

NHS Greater Glasgow & Clyde



NHS Board

19 February 2019

Chief Executive

Paper No: 19/03

Title: Queen Elizabeth University Hospital Campus Update (QEUH)

Recommendation

Board Members are asked to note:

- That the Chief Executive has commissioned a programme of work to review the overall position on the QEUH campus, which includes the Royal Hospital for Children (RHC), to provide assurance to the Board.
- The three elements of work underway and the governance process being established.
- The Independent Review announced by the Cabinet Secretary.

Key Issues to be considered

- NHS Greater Glasgow and Clyde (GGC) have been operating the new Queen Elizabeth University Hospital (QEUH) facility since June 2015. Over this period a number of issues have arisen within the facility that have impacted on the seamless delivery of health care.
- The Board have received regular updates on the proactive and immediate action and monitoring that has been undertaken on each occasion to ensure patient safety.
- Given recent media activity and public concerns expressed regarding the quality of the service delivered on the QEUH campus, a number of actions are being undertaken to assess the overall position. There are 3 main elements of work now underway which are described in this paper.
- In addition, the Cabinet Secretary has announced an independent external review of the QEUH, which will be set up under the Britton Principles for such reviews which will include the appointment of an Independent Chair.

Any Patient Safety/Patient Experience Issues

- Priority is to ensure ongoing patient safety.

Any Financial Implications from this Paper

- Financial implications of supporting the review process are under consideration.

Any Staffing Implications from this Paper

- Support for staff is a key priority through the process.

Any Equality Implications from this Paper

- None

Any Health Inequalities Implications from this Paper

- None

Has a Risk Assessment been carried out for this issue? If yes, please detail the outcome. Action Plan in place.

- Corporate Risk Register updated.

Highlight the Corporate Plan priorities to which your paper relates

- Provision of high quality safe care.

Author: Jane Grant Chief Executive

Tel No: 0141 201 4607

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1.0 Purpose of Paper

The purpose of this paper is to provide assurance to Board members on action being undertaken to review some recent challenges that NHS Greater Glasgow and Clyde (GGC) has experienced in the Queen Elizabeth University Hospital (QEUH) campus, which includes the QEUH and the Royal Hospital for Children (RHC).

2.0 Context

Board members will be aware that in recent weeks, the overall position with the QEUH/RHC has intensified with significant media interest and ongoing dialogue with Cabinet Secretary and Scottish Government colleagues.

NHS Greater Glasgow and Clyde (NHS GGC) have been operating the new QEUH and RHC since June 2015. Over this period, the Board has identified a number of issues that have arisen within the facilities, which have impacted on the seamless delivery of health care, including water hygiene and ventilation. While proactive and immediate action and monitoring has been undertaken on each occasion to ensure patient safety, it is recognised that further co-ordinated action is now required to address the increase in public concern.

3.0 Next steps

A number of actions are being undertaken to assess the overall position within the QEUH and RHC. There are 3 main elements of work now underway which are described below. In addition, the Cabinet Secretary has announced an independent external review of the QEUH/RHC, which will be set up under the Britton Principles for such reviews and includes the appointment of an Independent Chair.

It has been agreed that the work currently underway within GGC should proceed as planned with a Programme Board being established, chaired by the Chief Executive to oversee this work.

3.1 NHS GGC Workstreams

- A GGC commissioned review of the facilities and environmental issues in respect of the QEUH and RHC.
- A review of capacity and flow to assess the position now, against the original model and planning assumptions.
- A review of clinical outcomes over the period to provide assurance.

3.2 NHS GGC Commissioned Review of the QEUH/RHC – Lead *Director of Estates and Facilities*

As Board members are aware, a new Director of Estates and Facilities was appointed on the 1st October 2018. Since then, he has reviewed the position on the QEUH/RHC sites and in December, working with Health Facilities Scotland (HFS), Executive colleagues and Scottish Government colleagues, he commissioned an externally facilitated review of the facilities. The initial scoping plan was developed during December and early January and considered a range of points including the initial contract, design, commissioning and maintenance. External Lead Advisers have been appointed and it is anticipated that the work will enable a report to be presented to the NHS Board that will provide an understanding of these issues and recommend potential actions to be taken forward. It is confirmed that the GG&C led review will proceed and link closely with the independent review.

This work will be supported by key members of the Corporate Management Team and provide an initial report on the approach to the Finance and Planning Committee in April.

3.3 NHS GGC led Review of QEUH and South Sector Capacity and Flow – Lead *Chief Operating Officer*

In order to assess the demand profile and throughput of the QEUH since opening nearly 4 years ago, a full capacity and flow review will be undertaken across the South Sector. There are two strands to this work, firstly an internal look back considering the key areas noted below, and secondly seeking an external expert review of current capacity and flow processes.

The internal review will consider the following key aspects;

- Issues related to the original demand profile of minor injuries, the assessment unit and ED versus the current demand.
- Conversion rate for admission to emergency inpatient beds.
- Additional specialties added to the QEUH site over the period.
- Original activity and length of stay assumptions etc. versus current activity.
- Origin of additional activity, local and regional.
- Additional factors such as, the impact of Regional Planning, Moving Forward Together and the Waiting Times Plan.
- Future bed profile for both elective and emergency patient flows.

This work will be supported by the Director of Access and the Business Intelligence department, with an initial report on the overall approach to the Acute Services Committee in March.

3.4 NHS GGC led Review of Clinical Outcomes QEUH /RHC– Lead *Medical Director*

To ensure a robust assessment of the overall clinical quality and safety and provide assurance, a review of clinical outcomes will be undertaken. This will consider the following key aspects;

- HSMR.
- Infection reports.
- Reference to external reports over the period i.e. HEI.
- Patient experience reports.
- Benchmarking with other acute sites in GGC and Scotland.

This work will be progressed swiftly and will be supported by the Nurse Director and the Director of eHealth, with a progress report being presented to the Clinical and Care Governance Committee in early March.

4.0 Governance

A Programme Board will be established, chaired by the Chief Executive, comprising the leads identified above and other key senior staff. It is anticipated that the initial phase of this programme of work will report in 2 to 3 months. The external review of QEUH/RHC facilities will report to the *Finance and Planning Committee*, the review of capacity and flow within the QEUH/South Sector will report to the *Acute Services Committee* and the clinical outcome review of the QEUH/RHC will report to the *Clinical & Care Governance Committee*. The Board will receive a comprehensive report across all reviews in due course.

Appropriate support will be sought to ensure that the independent review is sufficiently resourced.

5.0 Summary

Our key priority remains the safety of our patients and support for our staff. The work described will be progressed at pace, using all available resources, seeking national expertise and advice which will be fully integrated into the review process. There has been significant media, Scottish Government and public interest in the current situation with regular communication underway. Board members will continue to receive regular updates.