

Subject:	3T Final Business Case		
Date of Meeting:	23 April 2013		
Report of:	Head of Law (Monitoring Officer)		
Contact Officer:	Name:	Giles Rossington	Tel: 29-1038
	Email:	Giles.rossington@brighton-hove.gov.uk	
Ward(s) affected:	All		

FOR GENERAL RELEASE

1. SUMMARY AND POLICY CONTEXT:

- 1.1 Brighton & Sussex University Hospitals Trust (BSUH) provides hospital services for the populations of Brighton & Hove and Mid Sussex at the Royal Sussex County Hospital, Brighton (RSCH) and the Princess Royal Hospital, Hayward's Heath (PRH), as well as running other facilities including the Sussex Eye Hospital and the New Royal Alexandria Children's Hospital.
- 1.2 BSUH plans to develop the RSCH site, increasing its capacity to deliver *tertiary* (i.e. specialist) hospital services for the population of Sussex and beyond; *trauma* care (making RSCH the specialist trauma care centre for the South East of England); and *teaching* capability (further developing BSUH's role as the regional teaching hospital). The project also includes the replacement of significant DGH inpatient, outpatient, diagnostic and treatment facilities. This ambitious programme is colloquially known as '3T'.
- 1.3 3T is intended to be financially supported via NHS Capital Funding, and access to this funding requires BSUH to follow an application process and to meet a series of Department of Health (DH) and HM Treasury (HMT) criteria. This process has taken a number of months to date, and the HWOSC has been involved/informed throughout. Approval of the Outline Business Case is now not anticipated until later in 2013. The final Full Business Case which will formally allow the main construction project to commence is expected in 2014. The attached report from BSUH (**Appendix 1**) provides an update on progress.

2. RECOMMENDATIONS:

- 2.1 That HWOSC members consider and comment on the Brighton & Sussex University Hospitals Trust (BSUH) update on the 3T development and other major trust developments (see **Appendix 1** to this report);

3. RELEVANT BACKGROUND INFORMATION/CHRONOLOGY OF KEY EVENTS:

- 3.1 For a number of years, local NHS planning has sought to develop the RSCH as a hub for specialist hospital services. Initially this was in terms of the BSUH catchment area of Brighton & Hove and Mid Sussex; latterly it has been expanded to include a number of tertiary services across Sussex and some (including trauma) on a regional basis. However, any further enhancement of the RSCH as a specialist centre will require a very significant redevelopment of the existing site.

In parallel with this, the Trust has also been planning to substantially redevelop facilities associated with DGH services for the Brighton & Hove population, in particular the wards for medicine and care of the elderly which are currently located in the 1828 Barry Building.

- 3.2 This development programme, generally known as '3T', includes a very significant building programme. 3T is a multi-year initiative, costing in the region of £400 million, and will eventually transform the RSCH into a regional trauma centre, and a tertiary care centre for Sussex. 3T will also seek to reinforce and improve BSUH's standing as a teaching hospital trust – the only teaching hospital in the SE region.
- 3.3 The advantages to the city of the 3T programme are obvious: 3T should ensure the long term future of services (and local jobs) at the RSCH site; it should provide local people with good access to specialist healthcare; construction will provide a significant boost to the local economy. However, there are some potential downsides to be considered also. These include the disruption to local communities caused by the build; the risks to existing services during the build (including services which are already very stretched); the suitability of arrangements for decanted services during the build; the environmental sustainability of the build; and the degree to which 3T and allied developments will future-proof the hospital against demographic changes and the possible downsizing of other acute hospital provision across the region (e.g. whether the re-vamped RSCH will be able to cope with potential increases in patient flow).

4. COMMUNITY ENGAGEMENT AND CONSULTATION

- 4.1 This report has been shared with the local Community & Voluntary Sector Forum and with local Healthwatch.

5. FINANCIAL & OTHER IMPLICATIONS:

Financial Implications:

- 5.1 None to this report for information

Legal Implications:

- 5.2 None to this report for information

Equalities Implications:

- 5.3 None directly

Sustainability Implications:

- 5.4 3T is a very major project and there are obvious sustainability issues around the nature of the build, the environmental-footprint of the new building, reliance upon out-of-area catering etc. However, these issues will have largely been addressed via the planning process – the main focus for HWOSC members is around the health impact on local people.

Crime & Disorder Implications:

- 5.5 None identified

Risk and Opportunity Management Implications:

- 5.6 3T is obviously a major area of risk and opportunity for the whole city, given the sheer scale of the project. BSUH maintains detailed project risk registers on all major aspects of the initiative. Members may be interested in the degree to which project risks are shared with or informed by relevant city council risk managers.

Public Health Implications:

- 5.7 None specifically identified

Corporate / Citywide Implications:

- 5.8 3T is a very significant development project and is likely to provide both a short-term and a long-term boost to the city economy (e.g. in terms of the construction project and in terms of the long term sustainability of RSCH as a major local employer).

6. EVALUATION OF ANY ALTERNATIVE OPTION(S):

- 6.1 This report is for information

7. REASONS FOR REPORT RECOMMENDATIONS

- 7.1 This report is for information

SUPPORTING DOCUMENTATION

Appendices:

1. Additional information provided by BSUH.

Documents in Members' Rooms

None

Background Documents

None