Appendix A

The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

Meeting:	Council of Governors (in Public)		
Meeting Date:	14 December 2023	**Agenda item:**	7.1
Report Title:	Appendix to the CEO's Report: RAAC, Capital & Future Hospital Programme Update		
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Implications		
Link to strategic objectives *[highlight which KSO(s) this recommendation aims to support]*		
KSO1 - Quality	**KSO2 - Engagement**	**KSO3 – Healthy Lives**
Access to safe, compassionate and timely care for our patients	Improving our organisational culture and enabling staff to achieve their full potential	**Transform how we work to deliver improved care and health outcomes for our communities**

Board assurance framework	SO3 – Transform how we work to deliver improved care and health outcomes for our communities.	
Significant risk register	RAAC Risks Identified under ID 3116 NHP Risks identified under ID 2757	
	Y/N	If Yes state impact/ implications and mitigation
Quality	Y	The Trust must have a fit for purpose estate to deliver quality patient care.
Legal and regulatory	Y	The Trust must have health & safety compliant estate, to deliver clinical and non-clinical services from.
Financial	N	

Assurance route	
Previously considered by:	RAAC is a standing agenda item at the Estates Delivery & RAAC Forum and at the bi-monthly meetings of the Board of Directors and Finance & Activity Committee. Future Hospital Programme Forum

Executive summary					
Action required:	Approval	**Information**	Discussion	Assurance	Review
Purpose of the report:	This paper provides an update on both the Capital & RAAC Schemes and the current position of the Future Hospital Programme.				
Summary of Key issues:	• Update on the RAAC and Capital Programmes • Business Case Development • Enabling Works • Team Recruitment • FHP Rebrand				
Recommendation:	The Council of Governors is asked to **NOTE** the report.				

Acronyms:	RAAC – Reinforced Aerated Autoclaved Concrete NHSE – NHS England QEH – Queen Elizabeth Hospital WSH – West Suffolk Hospital M&E – Mechanical and Electrical CDS – Central Delivery Suite SSD – Sterile Services Department TMG – Trust Management Group SOC – Strategic Outline Case FHP - Future Hospital Programme MSCP – Multi Storey Car Park NHP – New Hospital Programme

1. RAAC Update

This section is an update to the RAAC Programme, the RAAC failsafe programme for the roof panels and the RAAC protection programme.

1.1 RAAC Programme – Roof Failsafe works

Wolferton Ward - is being converted into the second decant ward and will be completed by end of March 2024. The first area to be decanted into this area will be Central Delivery Suite.

Main Theatres – the last phase of theatres is due to come operational from 4 December 23.

Hub & Servery – This is a 36-week programme, with completion due mid-April 24

Discharge Lounge – with the link to preparation works for the potential palliative care ward on the first floor, completion is now due May 24

Feltwell Ward – decanted into Castleacre and Feltwell ward handed over to the contractor to commence fail safe works

Business case for Year 4 Funding – this has commenced and will be completed December 23

1.2 RAAC Programme - Wall Protection works

The RAAC wall plank protection project was started in mid-November 2023. The Principal Contractor has been appointed, and the purpose of the project is to stop further internal corrosion of the two steel reinforcing bars within each plank. Anodes are attached to the steel (externally wherever possible) which stop further corrosion from occurring. In addition to anode protection, some of the wall planks may require repair, and these repairs are graded from 1 – 6, 1 being of low priority, and 6 being of high priority.

There are approximately 10,000 RAAC planks in the walls, and it is anticipated that the wall project will take 18 months to complete.

The wall planks differ from the roof planks in that they do not suffer from deflection, instead they are prone to water ingress causing internal corrosion of the supporting steel rebar which runs through each plank. Many of the wall planks on the site are load bearing, except for the planks in the Estates block. Whether or not the planks are load bearing they can be assessed visually – vertical planks are load bearing, horizontal planks are not.

There is a ring beam structure in place which supports the wall planks, however this ring beam is unlikely to support the wall panels if there is a failure of a plank.

The aim of this report is to provide an update on the RAAC wall plank protection project, following a site visit on 2 November 2023, from the Trust's structural engineers, Sweco.

The purpose of the visit was to talk through the wall project to ascertain the most reasonable and practical way forward. WSH have completed their wall panel protection project, and at the time of writing this report, the WSH and the QEH are the only RAAC Trusts to have embarked on this project.
It is anticipated that this project will cause a significant amount of disruption – primarily due to noise, privacy, and dignity of patients (as contractors will be working

directly outside wards and clinical areas), and access to panels, some of which may need to be accessed internally.

From preliminary surveys, and site knowledge, there is a lot of M&E equipment attached to the external walls. This equipment tends to be clustered into courtyards, and each area where there are attachment points to a wall plank will need to be assessed and an options appraisal carried out, as to how to repair and support. The impact on clinical services would be assessed as well as part of this process.

The methodology proposed by the principal contractor is based upon the methodology used at WSH, and this will be reviewed by Sweco to ensure that it encompasses their guidance. Sweco have agreed to produce a flowchart which will summarise this guidance.

Monitoring of the project will be via Sweco, the frequency of which is yet to be arranged. As each section of wall is completed it will be assessed and signed off by Sweco.

1.3 Capital Programme

The table below sets out the current Capital schemes in progress across the site and their current position in relation to program.

Project Title	Update	Budget	Programme	Quality
SDEC/DTU/Hydro/Gym	Handover delayed due to water temperature issue. Pump to be installed and shut down weekend 25/11 to support. Temps to be taken 27/11. 2 x CRs approved for pump and additional power requirement.	A	A	G
Modular 3 Estates and Paediatric liaison suite	Works almost complete, no issues.	G	G	G
L1 Fire Alarm	PM has indicated areas that can be completed this financial year as not reliant on decant arrangements, this with Procurement to advise if change of PO is possible. Mills & Reeve assisting with contract queries/issues.	A	A	G
ED RESUS	Feasibility completed and design signed off, contractor selected, with completion date early April	A	A	G

Estates Backlog Projects

The capital team are assisting with the following large Backlog Projects -

- CDS Chillers
- Dry Risers and Fire Doors
- Mortuary Ventilation

2. New Hospital Program update

2.1 Business Case Development:

Work continues developing the Model of Care and Schedule of Accommodation. The Team have concluded the second set of 6 Pathway Workshops covering Planned Care, Unplanned Care, Family Health, Cancer and Long-Term Conditions, Clinical Support and Non-Clinical Support. These workshops have been well attended with a cross section of individuals in the Trust and provided a valuable source of information that will drive the Models of Care for the new building.

Several meetings across QEH, James Paget and Norfolk & Norwich have taken place to both look at service delivery options and agree assumptions to support the mitigation of demand and right sizing of our New QEH.

The national NHP Team have confirmed that the new guidance to re-produce the SOC will now be released in early December. This will require the re-presentation of the previous SOC in line with the required template.

2.2 Enabling Works:

Helipad Relocation –The Short Form Business Case has been completed and is proceeding through Trust Governance and will be ready to be submitted to NHP, for approval, in mid-December. Work is expected to commence in February 2024.

MSCP – The Trust has decided after further consultation with the National NHP Team to proceed with a single phased development for the new MSCP and are aiming to have the Outline Business Case submitted in March 2024. This will be followed by a Full Business Case in September 2024 and work commencing when this is approved in January 2025. Although this timeline is a considerable delay to the original one it still fits within the critical path of the main New Hospital Program and, at the time of writing this paper, does not delay the new hospital projected opening time of 2030.

The next stage is to begin a procurement exercise for the project and plans for this are underway to ensure we are ready to begin once funds are released after the business case confirmation.

New Site Access – Fees have been granted from NHP to develop the feasibility, design, and business case submission for the construction site access.

2.3 Team Recruitment:

Appointments have been made to several critical posts within the FHP Team with recruitment continuing. The full team should be in place, subject to notice periods by Q2 2024.

2.4 FHP Rebrand:

The FHP Board agreed to the changing of the Project name from the Future Hospital Programme to the New QEH Programme. This makes us readily identifiable, externally, and internally, and there are several Trusts in NHP that have Future in their title.