HEALTH OVERVIEW AND SCRUTINY COMMITTEE

Agenda Item 87

Brighton & Hove City Council

Subject: The '3T' Development of the Royal Sussex

County Hospital

Date of Meeting: 22 April 2009

Report of: The Acting Director of Strategy and

Governance

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Wards Affected: All

FOR GENERAL RELEASE

1. SUMMARY AND POLICY CONTEXT:

1.1 This report provides background information on the '3T' initiative to develop the Royal Sussex County Hospital site in Eastern Road, Brighton.

2. **RECOMMENDATIONS:**

2.1 That members note the report and the additional information supplied by Brighton & Sussex University Hospitals Trust.

3. BACKGROUND INFORMATION

- 3.1 The Royal Sussex County Hospital (RSCH) is owned and managed by Brighton & Sussex University Hospitals Trust (BSUHT). BSUHT is also responsible for the Sussex Eye Hospital, the New Royal Alexandria Children's Hospital (both of which share a site with the RSCH), and the Princess Royal Hospital (PRH) in Hayward's Heath. RSCH and PRH are increasingly considered by the trust to be a single hospital operating across two sites, rather than two distinct hospitals offering discrete services.
- 3.2 The RSCH is a teaching hospital, working in partnership with Brighton and Sussex Universities to offer undergraduate medical degrees and postgraduate training. The RSCH is the only teaching hospital in the South East region (excluding London facilities).

- 3.3 The RSCH is designated as a critical care centre: a large hospital which offers a range of specialist (tertiary) services for a regional population as well as providing standard acute services for local people. Standard RSCH acute services are accessed by significant numbers of patients from East and West Sussex as well as by Brighton & Hove residents. (In terms of Health Overview & Scrutiny Committee involvement in the development of the RSCH, this may mean that BSUHT is required to consult with East and West Sussex HOSCs in addition to Brighton & Hove HOSC, since HOSCs are responsible for scrutinising the healthcare of their residents irrespective of where those residents actually receive their treatments.)
- 3.4 In 2004 the local NHS consulted (under the rubric of 'Best Care Best Place') on the principle of developing tertiary services (including a trauma centre) at the RSCH, on the principle of re-providing some acute services in community settings, and on specific plans to 'split' certain acute services between the RSCH and PRH sites (e.g. a 'hot/cold' split with most emergency work taking place at RSCH and elective work at PRH).
- 3.5 In recent years, there have been moves to expand tertiary services on the RSCH site. Some of this expansion has been facilitated by better use of existing facilities, some by new building on the site (notably the recently constructed children's hospital), some by re-locating acute services either to other city facilities or to the PRH.
- 3.6 The '3T' initiative (the 'T's' are 'teaching', 'trauma' and 'tertiary care') seeks to build on the developments of the past few years, significantly upgrading RSCH specialist facilities and cementing its position as a major regional tertiary care centre. This will mean that city residents will increasingly be able to access specialist services locally rather than travelling out of Sussex for treatment.
- 3.7 Will also look to build on the success of the Medical School, further developing teaching facilities at the RSCH. There are significant advantages to having a successful Medical School: both for the city economy in terms of encouraging expansion of the universities; and for citywide medical care, in terms of attracting the best qualified clinicians to work in city hospitals.
- 3.8 In addition, 3T will seek to create a regional trauma centre on the RSCH site. This will involve relocating the Hurstwood Park neurosciences unit from PRH. Currently, a full range of trauma services is available across the PRH and RSCH sites, but not in a single location, which means that patients with serious head *and* body injuries have to be airlifted to suitable facilities generally in London.

- 3.9 The 3T programme will entail major redevelopment of the RSCH site at a cost of approximately £400 million. BSUHT considers that this initiative offers a significant opportunity to upgrade much of the existing RSCH estate, some of which is almost 200 years old and is manifestly ill-suited to the requirements of modern healthcare.
- 3.10 In addition to this building programme, 3T is predicated upon the relocation of some services currently provided at RSCH to other healthcare settings, mainly settings in the primary/community sector.
- 3.11 This relocation of services from an acute to a community setting is very much in line with current NHS thinking, which emphasises the need to "localise where possible and centralise where necessary" i.e. to locate services in primary/community settings whenever their relocation can be justified on clinical grounds, and to centralise them only when there is a overriding clinical case to do so. Services likely to be re-commissioned in a primary/community setting include some diagnostics, some minor operations, and a range of outpatient appointments.
- 3.12 As well as freeing up capacity on the RSCH site for more specialist services, this shift of activity is intended to reduce the 'footfall' on the Eastern Road site, thus ensuring that the development of the RSCH does not lead to a worsening of local parking and congestion problems.
- 3.13 The general issue of re-commissioning acute services in the community has been previously considered by HOSC and will be examined again at the May 2009 committee meeting. This is essentially an issue for NHS Brighton & Hove as commissioner rather than for BSUHT as a provider trust.

4. CONSULTATION

- 4.1 NHS trusts are generally required to consult with their local HOSCs when planning to make "substantial variations" or "developments" in service (under provision introduced by the Health and Social Care Act [2001] and its subsequent regulations [2002]).
- 4.2 There is no absolute statutory definition of what constitutes a substantial variation or development of a service, but there is a general presumption that NHS trusts should keep local HOSCs informed about major service changes.
- 4.3 The Best Care Best Place initiative (which Sussex HOSCs were involved in via a Joint Health Overview & Scrutiny Committee JHOSC) incorporated consultation on several of the principles

- underlying the 3T initiative, including the relocation of Hurstwood Park, splitting services between RSCH and PRH and the re-commissioning of certain acute services in the primary/community sector.
- 4.4 The expansion of RSCH has also been much discussed as part of the ongoing 'Fit For the Future' JHOSC which is examining plans to reconfigure acute healthcare across West Sussex and Brighton & Hove. (However, 3T is not formally part of the Brighton & Hove Fit For the Future plans which went out to public consultation in 2008.)
- 4.5 The 3T principles have also been discussed on a number of occasions at HOSC. The committee has heard presentations by both the current and previous Chief Executives of BSUHT on their plans to develop the RSCH site.
- 4.6 3T is an integral part of the South East Coast Strategic Health Authority (SHA) plans for the development of the regional health economy "Healthier People, Excellent Care." Consultation on Healthier People, Excellent Care is currently taking place, and HOSC recently received a presentation on the initiative.
- 4.7 BSUHT may be required to consult with local residents and stakeholders as part of the process of gaining planning approval for elements of the 3T development. However, these are planning issues rather than matters which fall within the remit of Health Scrutiny.
- 4.8 In the opinion of BSUHT there is therefore no formal requirement to further consult with HOSC (or with HOSCs in West and East Sussex) on the 3T programme as all the necessary consultation has already been undertaken.
- 4.9 However, the trust is eager to continue engaging with local HOSCs in addition to its statutory responsibilities, and has requested the opportunity to present its 3T Outline Business Case to HOSC and to our neighbours in East and West Sussex County Councils.

5. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

5.1 There is no decision to be made by HOSC at this juncture, and therefore no financial implications to be considered

Legal Implications:

5.2 There is no decision to be made by HOSC at this juncture, and therefore no legal implications to be considered

Equalities Implications:

5.3 None to this report.

Sustainability Implications:

5.4 None to this report.

Crime & Disorder Implications:

5.5 None to this report.

Risk and Opportunity Management Implications:

5.6 None to this report.

Corporate / Citywide Implications:

5.7 None to this report.

SUPPORTING DOCUMENTATION

Appendices:

1. Information provided by Brighton & Sussex University Hospitals Trust (BSUHT) – slides of the presentation to HOSC members

Documents in Members' Rooms:

None

Background Documents:

- 1. The Health and Social Care Act (2001)
- 2. The Local Authority (Overview and Scrutiny Committees Health Scrutiny Functions) Regulations 2002