a.m.



Date: 12 February 2020	Time: 10.00 a.m. – 12.00 p.m.	Venue: 4 <sup>th</sup> Floor, Peter Crill House

Present:		
Caroline Landon	Director General (Chair)	CL
Robert Sainsbury	Group Managing Director	RS
Patrick Armstrong	Group Medical Director	PA
Richard Bannister	Project Director	RB
Paul McCabe	Chief Pharmacist	PMc
Andrew Mitchell	Chief Clinical Information Officer	AM
Hilary Lucas	Interim Modernisation Director	HL
In Attendance:		

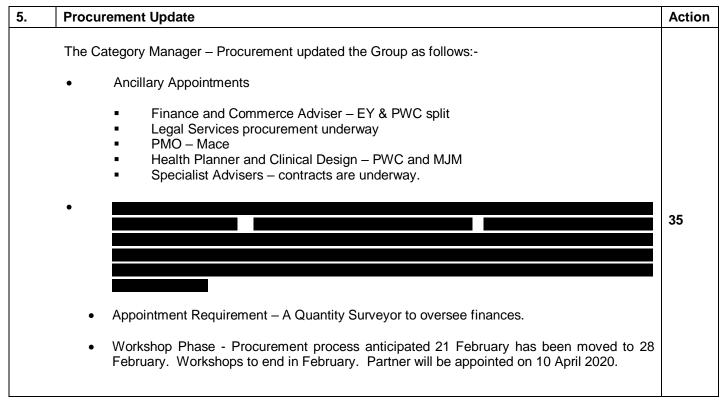
Action

2.	Minutes	Action
	The Minutes of the meeting held on 8 January 2019, were taken as read and approved.	

3.	Jerse	y Care Model (JCM)- Update	Action
	•	Intermediate Care Session took place earlier today around the specification and the Women, Children and Family Care Group met yesterday. Feedback has been positive. The technical groups have also met and there are discussions around the interconnect between the Technical Groups, Our Hospital and the Jersey Care Model streams.	
	•	Submissions on the JCM are going to the to the Hospital and Social Security Scrutiny Panel. The Chief Clinical Information Officer (AM) is due meet Scrutiny on 13 February 2020.	
	•		33

#### **Our Hospital Project**

4	Hospital Project Update	Action
	<ul> <li>The Project Director updated the Group on progress as follows: -</li> <li>8 April 2020 – the Hospital Political Oversight Group (POG) meet to decide the future of the New Hospital Project. The Hold Point Report will be presented to Senior Officer Steering Group on17 March and then to POG.</li> <li>24 March 2020 – Final interviews for the Delivery and Build Partner</li> <li>Citizens Panel – The first meeting takes place on 29 February 2020.</li> <li>Site Selection - two possibly three sites shortlisted. RB raised a question regarding ground floor requirements – there is a need to look at the minimum requirements for the site.</li> </ul>	35
		RB
		AH/HL /RB
		HL/RB



٠	will be moving to another role. will take over the post of Category	25
	Manager - Procurement.	

Action: CL to speak to MB to second Dan De La Cour to Hospital Project Team for consistency.

6.	Finance Update	Action
	The Head of Finance Business Partnering ( reported that there is no month one report but month 2 will be presented at the next meeting.	
•	Current focus is on SOC. meeting RB on 13 February to discuss forecast for delivery partner and FM. The forecast that will take us up to March 2021, so it must be accurate before presenting it to the Treasury Minister.	
•	A definitive forecast will be brought to the next Hospital Project Meeting.	
•	has been appointed to the post of Our Hospital Business Partnering and starts on 17 February 2002 and will be assisted by a Finance Business Partner.	
•		35
	Action: AH & PA to meet weekly.	
	Action/Requirement for EY & PWC to get together to discuss SOC	
	Action: to arrange a meeting with Steven Mair, EY representative and RB to discuss SOC	

7.	Group Medical Director Update	Action
	Nothing to report	

8.	Any	Other Business	Action
	•	AM commented on the lack of Communication around staff engagement for JCM and Hospital Project.	
		Action: re Our Hospital comms and the sending out of a Highlight Report – to chase Carl Walker to facilitate weekly comms	
	•	Handover meetings to be arranged between <b>and the set of the set o</b>	ĸ

9.	Date & time of next meeting
	The date of the next meeting Wednesday 4 March 2020 at 3.30 p.m., 4th Floor, Peter Crill House





Date: 04 March 2020	Time: 3.00 p.m. – 5.30 p.m.	Venue: 4 <sup>th</sup> Floor, Peter Crill House
Present:		
Caroline Landon	Director General (Chair)	CL
Robert Sainsbury	Group Managing Director	RS
Patrick Armstrong	Group Medical Director	PA
Richard Bannister	Project Director	RB
Ashok Handa	Clinical Director	AH
Paul McCabe	Chief Pharmacist	PMc
Miguel Garcia-Alcaraz	Head of Mental Health AMD	MG
Michelle West	Director of Operations	MW
Jo Poynter	Director of Operations Community	JP
In Attendance:		<b>-</b>

# 1. Welcome / Apologies Action Apologies were received from; Rose Naylor (Chief Nurse), Ashok Handa (Clinical Director), Maria Benbow (Group Director Commercial Services), Andrew Mitchell (Chief Clinical Information Officer), Andrew Mitchell (Chief Clinical Information Officer), (Deputising for Maria Benbow)) and Image: Commercial Service)

2.	Minutes	Action
	The Minutes of the meeting held on 12 February 2020, were taken as read and approved.	

3.	Jersey Care Model (JCM)	Action
Fe	on screen presentation edback on the presentation requested by <b>CL</b> to the room.	
NC • •	otes from the slides and feedback from the room were taken by	35
•	Key for benefits - needs to be adaptable	1





Benefits – to state how long the new build hospital will last	
At the end of each slide <b>CL</b> invited the group to approve the slide before moving on.	
	АМ
It was <b>NOTED</b> that logo on the slides was blue, should be grey as blue is a public document.	
Any other comments? All stated 'No further comments'	

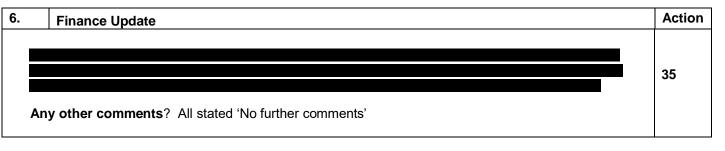
3.	Hospital Project Update	Action
The	e Project Director updated the Group on progress as follows: -	
• • • •	Working towards HP1 & HP2 end date 8th April, to include Discussions narrowing down sites from 82 Costs to date Consultation on the Specialist Planning Guidance Consultation with islanders Site selection Risk register	



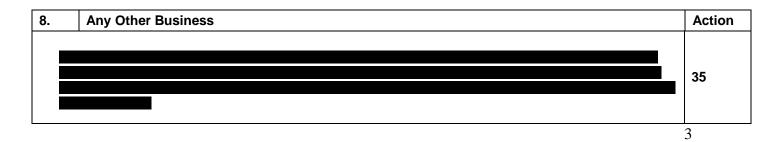


Key Dates:	
<ul> <li>March 7<sup>th</sup> - Panel of citizens – will come together to determine the criteria for shortlisting potential sites for a new hospital, which would be expressed as questions and sequence of questions</li> </ul>	35
July - Next big Hold Point in July gets us down to 1 site	
Any other comments? All stated 'No further comments'	

4.	Procurement Update	Action
	introduced himself to the group as the Procurement replacement on the project from	
Up	date on recent appointments:	
•	Legal Advisor – appointed Commitment from Special Advisors – ongoing Cost Consultant – Scope being finalised Delivery Partner – to be appointed by POG on 8th April	
		35



7.	Group Medical Director Update	Action
No	thing to report	







ACTION: Bring comms strategy back to the project team meeting in April (design and delivery partner to be present at that meeting) AH/RB

#### 9. Date & time of next meeting

The date of the next meeting Tuesday 21 April 2020, 4<sup>th</sup> Floor, Peter Crill House





Date: 06 May 2020	Time: 3.00 p.m. – 5.30 p.m.	Venue: 4 <sup>th</sup> Floor, Peter Crill House
<b>,</b>		and via Teams

Present:		
Caroline Landon	Director General (Chair)	CL
Patrick Armstrong	Group Medical Director	PA
Richard Bannister	Project Director	RB
Ashok Handa	Clinical Director	AH
Andrew Mitchell	Chief Clinical Information Officer	AM
Paul McCabe	Chief Pharmacist	PMc
Miguel Garcia-Alcaraz	Head of Mental Health AMD	MG-A
Michelle West	Director of Operations	MW
Jo Poynter	Director of Operations Community	JP

#### In Attendance:

1.	Welcome / Apologies	Action
	Apologies were received from: - Robert Sainsbury (Group Managing Director), Rose Naylor (Chief Nurse), Maria Benbow (Group Director Commercial Services),	

2.	Minutes	Action
	The Minutes of the meeting held on 04 March 2020, were taken as read and approved.	

	Jersey Care Model (JCM)	Action
		35
Aw	copy of the JCM was requested by the Project Director to share with MJ Medical.	CL/
A	ny other comments? All stated 'No further comments'	





3.	Hospital Project Update	Action
	The meeting was opened by a summary of actions over the past few weeks by the Clinical Director.	
		35
	Timeline presented on screen by Project Director: -	
	<ul> <li>Revised shortlist of sites to go to COM in July. No further debate until feasibility work as to preferred site (12 weeks).</li> </ul>	
	Site Debate in Assembly in November	
	<ul> <li>Delivery Partner early in July. Functional Brief outcome will be converted into detailed employers' requirements and shortlist of sites will help with the design work in November. In this design stage the Project Team will engage the Citizens' Panel.</li> </ul>	
	•	35
	Any other comments?	
	<b>COCG</b> wished to understand whether there were an 'gains on time' in relation to the timeline:	АН
	<b>COCG requested</b> and update from the Clinical Director in relation to the Clinician Team meetings for input into the project from a staff and clinical perspective. AH to start 1 <sup>st</sup> June to have Teams meetings with clinicians with regards to essential services/departments required.	
4	Dreeurement Undete	Action

4.	Procurement Update	Action
N	o update	
A	ny other comments? All stated 'No further comments'	





Finance Update	Action
update	
y other comments? All stated 'No further comments'	
	Finance Update         update         y other comments? All stated 'No further comments'

7.	Group Medical Director Update	Action
No	No update	
An	y other comments? All stated 'No further comments'	

8.	Any Other Business	Action
h	lospital communications/newsletter. Due to slight change of focus, the Chair of POG wanted to make is announcements before dissemination of hospital comms. Further update to be provided by communications and Engagement Lead ahead of the next meeting.	
	<b>OCG requested</b> updates from the Project Team on a weekly basis. Project Director will discuss equirements with the Communications and Engagement Lead and report back.	AH/RB
A	ny other comments? All stated 'No further comments'	

9.	Date & time of next meeting
Th	e date of the next meeting 3 <sup>rd</sup> June 2020 (3.30 pm to 5.00 pm), 4 <sup>th</sup> Floor, Peter Crill House and via Teams



2.



#### **Our Hospital Project - Clinical and Operational Client Group**

Date: 13 July 2020	Time: 11:00 – 12:30	Venue: 4th Floor, Peter Crill House
_		and via Teams

Present:		
Caroline Landon	Director General (Chair)	CL
Richard Bannister	Our Hospital Project Director	RB
Robert Sainsbury	Group Managing Director	RS
Rose Naylor	Chief Nurse	RN
Ashok Handa	Our Hospital Project Clinical Director	AH
Paul McCabe	Chief Pharmacist	PMc
Jo Poynter	Director of Operations Community	JP
Richard Glover	Our Hospital Planning Lead	RG
Andrew Mitchell	Consultant	AM
Paul Hughes	Associate Medical Director	PH

In Attendance:		

1.	Welcome / Apologies	Action
Apolo	gies were received from: -	
Patric	k Armstrong, Michelle West, <b>Miguel Garcia-Alcaraz</b> , Michelle West	

#### Minutes Action The Minutes of the meeting held on 03 June 2020 will be reviewed at the meeting to be held on 12 August 2020





3. Hospital Project Update	Action
<b>Draft Functional Brief</b> A PowerPoint presentation was delivered by the Our Hospital Clinical Director, which explain the development of the draft functional brief and how it informed the site shortlisting process	
Draft Functional Brief and AH's contact details to be emailed to COCG members so they r forward any questions.	may JH/SA
<b>Site Shortlisting</b> A PowerPoint presentation was delivered by the Our Hospital Project Director, which explained the site shortlisting process and named the five shortlisted sites as: St Andrew's Park, First Tow St Helier; Fields North of Five Oaks, St Saviour; Millbrook Playing Fields, St Lawrence; Overdale Hospital, St Helier; The People's Park, St Helier.	ver,
The Chair asked if there were any questions:	
	35
■ asked if the proposed hospital is bigger than the current active clinical facilities or if the increase in size is only bigger due to extra spaces, such as that for education, wellbeing centre etc.	,
As presented by AH, HL confirmed that taking the size and space of the current Jersey General Hospital and uplifting to current building standard takes the footprint from 40,000m <sup>2</sup> to 55,000m <sup>2</sup> for like for like facilities. advised that the presentation also provided the items be added over and above the current footprint, justifying the increase in footprint.	
	35





However, the new hospital would also be designed to be flexible and provide additional capacity such as the potential to provide bed head services in wellbeing and education spaces, as well as alternative uses of private wards; courtyards might also provide additional space. It was also advised that discussions were taking place with other GoJ departments with regard to parking.

#### Introduction to ROK FCC

introduced himself as Project Director of ROK FCC and explained that ROK, a local company and FCC, the twelfth largest construction company in the world, agreed to form a Joint Venture in 2019.

introduced as Clinical Director of ROK FCC, who would be working closely with Clinicians/medical staff, and Architectural Director of ROK FCC, who would be leading on planning/site selection.

advised that the companies within ROK FCC have been involved in 250 hospitals in 80 countries and provided a PowerPoint presentation displaying some of the hospitals completed in Spain, one of which was built by FCC in Majorca and used 180 local sub-contractors. also discussed the construction of the Mersey Gateway Bridge in the UK, for which a visitor's centre was created that was free to visit and informed visitors of the local history and heritage, environmental issues and the building process. The presentation also displayed Jersey's Police Station, Les Quennevais School and College Gardens as examples of some of the work already completed on the island by ROK.

The Chair asked if there were any questions:

noted from the presentation that the hospital built in Majorca was built at a cost of £300m and asked if the cost of our hospital could therefore be reduced. advised, that over the next year, ROK FCC would be developing a cost plan, within which the design would be developed and would be market tested. advised that the hospital built in Spain was constructed 9 years ago and that it is generally cheaper to build in Spain, which explains the lower cost.

The Director General advised that she has been impressed with the partnership struck with ROK FCC and felt that they had listened and understood requirements. The team had been impressed with the hospitals they visited, which had lots of light, didn't look and feel like hospitals and it was highlighted this was the requirement for Jersey. COCG agreed that it was important for there to be a good partnership and for parties to work together. RN noted that on the Mersey Gateway Bridge, the visitor centre engaged the public and created a connectivity with the community. It was felt that this showed FCC had worked in a collaborative way with the local community, which would be a positive way to work in Jersey also.

introduced himself and confirmed that the design would be clinically led. He emphasised the importance of clinicians in the design process since their input now would lead to a better product





and provide a building in which they would want to work and take pride. Advised he will be organising a sequence of clinical user group meetings commencing on 3/8, which will be made up of 10-12 groups, containing different departmental services within each.

4.	Any Other Business	Action
Any c	other comments? All stated 'No further comments'	

5.	Date & time of next meeting
The da	ate of the next meeting 19 August 2020 (Time: tbc), 4 <sup>th</sup> Floor, Peter Crill House and via Teams