

Agenda Item 8

Falkirk Community Hospital Masterplan Strategic Assessment



Falkirk Integration Joint Board

10 June 2022

Falkirk Community Hospital Masterplan Strategic Assessment

For Decision

1. Executive Summary

- 1.1 This report provides an overview of the work undertaken to date on the development of the Falkirk Community Hospital Masterplan Strategic Assessment. The masterplan seeks to set out the vision for how existing services on the Falkirk Community Hospital Site, and related services could be developed, improved and expanded to meet people's needs into the future. The report also provides an outline of next steps and overarching indicative programme.
- 1.2 The report recommends formal endorsement of the Strategic Assessment by the Integration Joint Board, as one of the key governance decision makers for this project.

2. Recommendations

The Integration Joint Board is asked to:

- 2.1 Endorse the Strategic Assessment for onward submission to Scottish Government
- 2.2 Note that work will now commence to progress with the Initial Agreement which would include the Falkirk Central locality requirements arising from the Primary Care Programme Initial Agreement.

3. Background

- 3.1 NHS Forth Valley and Falkirk Integration Joint Board (IJB) wish to redevelop the Falkirk Community Hospital.
- 3.2 To progress this work it was agreed that a project team would be established to take forward the master planning of services and to develop the Strategic Assessment. This has been developed in line with the requirements of the Scottish Government Capital Investment Manual.

- 3.3 The project is being directed by Patricia Cassidy, Chief Officer with project management support being provided by NHS Forth Valley Corporate Portfolio Management Office (CPMO) and a specialist external partner in health and social care consultancy and planning. The project encompasses the planning for the delivery of health and care services for NHS Forth Valley and Falkirk Health and Social Care Partnership (HSCP) and includes capital investment from Falkirk Council for a new model of intermediate care. This provides an opportunity to develop new care pathways in partnership with our communities and staff.

4. Emerging Model of Care

- 4.1 The focus of the workshops and development of the Clinical Briefs linked to community bed-based care has been to explore, with stakeholders, new service models within a transformed, integrated care system and how services may evolve in Forth Valley, noting the current service delivery challenges. The redevelopment is central to the Falkirk IJB plans to deliver intermediate care, review community bed based care and to work in partnership with the third sector to support and care for people within their communities.
- 4.2 Digital transformation requires to be at the heart of any future reform. Future business cases will ensure that next generation digital services are core to creating sustainable, quality services. This includes the expansion of virtual appointments, remote health monitoring, remote desktop server solutions and new primary care eHealth systems, ensuring that technology supports a more inclusive, patient led experience.
- 4.3 A summary of the scope and service model for each workstream is summarised below:

Workstream	Scope	Model
A: Bedded Care	<ul style="list-style-type: none"> Intermediate rehab focused care Longer complex specialty care Specialist stroke rehab – currently Stirling Health & Care to evaluate longer term location Palliative and end of life care Step up and step down care Potential for housing/housing with care 	<ul style="list-style-type: none"> 100% single room, flexible bedded care Collaborative integrated team Clear process and protocol for each pathway To resolve governance and regulatory framework
B1: Ophthalmology	<ul style="list-style-type: none"> Diagnostics Outpatients Long term conditions Teach & treat Minor procedures Day case 	<ul style="list-style-type: none"> Asynchronous outpatient care supported by diagnostic <p>Satellite site – diagnostics and injections within Clacks & Stirling</p>

Workstream	Scope	Model
	<ul style="list-style-type: none"> Potential to repatriate Golden Jubilee activity 	<p>Increased advance practice roles</p> <p>Adoption of best practice high volume care pathways – Cataract outpatients and double scrub from Golden Jubilee; Moorfields sub-specialty lanes</p>
B2: Outpatients	<ul style="list-style-type: none"> Child & Family health CAMHs, Sexual Health, Maternity, Paediatrics, Health Visiting, Immunisations & Vaccinations Mental health & Psychology Allied Health Professionals (AHPs) – hub based services Community Alcohol & Drug service Tissue Viability, Continence Service, AAA Screening, Community Dental including Teach & Treat Wellness Centre – phlebotomy/investigations/ diagnostic, physiological measurement, medical photography, signposting Opportunity to transfer range of specialties from acute site. Initial engagement with Diabetic; potential for much broader range Potential to include Clinical Research facility Existing FCH services plus number of other Falkirk locations 	<ul style="list-style-type: none"> Range of forms to deliver care: face to face; virtual; groupwork; digital platforms Flexible use of accommodation One-stop pathway e.g. Gynaecology Person-led conversations Redistribute in line with geographical spread of population Use of leisure facilities To agree level of Radiology and other supporting service; dependent on the specialties seen.
B3: Primary Care	<ul style="list-style-type: none"> Westburn practice plus potential for up to 3 further Falkirk Central practices. Initial discussions with all positive. Core GMS services including PCIP roles Falkirk Central locality hub – phlebotomy, treatment room, District Nurse base, AHP hub services Future potential – Occupational Therapy, Hospital @ Home base 	<ul style="list-style-type: none"> Integrated multi-disciplinary team Opportunity to maximise PCIP resource across all practices <p>Variety of consultation forms: face to face, virtual, group</p> <p>Integrated services across primary, community & secondary care</p>
C1: Decontamination	<ul style="list-style-type: none"> All reusable medical devices for Forth Valley Incorporates National Treatment Centre capacity 	<ul style="list-style-type: none"> Single centralised facility; does not need to be on the FCH site.

Workstream	Scope	Model
		<ul style="list-style-type: none"> Low steam sterilisation; enable repatriation from Glasgow
C2: Technical Services	<ul style="list-style-type: none"> Transport department/Fleet services Estates & Capital Planning Procurement and Logistics Linen, domestic & Soft FM services Health Records 	<ul style="list-style-type: none"> Centralise procurement from number of locations Concentrate Fleet/Transport Move to digital records Housekeeper based role Environmental sustainability
C3: Offices & accommodation	<ul style="list-style-type: none"> Information Services; Quality; Communications; Finance; Core Cancer & Palliative Care; Bereavement Service; IT& e-health Falkirk Partnership; Health Promotion Medical Student Accommodation Opportunity wider HSCP staff 	<ul style="list-style-type: none"> No multiple office bases Flexible desk policy hot desks for clinical staff with low % admin time Hybrid working Support spaces Use of ratio for desks for staff with <50% admin time Number of services do not need to be on FCH site

4.4 During the extensive stakeholder engagement (as described in section 5 of this report), the concept of a “Livingwell hub” as a key element of the project has emerged.

4.5 A “Livingwell hub” could be the connector for other, more formal, services provided for within the masterplan, while potentially providing opportunities for:

- People to connect together in an informal manner, potentially around a community café, again potentially run as a social enterprise, helping to address social isolation and providing a gateway to other supports that are available.
- Wrapped around and integral to locality-based services such as phlebotomy, volunteer and carer support, providing opportunities for person led “making every opportunity count” conversations and helping signpost and connect people with supports in their own community.
- The use of digital and innovative technologies to monitor key wellbeing and health indicators such as blood pressure, weight etc., and receive advice on self-management of long term conditions, as well as providing a place for people to access digital health and social care services through innovations such as Near Me.
- Drop in spaces to receive health improvement advice and support such as smoking cessation, or holistic wellbeing activities delivered by third sector organisations.

- 4.6 It has been suggested that a hub and spoke model could be developed, ensuring the benefits of such a model are felt beyond the Falkirk Community Hospital site, reaching into communities which may have poorer health outcomes.
- 4.7 It may be possible to test smaller elements of a potential “Wellbeing hub” while the Falkirk Community Hospital masterplan continues its development, and a focussed subgroup and wider stakeholder group are considering options for progressing this.

5. Project Management and Stakeholder Engagement

- 5.1 To support the Strategic Assessment development, a number of workshops have taken place, attended by a range of stakeholders including representation from each of the following workstreams:

- A: Bedded Care: inpatient beds; intermediate care beds; care homes; hospital @ home
- B1: Ophthalmology: outpatient and day case
- B2: Wide range of outpatients
- B3: Primary care – Falkirk Central locality implications from the proposed preferred service model
- C1: Decontamination
- C2: Technical – estates FM, transport
- C3: Offices

- 5.2 The workshops are set out in the table below:

Workshop	When	Purpose
Workshop 1	w/c 23 Aug 2021	Identify current service provision; what is currently provided on FCH site
Workshop 2	w/c 27 Sept 2021	Identify future trends in each area of service provision
Workshop 3	w/c 27 Sept 2021	Identify future service model

Workshop	When	Purpose
Cross Check event	4 Nov 2021	Large stakeholder group from both PIA and FCH project including all patient user/carers reps. Each sub-group lead presented on their future clinical model and to identify service impact or dependencies
Strategic Assessment	16 Dec 2021	Develop Strategic Assessment

5.3 A number of other key activities have been undertaken in the development of the Strategic Assessment:

- Development of seven Clinical Output Specifications for each service area/workstream
- Site walk round of existing facilities
- Data validation of all existing services with NHS Forth Valley information team
- Lessons learned from Bellfield intermediate care development captured and considered
- Establishment of Short Life Working Group to identify and scope the Living Well wellbeing component to the service model.

6. Approval process and indicative timeline

6.1 The project impacts on a number of organisations and therefore requires approval through several organisational governance systems. The approvals process for the Strategic Assessment, along with dates is set out in the table below:

Body	Action	Timescale
Project Team	Endorsement	23 Feb 2022
Programme Board	Endorsement	22 Apr 2022
ELT	Endorsement	25 Apr 2022
NHS Forth Valley Board	Sign off	26 July 2022
Falkirk Integration Joint Board	Sign off	10 Jun 2022
Scottish Government Capital Investment Group	For information (no approval required)	Submission following local governance approvals

- 6.2 Following completion of the Strategic Assessment work will now commence to progress with the Initial Agreement which would include the Falkirk Central locality requirements arising from the Primary Care Programme Initial Agreement.
- 6.3 The indicative timeline for progressing the project is summarised below:

Task	Assumptions	Timeline
Initial Agreement	9 months plus 4 months approval	September 2022-August 2023
Outline Business Cases	9 months plus 4 months approval	September 2023-August 2024
Full Business Cases	9 months plus 4 months approval	September 2024-August 2025
Construction & Commissioning	24 month construction; 4 months commissioning	September 2025-December 2027
Operating facilities		January 2028

7. Conclusions

- 7.1 Significant engagement has been undertaken over the last 9 months in the development of the master planning and Strategic Assessment. The work has been undertaken with a range of stakeholder groups including significant input from members of the Strategic Planning Groups of both IJBs.
- 7.2 A significant programme of investment is proposed over the next 6 years; dependent on the availability of capital funding from the Scottish Government.
- 7.3 Further work on the service model will be undertaken as part of the Initial Agreement with evaluated off site-specific options as part of the Outline Business Case which follows.

Resource Implications

The resource implications will be developed in full in the next stages of the business case process.

Impact on IJB Outcomes and Priorities

The project is being developed in alignment with the IJB's strategic outcomes.

Directions

No directions are required to be issued by the IJB at the current stage of the project.

Legal & Risk Implications

A project risk register is in place and reviewed monthly by the project group.

Consultation

Significant consultation and engagement with a wide range of stakeholders has taken place in developing the strategic assessment through workshops and meetings.

Equalities Assessment

An equalities assessment will be undertaken as the business case progresses. Early screening work has not identified any equalities implications.

8. Report Author

8.1 Gail Woodcock, Head of Integration

9. List of Background Papers

9.1 IJB Report 3 June 2021

10. Appendices

Appendix 1: Falkirk Community Hospital Master planning

PROJECT: Falkirk Community Hospital Site Masterplanning

What are the Current Arrangements: Falkirk Community hospital site hosts a range of clinical services, including bedded care facilities, outpatient clinics for a range of specialties, and eye surgery. There are Health Improvement services on site, supporting technical services, as well as office accommodation and staff facilities for teams delivering clinical services, as well as providing staff hubs for FV wide services and services delivered in the community.

What is the need for change?

Deliver more care closer to home and in community settings, supporting citizen wellness and neighbourhood planning, Communicate well to ensure patients and carers understand what is available locally.

Increasing and changing nature of demand – e.g. Ageing population, increased multi-morbidity & complexity, future profile of diagnoses and disease, individual preferences of people in their last year of life.

The future model will deliver services differently, optimising integration of services, including social care, 3rd sector and volunteers, co-ordinating treatment planning to minimise necessary attendances, supporting the transformation of primary care, and increased use of digital solutions. The current facilities are unable to support these new models.

Need to sustain, grow and retain workforce. Maximising all opportunities to integrate and share skills across health, care, wellbeing and health improvement services. Ensuring continued commitment to training.

Poor current facilities with areas of non-compliant infrastructure, need for sustainable, adaptable facilities responsive to future needs and net-zero carbon agenda as well as providing a green, accessible local environment for wider community use.

Identify Links

What benefits will be gained from addressing these needs?

Optimised community delivered elements of care provided as part of the Forth Valley system-wide approach to managing health, care, wellness and health improvement for the local population.

Improve access, realign local delivery of services for all localities by optimising Falkirk, thereby reducing travel, improving patient-centred approach.

Fit for purpose health and care services; reduced unnecessary duplication and delays, ability to implement all future models of care including improved links to 3rd sector, optimised integration with social care and improved access to health improvement and citizen wellbeing services

Ability to meet changing needs and demand profile. Supporting intergenerational local demands from child and family health and wellbeing through to frailty and dementia related services.

Opportunity to redesign, innovative integrated care for population, supporting individual knowledge and choice of care, and improving local knowledge about services available.

Ensuring right staff and skills available, individuals working to top of licence, easier to recruit and retain staff and improved succession planning.

Modern fit for purpose facilities, right sized, flexible, delivering net zero carbon agenda; improved sustainability, improved citizen health and wellbeing through access to local, community green space.

Identify Links

How do these benefits link to NHSScotland's Strategic Investment Priorities?

Person Centred

Prioritisation Score

5

Safe

5

Effective Quality of Care

5

Health of Population

5

Value & Sustainability

5

TOTAL SCORE

99

What solution is being considered

Service Scope / Size

Services currently provided on the FCH site, plus support technical services from a range of locations. Includes medical student accommodation. Opportunity to shift activity from hospital to increased community based care.

Service Arrangement

Multi-disciplinary teams co-ordinating treatments across services to minimise patient attendances, maximising the use of one-stop clinics and technology which optimises citizen wellness.

Service Providers

NHS Forth Valley, Falkirk HSCP, Stirling and Clackmannanshire HSCP, NHS Education Scotland 3rd sector partners and volunteers

Impact on Assets

This development is likely to require a combination of new build, refurbished and replacement facilities. It may facilitate the disposal of other NHS FV site assets. Explore use of revenue model for medical student accommodation.

Value & Procurement

Estimated capital value of £50M-£100M, procurement by through Central Hub.