



North West Anglia
NHS Foundation Trust

Hinchingbrooke Hospital

Building our future together



The Hinchingsbrooke story

40th Anniversary celebrations

September 2023 marked 40 years since Hinchingsbrooke first opened its doors in 1983, after the Huntingdon County Hospital and Primrose Lane Maternity Hospital transferred across to the new site.



Structural issues identified

The building was originally intended to last 30 years. In 2018 we identified a structural issue with the concrete used in the roof across 75% of the site. As well as making the site safe, we have invested in infrastructure improvements to the main building.



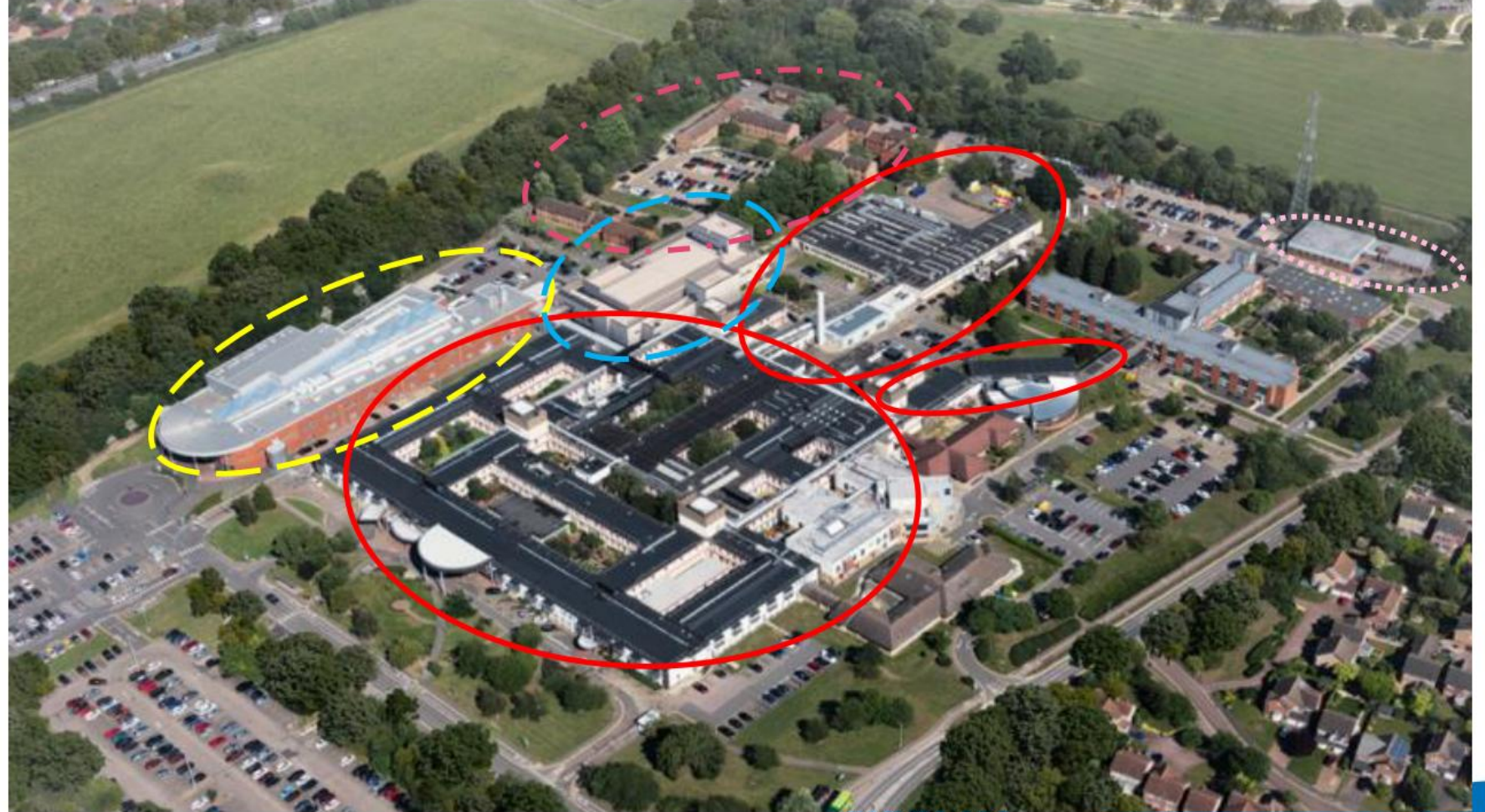
Funding confirmed!

In May 2023 the Government announced Hinchingsbrooke was included in its New Hospital Programme, securing national funding to build a new hospital by 2030



The current site

- Existing PFI Treatment Centre building to be retained
- New Theatres building under construction
- RAAC buildings
- - - Residential accommodation to be demolished to facilitate redevelopment
- Ambulance Trust building to be retained

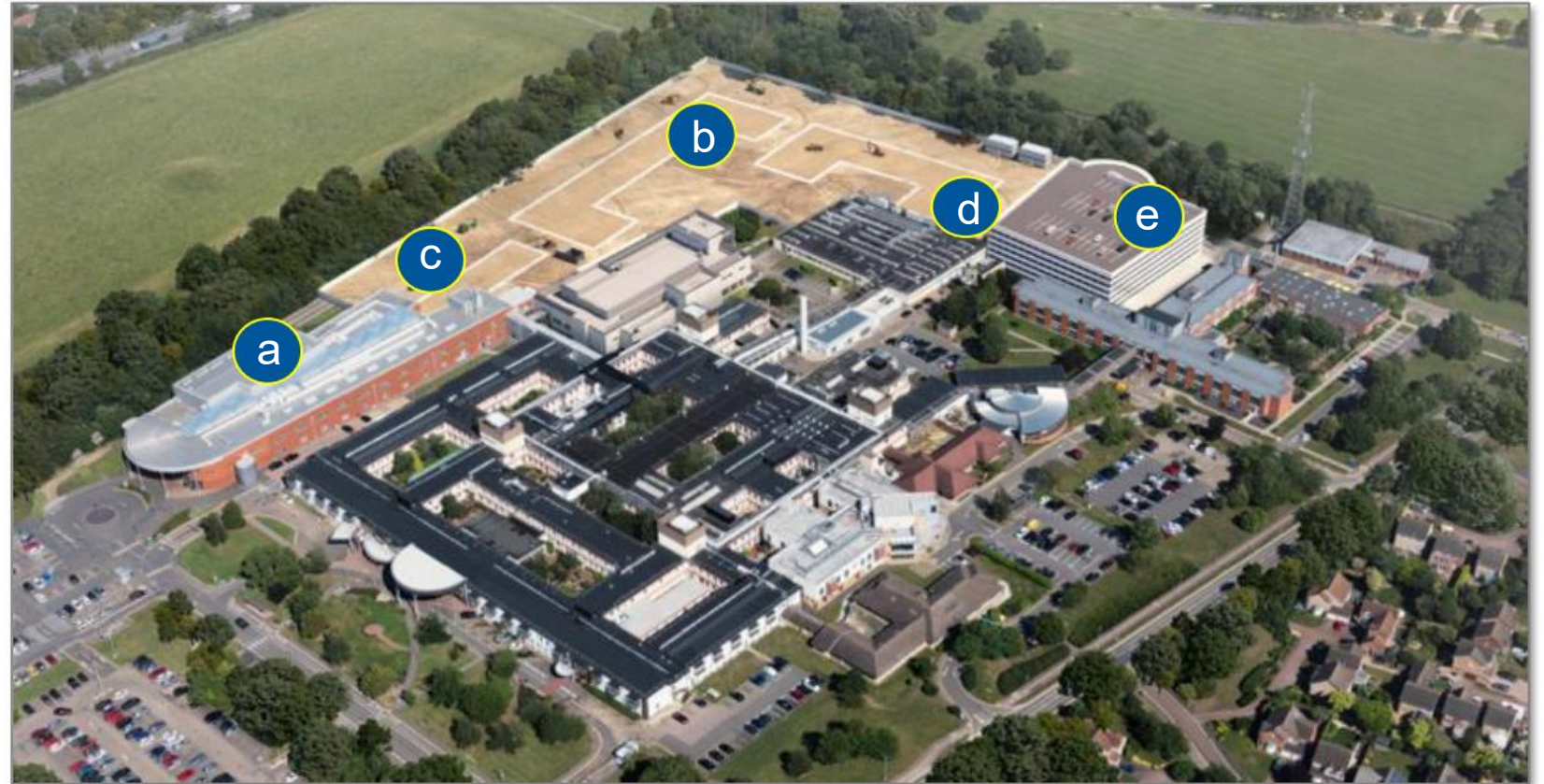


All other buildings to be demolished

GOING
OUTSTANDING

Preparing for new hospital construction

- a** Construct new on-site road to facilitate access to back of site
- b** Demolish existing staff accommodation
- c** Construct new energy centre and enhanced access to national grid
- d** Utilities support works for incoming power.
- e** Construct new multi-storey car park



The future Hinchingsbrooke Hospital site

The replacement Hinchingsbrooke Hospital is proposed to be built in the **South-East** corner of the campus, **ensuring the existing hospital is operational during construction** and providing **scope for future expansion**

The new hospital will be **multiple storeys** to enable fit within this footprint. Each storey can fit approximately three standard 32-bedded wards

The new hospital will be designed to enable our clinical model for Hinchingsbrooke Hospital and standards as outlined by the New Hospital Programme. This includes **assumptions on standardisation of new hospitals**, including 100% single rooms, 32-bedded wards, and provision of the majority of non-clinical spaces outside of the footprint of the main build

Discussions with Integrated Care System colleagues have confirmed there will continue to be a Maternity Unit and Emergency Department at Hinchingsbrooke Hospital.

Existing
Treatment
Centre



New Theatres suite



Stakeholder Engagement

- The Trust is keen to ensure that service users, staff, local communities and partners are involved in the planning and design of the new hospital. We welcome any views or suggestions from Committee Members.
- Detail of work to date and further planned engagement are set out in the cover paper, but recent highlights include:
 - Four **public engagement** sessions held in July and August, attended by representatives from Healthwatch, local councillors, voluntary organisations, patients and local residents. The questions asked during these sessions have enabled us to provide an updated set of Frequently Asked Questions (FAQs) which have been shared via our dedicated website pages.
 - Dedicated **staff** Facebook page and Trust intranet carrying staff news stories to update colleagues on the redevelopment as well as hold dedicated meetings with specific groups of staff on different elements of the build.
 - Engagement has taken place with a wide range of **stakeholders** including Cambridgeshire and Peterborough Integrated Care Board, Cambridge University Hospitals NHS Foundation Trust, Cambridgeshire and Peterborough NHS Foundation Trust, NHS England, East of England Ambulance Service, Maternity Voice Partnership, the North Place Partnership Board, Healthwatch and other stakeholders for input on clinical service reviews.
- Looking ahead, we are currently planning for the **next phase** of community and public involvement to ensure the building design, care philosophy and ways of working are shaped by the views of as many different groups and perspectives as possible. This will be achieved through a variety of approaches including both face to face and on-line events in community settings as well as the hospital. We are particularly keen to work with those community groups and organisations that already have established networks and successful ways of engaging such as our local Healthwatch and the Hunts Forum of Voluntary Organisations.
- Public engagement on the two **Planning Pre-applications** which have recently been submitted to the local planning authority. Engagement is anticipated to commence in early November and the approach is currently in design phase. As part of this, Cambridgeshire County Council are working closely with the Trust's Planning Advisors and Huntingdonshire County Council on the areas that fall under their remit e.g. highways, transport, flood risk and drainage.



GOOD TO
OUTSTANDING

The vision for our new hospital

Moving with the times to provide the acute healthcare services our population needs

The Hinchingsbrooke redevelopment will unlock **better patient outcomes**, **reduce health inequalities** and **improve the sustainability of our system** by transforming how and where we deliver care, by embedding integrated care models and supporting the integrated health and care system in addressing its most pressing challenges

Working with local healthcare partners

Integrated models of care for our **local population** that support **out of hospital care** and **preventative models** to reduce reliance on acute hospital care with a future estate designed to deliver these future models

An estate that's fit for the future

Estates and facilities which are sized to meet the **future healthcare demands** of our **growing elderly population** whilst meeting the Trust's **structural RAAC challenges** and eliminating backlog maintenance

Using digitally-enabled care

Digital tools facilitate efficient care, improved access, care closer to home, population health analytics and system integration

Championing our workforce

Sustainable staffing models, building **skills for the future** and **attracting, recruiting and retaining staff** with the opportunity for research, development and training

Patient-centred models of care

Safe and accessible models of care in the right location at the right time which put the patient in the centre

Supporting the local economy

A positive and forward-looking impact on the **local economy** and the wider environment

Financial sustainability

Sustainable delivery of care which **unlocks efficiencies** across the whole of NWAFT and the wider health and care system

Vision for the future clinical model for in and out of hospital care

Unplanned and Emergency Care

Across the Integrated Care System

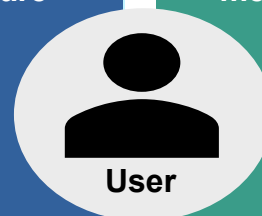
Rapid transfer and referrals exist for tertiary patients from the local area

Across NWAFT

More specialist and complex emergency care is delivered at PCH, with rapid transfer from HH for trauma, as required

HH unplanned and emergency care

Hinchingbrooke Hospital provides local urgent and emergency care to meet the volume and nature of demand from the local population, focusing on the acute local cases, maximising ambulatory and short stay models of care



Out of hospital

The majority of needs are met in out of hospital settings with strong integration between Hinchingbrooke Hospital's local acute provision, through joined up population health management, advanced digital tools, and specialist workforce acting across care settings

Planned Care

Across the Integrated Care System

The HH elective care hub forms a key asset for elective activity across the ICS, aligning with ICS elective hub strategy

Across NWAFT

Some NWAFT activity consolidated at HH, with PCH delivering more specialist activity. Integration across NWAFT through one Trust ways of working and service management

HH elective care hub

Hinchingbrooke Hospital acts as a High-Volume Low Complexity elective hub for the local and NWAFT population. Outpatient and daycase surgical activity is maximised for specific specialties to meet local and Trust needs, and contribute to meeting wider system demand

Out of hospital

The majority of elective pathways exist outside of the acute setting pre and post surgery or procedure. This enables patient interactions with the HH elective hub to be timely, rapid and efficient, to prioritise out of hospital and care closer to home

OUTSTANDING

Benefits of the new hospital

A wide range of positive developments that will improve care and experience

1. Benefits to users

- a) Improved **wellbeing and outcomes** from reduced length of stay and improved quality of care
- b) Greater **privacy and dignity** e.g from single rooms
- c) Improved **experience** through quality of environment, operational measures such as reduction in patient transfers due to single rooms, and delivery of care closer to home
- d) Reduced **elective waiting times** from higher throughput elective hub
- e) Quicker and **enhanced recovery** through e.g increased daycase activity, enhanced rehab and virtual monitoring
- f) Increased **empowerment over own care** with enhanced virtual tools, patient initiative follow up etc.

2. Benefits to staff

- a) Improved **staff retention and wellbeing** through improved quality of working environment
- b) Increased **time for direct patient care** and visibility of patient need through digital patient tracking, standard ward design, improved infection control, reduction in patient transfers etc
- c) Saved **staff time travelling across hospital** through improved clinical adjacencies
- d) Upgrades to equipment, technologies and AI to improve quality and efficiency of operational process and care delivery
- e) Opportunities for **new roles and training** or specialisation to support delivery of new care models
- f) Improved opportunities for **collaboration** across Trust and system

3. Benefits to organisation and system

- a) Total **elimination of RAAC risk** and backlog maintenance and its risks to delivery of care and financial implications
- b) Improved **research/collaboration opportunities**, through increased access to data and integration of patient records
- c) Contribution to meeting **net zero** targets and NHS Carbon Building Standards
- d) Compliance with **best practice standards** enabling treatment of patients in appropriate settings
- e) More **flexible capacity** to adapt to best meet future population needs
- f) Increased contribution of HH to **meeting Trust and system needs**, e.g through consolidation of HVLC activity
- g) Enabling **opportunities for future health and care developments** as part of HH campus

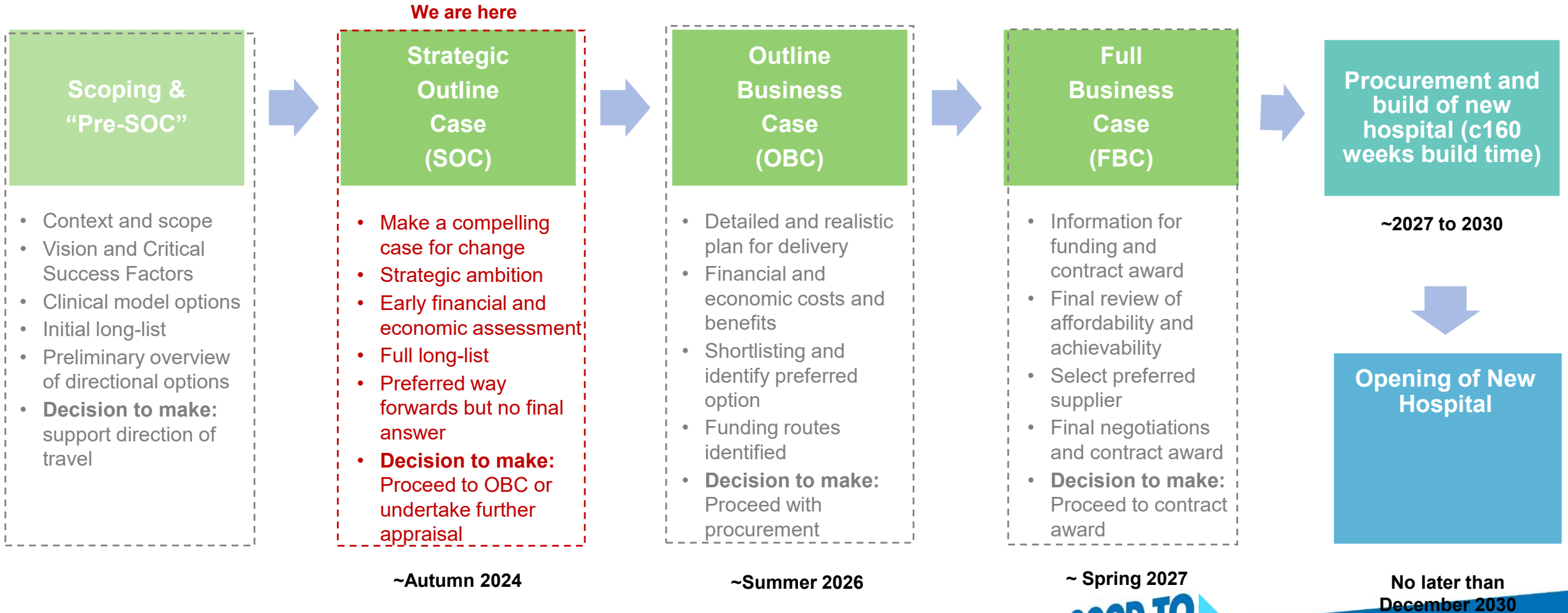
Demand & Capacity

- NWAFT and the ICB have worked with partners to **forecast** demand and capacity requirements for the new hospital through to 2040/41.
- **Our model** takes into account population growth, demographic change and increasing prevalence of long-term conditions, plus work to mitigate increases in demand and productivity improvements.
- We have **triangulated** our local model with a national tool mandated by the New Hospitals Programme and also with East of England regional analysis.
- The model has then been translated into the **schedule of accommodation** needed, and the early design work for the Strategic Outline Case.
- The model and assumptions will be reviewed again in detail during the next planning stage (**Outline Business Case**).



GOOD TO
OUTSTANDING

High-level Programme Overview



Enabling works planning and delivery

GOOD TO OUTSTANDING

In Summary

The Hinchingsbrooke Hospital Redevelopment is a once-in-a-lifetime opportunity to develop world-class healthcare, delivered from a state-of-the-art, sustainable environment for the local population and to act as a catalyst for service and workforce transformation across the whole of NWAFT and the wider system

Beyond health, HHRP presents an incredible opportunity to fulfil the hospital's potential as an anchor institution creating jobs, wealth, housing, learning opportunities and much more for the local community