

**LEICESTER, LEICESTERSHIRE AND RUTLAND JOINT HEALTH
SCRUTINY COMMITTEE: 18 DECEMBER 2023**

REPORT OF UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

OUR FUTURE HOSPITALS PROGRAMME UPDATE

Purpose of report

1. The purpose of this report is to provide an overview and update of University Hospitals of Leicester NHS Trust's (UHL) 'Our future hospitals programme', a multi-million pound transformation of services that UHL is proud to provide to the diverse communities we serve.

Background

2. Recognising that there are new Committee members, we have provided some background to Our Future Hospitals Programme.
3. UHL is proud to provide high quality healthcare to the people of Leicester, Leicestershire and Rutland, enabling people to live full and fulfilling lives, contributing as they are able to our vibrant, diverse communities. However, healthcare needs are changing, with a growing and aging population, and increasing prevalence of long-term conditions. The Trust cannot continue to operate in its current format.
4. Medical and nursing resources are spread thinly, many buildings are not fit for the needs of modern healthcare and have significant and expensive maintenance requirements. We need to better integrate our services to provide more joined up care, and deliver care that is closer to home. This means we need to rethink how we provide healthcare across Leicester, Leicestershire and Rutland whilst remaining true to our unshakeable determination to provide care to all who need it.
5. Our ambition is to be leading in healthcare and trusted in communities. To achieve this, two of our priorities are to provide high quality care for all and to make UHL a great place to work. One of the ways we will achieve this is through Our Future Hospitals (previously known as Building Better Hospitals), a multi-million pound transformation of our services with funding from both the national New Hospitals Programme (NHP) and other NHS sources. (Further information on the national New Hospitals Programme can be found in Appendix One). This is a once-in-a-generation opportunity to create world class facilities and transform patient care for people in Leicester.

6. In September 2019, £450m funding was confirmed by the government to progress with this programme; following which a full public consultation process was undertaken in 2020.

A consulted programme of activity

7. The consultation process identified overwhelming public support for the proposals we made, covering the key areas below, which we now aim to complete by 2030:
- a new women's and family health hospital at the Leicester Royal Infirmary;
 - a dedicated children's hospital at the Leicester Royal Infirmary;
 - expanded intensive care facilities at the Leicester Royal Infirmary and Glenfield Hospital;
 - the development of new facilities at Glenfield Hospital including new wards, theatres, and outpatient settings.
8. We remain committed to delivering our services across our three sites, with a main focus of providing complex and acute care at Leicester Royal Infirmary (LRI) and Glenfield Hospital, and high-volume low acuity services at Leicester General Hospital.
9. Further information on the consultation process is available on request.

Hearing and Balance services - Engagement

10. UHL provide Hearing services across 12 community locations (Melton Mowbray, Loughborough, Rutland, Coalville adults and paediatrics, Shepshed, Syston, Hinckley Hospital, Hinckley Lodge, Market Harborough, Braunston and Rutland), as well as Hearing and Balance services at the Leicester Royal Infirmary. Utilisation of community capacity is key to the strategy for the service, in order to ensure patients can receive the care they need closer to home. Patients need to come to the LRI if they require the Balance service, or if they choose to because it is their closest service.
11. The relocation of the LRI Hearing and Balance service was not a part of the acute and maternity Public Consultation completed in 2020, as at that point in time, there were no plans to move the service.
12. Since this time, work has progressed to review the scope of works for the LRI Enabling Project (that being the works required to prepare the LRI Site for the new women's and family health hospital), and it has become clear that there is a requirement to demolish the Hearing and Balance building on the LRI site. It is proposed that the service is moved to the Leicester General Hospital (LGH), forming a part of the East Midlands Planned Care Centre.
13. A patient engagement exercise has been completed, involving a survey of patients attending the LRI Hearing and Balance clinic, with staff proactively distributing questionnaires and supporting people with completion as necessary. The aim was to elicit service user opinion about the proposed service move, and to highlight any concerns.

14. Based on insights gained from this exercise, a number of key actions and recommendations have been noted, as follows:
 1. There is evidence from the survey that service users are not aware of community clinics (possibly due to repeat appointments being offered in the same location). As such, the service will work to publicise the alternative clinic locations for patients, in order to offer patient choice wherever possible and clinically appropriate.
 2. A satellite hearing booth will be built within the LRI ENT clinic, primarily to support inpatients onsite, however this could be accessed by other patients in exceptional circumstances.
 3. Car parking, public transport and the distance to the LGH featured in some patient responses. This has been noted, and will be factored into the Travel and Parking strategy for the LGH site.
 4. The Hearing and Balance service will continue to engage with service users as the project to move to the LGH develops, to allow a process of co-design within an appropriate scope of influence.
15. It should be noted that Balance clinics cannot operate in a community setting due to the fixed, specialist equipment involved, therefore all balance clinic patients will need to attend the LGH.
16. The proposal to move the service has been supported by UHL and Integrated Care Board (ICB) governance, and as such, will be progressed as a part of the LRI Enabling Project.
17. A full copy of the Report of Findings is available upon request.

Digitally enabled services supporting patients and clinicians

18. Digital has a positive impact in people's daily lives, and we aspire to replicate this in our services.
19. Through incorporating digital technology into Our Future Hospitals programme, care will be increasingly tailored to people's individual needs. Modern facilities will lead to more accessible and responsive care that keeps our diverse and growing population healthier for longer. Research will be fully embedded into clinical practice and settings to both ensure that patients benefit from the latest advances, and we grow the next generation of healthcare professionals.
20. Our future hospitals will embed mobile technology that eliminates paper records, enhances safety and saves time - improving patient experience. The new facilities will incorporate smart buildings, remote-monitoring devices and other new technologies that will radically improve care and outcomes.
21. Colleagues will have access to the up-to-date intelligence they need to provide high-quality care for every patient, every time. We will streamline systems, consolidate records and provide teams with comprehensive access to information - including data from connected medical devices and diagnostic equipment.
22. Real-time support from Artificial Intelligence (AI) decision support tools will enhance the care we provide. Patients will be able to access and contribute to their health records and make appointments that suit them through the NHS App.

Progress to date

23. The redevelopment of UHL is well underway, with over £200m investment made in our hospitals since 2017 enabling us to continue to make progress towards achieving the aims of our clinical strategy with the following projects:
- creation of two expanded critical care units at Glenfield Hospital and Leicester Royal Infirmary. The Interim reconfiguration project in summer 2022 moved HPB, Renal and Transplant inpatient services to Glenfield Hospital, and non-elective general surgery to Leicester Royal Infirmary.
 - Children’s services. All acute children’s services are now located at LRI. Further work will consolidate all children’s services at LRI into a refurbished Kensington Building.
 - planned/emergency split: with the move of specialties to Glenfield Hospital and the provision of more specialist elective surgery there, and the development of the East Midlands Planned Care Centre at Leicester General, work continues to provide a split between emergency and elective work.

A summary of investment into UHL:

| Year | Value | Project |
|---------|--------|---|
| - 2017 | £13m | Vascular moves from LRI to Glenfield Hospital |
| 2018 | £50m | New Emergency Floor at the LRI |
| 2019 | £14.5m | East Midlands Congenital Heart Centre moved from GH to the LRI |
| 2022 | £31m | Interim ICU scheme: Level 3 ICU beds and associated services moved from the LGH to the LRI and GH |
| 2023 | £6.7m | Phase one of the East Midlands Planned Care Centre at LGH opened |
| 2024 | £40m | Phase two of the East Midlands Planned Care Centre at LGH to open |
| 2024 | £16.7m | New Endoscopy Unit at LGH to open |
| 2024/25 | £30m | Three new wards at Glenfield Hospital |

Live Projects:

East Midlands Planned Care Centre - Leicester General Hospital

24. UHL has one of the largest and longest waiting lists in the country with a stark difference in health outcomes between the most and least deprived areas in one of the most ethnically diverse cities in the UK. To address this, we have been supported by NHS England to develop the East Midlands Planned Care Centre on the LGH site to offer additional ring-fenced capacity to protect planned care from emergency pressures, support the ongoing elective recovery and reduce long waits. The hub brings with it the flexibility to adapt to the changing needs of the LLR population.

25. Phase One of the Centre opened in May 2023. The development consists of the construction of two modular theatres to see high volume low acuity patients such as gall bladder removals (via key hole surgery), hernia repairs and minor urological procedures.
26. Phase Two is the refurbishment of the Brandon Unit. By the time Phase Two is fully open in late 2024, the Centre will see around 100,000 people each year, further reducing waiting lists and improving care and involves the refurbishment of the former Brandon Unit. This includes development of wards protected for patients on our waiting lists for inpatient and day case procedures. There will be fourteen outpatient rooms and four clean rooms as well as the modular theatres from Phase one.

Endoscopy New Build Unit - Leicester General Hospital

27. Also at the Leicester General and adjacent to the East Midlands Planned Care Centre, we are building a new specialist endoscopy unit. This is a dedicated facility that will see approximately 17,500 patients each year once it is open in late 2024.
28. The planning application has been submitted and is awaiting validation, with demolition work is planned to commence in January 2024.

Enabling works – Leicester Royal Infirmary and Glenfield Hospital

29. Whilst waiting for the NHP to confirm the funding envelope to progress the design of our new buildings, we have received funding from the NHP this year to prepare both the Leicester Royal Infirmary and Glenfield Hospital sites for our large-scale building works. This is an excellent sign of the support we have for our programme.

Leicester Royal Infirmary Enabling scheme: £41.8m

- The preparation of Knighton Street campus on the Leicester Royal infirmary site in readiness for the building of the new Women's/ICU Hospital. The business case will be made up of multiple elements, including:
 - extension of the Windsor Building with a multi-storey new build extension for Pharmacy, Clinical Genetics and Immunology
 - relocation of a range of offices, clinical services and research facilities within the LRI site
 - relocation of Education and Training
 - Hearing and Balance and Medical Records relocation
- Construction will start in 2025 and complete in 2026.

Glenfield Hospital Enabling scheme: £16.7m

- relocation of the ambulance drop off, bus/ cycle shelter
- diversion of main road
- re-provision of displaced car parking

Conclusion

30. Our Future Hospitals is a complex, highly integrated and multi-dependent project. Nonetheless, it represents a once in a lifetime opportunity to transform forever the care of our diverse communities across Leicester, Leicestershire and Rutland. We are relentless in our determination to bring this to fruition and look forward to keeping the Scrutiny Committee involved and informed throughout, and to working with our communities to deliver the care they need and deserve.

Appendix One

The New Hospitals Programme - the national approach

Our Future Hospitals sits within the delivery of a national programme of hospital developments, called the New Hospital Programme (NHP). This constitutes 48 new hospitals in five cohorts. Cohort 1 are already in construction, and Cohort 2 are agile small hospitals that are being expedited. UHL sits in Cohort 3 as one of eight new hospital developments, which are expected to start to deliver a standardised building approach, such as net zero carbon, a digital hospital, optimum space standards e.g. generic rooms and modern methods of construction. It is anticipated that savings can be achieved through this standardised approach, and construction times improved.

Design development on the main new buildings has been slowed down whilst the NHP develop the next iteration of their Programmatic Business Case, to strengthen the case to Treasury in justifying the strategic, financial and economic rationale of the national hospital building programme. The last iteration was approved by the government's major projects review group (MPRG) in March 2023; and is expected to be presented again in March 2024 in order to identify scheme specific detail on individual funding envelopes, and timescales for delivery for cohort 3 and 4 developments.

Since 2019, inflation and the need to deliver a standardised scheme (Hospital 2.0) including net zero carbon has increased the costs of the scheme, and we hope to understand our full funding envelope when this is approved in Spring 2024.

This page is intentionally left blank