

## **Calderdale and Huddersfield Service Reconfiguration**

### **Update Report for the Calderdale and Kirklees Joint Scrutiny Committee Meeting to be held on 23<sup>rd</sup> March 2020**

#### **1. Background**

In December 2018 the Department of Health and Social Care (DHSC) announced the allocation of £196.5m capital funding for investment at Huddersfield Royal Infirmary (HRI) and Calderdale Royal Hospital (CRH) to enable the reconfiguration of services across the hospital sites and confirmed that approval of a Strategic Outline Case (SOC), Outline Business Case (OBC) and Full Business Case (FBC) by DHSC and Treasury was required.

#### **2. Purpose**

The purpose of this report is to provide an update for the Joint Scrutiny Committee on the following:

- outcome of national consideration of the Strategic Outline Case (SOC);
- process and timescales to develop the business cases (OBC and FBC);
- progress to develop the travel plan.

A separate report has also been provided for the Joint Scrutiny Committee describing the public and colleague involvement events undertaken to develop the design brief for Huddersfield Royal Infirmary (HRI) and Calderdale Royal Hospital (CRH), and the next steps for continued public and colleague involvement in 2020.

#### **3. Strategic Outline Case**

The Strategic Outline Case for the reconfiguration of services and investment at HRI and CRH was approved by Calderdale and Huddersfield NHS Foundation Trust (CHFT) Board in March 2019 and submitted to NHSE/I.

In January 2020 DHSC and NHSE/I confirmed approval of the Strategic Outline Case (SOC) for the Reconfiguration of Hospital Services at CHFT.

#### **4. Process and Timescales for Business Case Development**

Following approval of the SOC for the Reconfiguration of Hospital Services across CRH and HRI the Trust is now in the process of planning and developing the business cases to support this investment.

The SOC includes investment at both CRH and HRI (£177m transformation investment in CRH; and £20m backlog estate maintenance and transformation investment in HRI). Whilst investment in the estate at each site is inextricably linked to deliver the overall benefits described in the SOC the investment to respond to the significant estate risks at HRI needs to be expedited.

Following discussion with NHSE/I the Trust is therefore developing a Full Business Case by November 2020 for the HRI investment. Subject to approval processes this could enable estate investment and construction works at HRI to commence during 2021 and complete in 2022.

In parallel to this an Outline Business Case for the investment at CRH will be developed by December 2020 and subject to approval, a Full Business Case by 2022. Construction works at CRH could then commence in 2023 and complete in 2025.

An overview of the timeline for business case development and construction works at HRI and CRH is shown below.

	2020	2021	2022	2023	2024	2025
<b>CRH</b>	OBC		FBC	Commence Build		Complete
<b>HRI</b>	FBC	Commence Build	Complete			

(The above timelines include the Trust liaising with Calderdale and Kirklees Councils to request approval of planning permission.)

The content of the OBC and FBC(s) will align with and take account of Her Majesty’s Treasury (HMT) Green Book guidance on public investment business cases.

The development of the business cases for HRI and CRH will require the development of detailed building design plans. During the past six months architects have been working with the Trust to develop a design brief that will inform and support the development of the future detailed design and construction schemes at both HRI and CRH.

The approach to developing the design brief has been to ensure a continuous process of public and colleague involvement to focus on what’s important from a patient, carer, family and colleague perspective in terms of healthcare building design. A description of the work that has been undertaken and progress to date is provided in a separate report for the Joint Scrutiny Committee.

## 5. Progress to Develop Travel Plans

In 2017 Calderdale and Greater Huddersfield CCGs established a Travel and Transport Group to consider and develop plans to address the implications of changes in the configuration of Calderdale and Huddersfield hospital services in relation to public access, travel, parking and transport. In taking forward actions to address the recommendations of the travel and transport review there are broader strategic issues and developments that impact on the response required. This includes:

<b>Environmental Sustainability</b>	In 2018 the UK and 200 other nations agreed action on climate change, with a much greater role strongly implied for local and regional authorities in assisting Governments to achieve their carbon emission savings. In January 2019 Calderdale and Kirklees Councils declared a climate emergency. CHFT is currently undertaking work to develop an environmental sustainability strategy that will be considered by the Trust
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	Board in Spring 2020. The overall carbon footprint of the NHS in England accounts for 25 per cent of all public sector carbon emissions and is greater than the annual emissions from all passenger aircraft departing from Heathrow airport. Patient and staff travel accounts for 16 per cent of the NHS carbon footprint and five per cent of all transport emissions in the United Kingdom are estimated to be accounted for by health care-related journeys.
<b>West Yorkshire-plus Transport Fund - A629 Corridor Improvements</b>	£120m is currently being invested to improve travel and transport on the A629 corridor. These developments are scheduled to be completed by 2025 and coincide with the planned completion of service reconfiguration across the hospitals. The improvement of the A629 corridor will reduce journey times. Phase 4 of the development includes plans for the provision of an express bus service that will operate directly between HRI and CRH. The Trust and CCGs are currently working with both Councils regarding these plans.

To progress the travel plans the Trust is:

- Working with advisors to undertake detailed analysis of current public and staff travel data, predicted future demand and the development of a Hospital Travel Plan Strategy that will encourage public and staff sustainable travel options in the future (such as decrease in the use of single occupancy vehicles; promoting and facilitating the use of more sustainable / zero emission modes of transport; promoting the use of public transport over individual vehicle use; reducing the need to travel e.g. virtual consultations and video conferencing; preventing ill health to minimise the need for travel to hospital).
- Continuing work with Calderdale and Kirklees Councils regarding the planned improvements to the A629 corridor and the future provision of a commercial express bus service between the two hospital sites in 2025.
- Discussing with the West Yorkshire Combined Authority options to provide improved shuttle bus service between the two hospital sites that could be implemented ahead of service reconfiguration.
- Developing the plans for provision of a multi-storey car park at CRH. The aim is to provide this in the medium term ahead of service reconfiguration.

The Trust and CCGs are working with Yorkshire Ambulance Service to refresh the modelling of the impact on ambulance services that was described in the SOC and this will be included in the CRH OBC.

## 6. Recommendation

Members of the Joint Scrutiny Committee are requested to note:

- the outcome of national consideration of the Strategic Outline Case (SOC);
- the process and timescales to develop the business cases (OBC and FBC);
- the work that is being undertaken to develop the travel plan