

## Hospital Policy Review Board – Workshop 2 - 3/08/18

### 12pm-3pm

<b>Attendees:</b>	<b>FH team (Part B)</b>
Connetable Christopher Taylor (CT) – Project Board Chair	Bernard Place (BP)
Deputy Richard Renouf (RR)	Philippa McAndrew (PM)
Deputy Trevor Pointon (TP)	Ray Foster (RF)
Deputy Rowland Huelin (RH)	Jess Hardwick (JH)
Deputy Carina Alves	
Connetable Richard Buchanan	
Ralph Buchholz – SoJ Officer Support (RB)	

### **Part A – Board members only**

<b>Item</b>	<b>Minute</b>	<b>Action</b>
<b>1. Apologies</b>	Apologies from Connetable Richard Buchanan – attended meeting from 2pm onwards.	
<b>2. Approve Minutes and scoping paper from last meeting</b>	CT suggests minutes from previous Hospital Review Board are signed off, all in agreement.	
<b>3. Board discussion</b>	<p style="text-align: center;"><b>a. The need for a new Hospital</b></p> <p>CT: Highlights that this has already been actioned and the need for a new general hospital already published.</p> <p style="text-align: center;"><b>b. Site selection process urban v rural</b></p> <p>CA: Questioned whether Warwick Farm was only ruled out due to it being on a greenfield site.</p> <p>RB: Highlighted that there were other issues with the sites, such as transport and infrastructure issues as well as being against planning policies in the Island plan.</p> <p>CT: Asked what the percentage breakdown of those walking to the hospital was between staff, patients and visitors.</p> <p>RB: Suggested that this would be a question to put forward to the Future Hospital team in the second half of the meeting.</p> <p>RR: Asked if Atkins consultants consulted with the planning department.</p> <p>RB: Stated that Atkins did consult and strategic planning policy advice was provided on the initial selection process for the long listed sites, whilst more detailed site specific advice was given when the short listed town sites were known such as on issues such as the massing and impact on the urban character areas.</p>	

	<p>CT: Mentioned that at a States Members workshop there was a general agreement that planning was subservient to health, and whilst there was no formal decision most were in favour.</p> <p>CT: Mentioned that the dual site option was put forward when the Council of Ministers cut the budget to £250m, prior to this Warwick Farm, was removed from shortlist due to not being deliverable. Further pointed out that St Saviour, Warwick Farm and Overdale scored well on size, but higher risk according to planning.</p> <p>RB: Added that there is also a policy that supported new health sites being in the built up areas as these were more sustainable sites.</p> <p>CT: Questioned how well researched that policy was.</p> <p>RB: Suggested that it was very well researched and was subject to a full and independent examination by a planning inspector as part of the review of the Island Plan.</p> <p>CA: Questioned why if planning should be subservient to health.</p> <p>RR: Suggested that there were still planning issues, and highlighted the recent rejection of the hospital proposal as evidence.</p> <p>CA: Asked if the Island plan could be changed.</p> <p>RR: Highlighted that this is a long process that would need consultation and a vote to be changed.</p> <p>RB: Suggests that there would also need to be evidence of the health benefits over planning considerations.</p> <p>RR: Highlighted that when sites were ranked, Warwick Farm came fifth, taking into account planning considerations.</p> <p>CA: Mentioned that since ‘planning should be subservient to health’ there has been no reassessment of sites.</p> <p>RB: Pointed out that whilst there had been no formal reassessment since then the views of States Members had been obtained through the workshops undertaken.</p> <p>TP: Asked why Atkins didn’t get reappointed.</p>	
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	<p>RB: Pointed out that Atkins didn't tender for the second phase and Gleeds got appointed.</p> <p>RH: Highlighted that he was looking for clarity on what is relevant evidence or not, highlighted concerns voiced over Atkins in June 2013 minutes. Also mentioned that he would like to contact Atkins to seek their view.</p> <p>RR: Reads from the minutes that Julie Garbutt (JG) cites a lack of communication and responsiveness from Atkins.</p> <p>RB: Proposed that a conference call would be arranged with Atkins, to be arranged by him.</p> <p>CT: Raised concerns that it was not clear to him yet what planning assessment evidence was used to make a decision on Urban v Rural yet. What for example was the weighting given to the criteria used?</p> <p>RH: Points out that sites were considered as sites and not health provisions.</p> <p>RB: Suggests moving to Part B of the meeting and inviting the Future Hospital team to answer questions and further discuss the site selection process.</p>	<p><b>RB to organise conference call with relevant staff from Atkins</b></p>
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**Part B – With FH team members.**

Item	1. Introduction	Action
<p><b>1. Introduction</b></p>	<p>CT: Asked the percentage breakdown of the footfall arriving at the hospital.</p> <p>JH: Highlighted information from the transport assessment seen in the EIA. Explained that there was a survey on a cross section of all hospital users before handing out a summarising handout. Further highlighted that raw data provided by the survey was available.</p> <p>RB: Highlighted that this information made up part of the planning application and suggested that he could email the raw data from the survey to the board members.</p> <p>JH: Reassured the board that the survey was conducted by an independent company.</p> <p>CT: Highlighted that there was a 45% response rate from the survey which was good.</p>	<p><b>RB to circulate transport data including blue light responses to Board</b></p>

	<p>RH: Questioned how many of those attending hospital via ambulance were blue light emergencies as this was most relevant.</p> <p>BP: Suggested that this information could be provided for the next meeting.</p>	
<p><b>2. <u>Site selection process current site Bernard Place &amp; Philippa MacAndrew</u></b></p>	<p>PM: Begins presentation on site selection process.</p> <p>CT: Questioned the weight given to planning by the Atkins report.</p> <p>RF: Explains the ranking of each site and the breakdown of how scores were given. Further explains that planning considerations were broken down into three elements; ‘failure of obtaining consent’, ‘public opinion’ and ‘additional works.’ Highlights that there was a weighting process to each but would need further time before reporting the exact weighting to the board.</p> <p>PM: Highlights that sites were scored again by Gleeds at a later date and also included the scoring of People’s Park – using the same criteria.</p> <p>CT: Further highlights concerns that it isn’t clear if the same weighting was given to patient safety and planning.</p> <p>RH: Questioned why People’s Park wasn’t scored in the Atkins report as there may have been a different public opinion had it been mentioned earlier.</p> <p>RF: Highlighted that this could have been due to the land at People’s park not being publicly owned and on a public open space site which is unfavourable.</p> <p>RB: Suggested that further detail on weighting will be provided in subsequent meetings.</p> <p>RH: Asked whether a site could be precluded due to poor utilities and infrastructure and questions how much research was done into this. Also although a cost the utility problems for some of the sites are not insurmountable.</p> <p>RB: Highlights that this information (Atkins report) is in the packs given to Board members and that utility issues are included as part of the selection process and weighted.</p> <p>RH: Stated that he would like a 2012 analysis on People’s Park for comparison with other sites at the time.</p>	<p><b>RB to circulate information on the weighting used by Atkins</b></p>

	<p>RR: Pointed out that the board cannot obtain and create their own evidence, as they need to just test the evidence presented to COM and MOG at that time.</p> <p>RH: Suggested that there wasn't enough quantified facts from February 2013 minutes to rule out the Waterfront site, suggested that the lack of data was replaced by 'bully' tactics by the IFC.</p> <p>CA: Considered that at that time SoJdC had a strong influence and had promised significant benefits arising from the IFC for St. Helier and the Island including sinking the road, 500 space car park and £50 million windfall.</p> <p>RF: Sat in meeting where it was clear that there were many conflicts preventing the use of the waterfront site such as the existing master plan, replacement of open space concerns, the viability of the office development on an alternative site, and the very significant visual impact of a large hospital development on the waterfront.</p> <p>RH: What economic impact evidence or advice was offered to Ministers of the waterfront option?</p> <p>RB: indicated that the minutes reference that advice was available and would be provided to the Board.</p> <p>PM: Continued presentation and went on to explain why the Dual Site option was looked at, how it met budget and obtained approval from the Ministerial Oversight Group.</p> <p>Richard Buchanan (CRB) enters the meeting.</p> <p>PM: Highlighted that by 17<sup>th</sup> December 2014 the options were Dual Site, a new build at Overdale and the Current Site.</p> <p>CA: Why was there such a difference in funding between Atkins and Gleeds?</p> <p>RF: Will provide a paper explaining the bench making changes</p> <p>CT: Questioned why the Parade Gardens was discounted.</p> <p>RF: Explained that due to the footprint of the site the building would have required huge massing. Explained that there was a covenant on the land and that the owner was approached but no response was received. Also suggested that People's Park was a better alternative if building on a park was acceptable.</p> <p>PM: Highlighted the Constable of St Helier removed People's Park from consultation due to public opposition in (p3/2016).</p>	<p><b>RB to provide original economic advice to Board.</b></p> <p><b>RF to provide benchmark report on funding differences</b></p>
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	<p>PM: Mentioned that current site was preferred in States member's briefings and was considered the most politically acceptable.</p> <p>CA: Asked if data from States member's workshops could be provided.</p> <p>RR: Pointed out that this was not a technical weighting it was to see how politically acceptable the sites were.</p> <p>CA: Suggested that political acceptability should not be relevant to building a new hospital.</p> <p>RR: Highlights that political acceptability ruled out People's Park so had to be taken into consideration.</p> <p>RH: Mentioned that in the Gleeds report, option 25 of the current site is £629m and questioned how that came to £466m.</p> <p>PM: Highlighted that this was a different scheme despite being on the same site. Suggested that another meeting was required to properly go over it.</p> <p>BP: Reassured the board that the clinician's survey taking place within the hospital was not from the Future Hospital Project and instead was from the Clinical Staff Director, Andrew Woodward.</p>	
<p>3. <b>Board Discussion (Members from FH left meeting)</b></p>	<p>RB: Suggested trying to find out the questions that would be asked in the survey to clinicians as to not as the same questions.</p> <p>CT: Expressed interested in only hospital staff taking part in the survey. Highlighted that support staff and health care assistants should be involved, as well as porters. Clarified that he didn't think admin and similar jobs should be involved.</p> <p>CA: Seconded that porters and maintenance should be involved in the survey.</p> <p>CT: Stated that he would like opinion on site selection, and levels of consultation. Also expressed desire to hire a mini bus and walk around sites with an officer.</p> <p>RB: Suggested he would find a time to get this organised before the end of the month.</p> <p>CT: Further expressed interest in a visit for the board members to Guernsey and talk to their consultants regarding an out of town hospital.</p> <p>RB: Suggested that this be done in early September.</p>	<p><b>RB to contact Andrew Woodward to ensure no overlap with the survey hospital staff are undertaking</b></p> <p><b>RB to organise Board site visits to sites in terms of reference</b></p>

	<p>CRB: Expressed interest in also visiting the Isle of Man as they have an out of town hospital site also on a green field site.</p> <p>RH: Suggested Addenbrookes be visited for IT provision.</p> <p>CA: Questioned whether there was data about blue light times available for the current hospital.</p> <p>RB: Provided reassurance that it had been done and could be provided.</p> <p>CT: Highlighted that Jersey was built with St Helier as the central hub with spokes and roads from it, whereas Guernsey and the Isle of Man were not like that.</p> <p>RH: Asked if it was acceptable to share the scope of the board and the terms of reference, this was confirmed.</p> <p>RB: Highlighted that there was a workshop the following week to wrap up some of the things discussed in the meeting. Pointed out that everything was on SharePoint to be viewed online. Further highlighted that the website for the Board would enable be live in the next week, and to let him know what needed to be added.</p>	<p><b>RB to look at Board visit to Guernsey</b></p>
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### Attachments

Presentation to Policy Board: [Workshop 2 presentation](#)