

STATES OF JERSEY



OUR HOSPITAL: PREFERRED ACCESS ROUTE (P.167/2020) - SECOND AMENDMENT (P.167/2020 AMD.(2)) - COMMENTS

**Presented to the States on 1st February 2021
by the Council of Ministers**

STATES GREFFE

COMMENTS

The Our Hospital Political Oversight Group notes the second amendment to P.167/2020 lodged by the Future Hospital Review Panel on 26th January 2021.

The Our Hospital Political Oversight Group has serious concerns about the impact of this amendment. If approved, it will seriously affect both the timeline and costs for delivering a new hospital. It is incorrect to say that there would be no consequences for the project if this amendment were to be accepted.

This project should now be three months into the design phase, engaging with members of the public and health care workers, carefully listening to their ideas and feeding them into the detailed design process for our new hospital.

Residents of the Overdale area would also now be inputting into the scheme, via the detailed communication and engagement plan, to enable the delivery partner to target any mitigation plans to minimise the impact of the highway changes and construction of the new hospital for them and the community. Instead, the Our Hospital Political Oversight Group is being asked to accept more delay in the project, as well as agree to political involvement in the planning process.

States Members are asked to respect the independent planning process – a process which will have at its heart a Planning Inspector’s report and a public inquiry. As Members of this Assembly will be all too aware, political interference in the process is one of the reasons why the previous project failed. It is best that the approval of technical designs or individual planning applications of this magnitude are determined by professional technical experts with the appropriate skills and experience and as part of the statutory planning process.

The requirement to delay all engineering work until after approval of this amendment has the consequence of increasing risk in the design timetable, which will delay the project further, increase the costs, disregard what the Clinicians are recommending and, of course in the long term, put patients’ health at risk.

The Our Hospital Political Oversight Group have already endorsed the preliminary engineering works on Westmount Road and around the Overdale site to determine the geotechnical and topographical conditions, as well as location and condition of services. In addressing the amendment’s points in detail, The Our Hospital Political Oversight Group responds as follows:

- (i) The level and detail of work requested would not be achievable in the outline time frame given, so therefore cannot be published or shared by the proposed date.
- (ii) This is, in effect, part of the design process required to satisfy the Legal Planning requirements.
- (iii) It is crucial that any land acquisition for the project is conducted by, and on behalf of, the relevant technical and professional experts necessary to support the project rather than by politicians. Also, further delay in the land acquisition programme will add to the considerable stress and uncertainty that property owners, who are making significant personal sacrifices in being asked to leave their homes in the area, are enduring. It will also force

the project to adopt unnecessary statutory measures, lead to the continued pressure on neighbours and increase compensation costs, all of which contribute to further risks to delivering the project within the timetable.

- (iv) The impact of the new route on local amenities, including houses, schools and existing structures, will form part of the planning application process.
- (v) The impact of the new route on the surrounding ecology and environment will form part of the planning application process.
- (vi) The scope of the engineering works and any anticipated disruption will form part of the planning application process.
- (vii) The timescales for the work to be undertaken on the road will be included and addressed in the planning application. However, and contrary to suggestions in the amendment, it will add at least 12 to 15 months to the programme, resulting in a probability of a delayed planning application being submitted in the summer of 2022. This would lead to the remaining design, land assembly, business case preparation and early engineering works (which the wording of the proposed amendment prohibits), concluding in 2023. The consequences of which would mean a works' contract being entered into in the spring or summer 2023, which could lead to the loss of our delivery partner and/or additional team costs, combined with probable need to renegotiate a different and significantly more expensive construction contract, putting further substantial risk to public monies.
- (viii) The anticipated cost and budget for the work will be included in the Outline Business Case for the project. However, the proposed amendment will ensure that the exposure to additional risk and subsequent increased costs will be far in excess of current forecasts. Estimates from the cost consultant, based on their major project and 50 years-plus combined specialist cost experience on construction projects, indicate that costs and the risk profile are highly likely to rise, potentially in the order of 30% or more on the total current estimate. This excludes the inevitable further costs of the back-log maintenance programme for the current hospital.
- (ix) Of course, the visual impact at key locations on the access route will form part of the planning application process.

Addressing some of the points raised in the accompanying report, the Our Hospital Political Oversight Group would add:

- (i) It is true that there are no detailed designs as yet, but the delivery partner has fully assessed the impact on the surrounding areas and residents as this formed part of the 38 criteria used to assess the 71 possible access route permutations for Overdale.
- (ii) As already mentioned, it is not the Assembly that determines planning applications. This process must be allowed to follow due process, which will enable members of the public to have confidence in the outcome of the planning decision and allow unfettered public consultation and feedback, as appropriate.

- (iii) The costs of the design for Westmount Road are included in the Pre-Construction Services Agreement with the delivery partner. If we embark on a piecemeal approach of working through each of the 71 access options, with detailed designs for each, the costs will increase substantially, and the timeline will become unachievable. It should be noted that no planning application will be submitted until the costs of the work have been reconciled against the budget.
- (iv) It is not correct to state there will be no financial or manpower implications as a result of this amendment. As already outlined above, the impact of this amendment on the overall project timeline and costs, and also the staffing requirements for building a new hospital, will be significant.

When this Assembly was elected in 2018, many States Members and the majority of the Island wanted us to make rapid progress on the delivery of a new hospital for Jersey. The Our Hospital Political Oversight Group has driven the project in order that we can complete the construction of the new hospital by 2026. The timeline and impetus have not been designed to fit a specific political agenda. It is determined by our ageing and decaying health estate and the unsustainable cost of maintaining it past 2026.

We have a thorough and robust planning process in Jersey. We should leave the design of the road and hospital to that tried and trusted regulated process without unnecessary political interference. Members of the Political Oversight Group have grave concerns that the best interests of Islanders and our health professionals is being put at risk. They simply want us to get on with the job of building a new hospital. We should not fail them. As an Assembly we should be working together to support the Island's future healthcare needs.

Statement under Standing Order 37A [Presentation of comment relating to a proposition]

The Comments have been presented as quickly as possible after receipt of the amendment given the date of lodging and the considerable implications that had to be researched. We apologise for the slight delay.

Health and Community Services

General Hospital

Peter Crill House, Gloucester Street
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27th January 2021

To: The Chief Minister and Deputy Chief Minister.

Clinicians Concerns Regarding Further Delay to The Our Hospital Project

Dear Senator Le Fondre and Senator Farnham

I am writing to you in my role as Acting Group Medical Director to seek assurance around the Our Hospital project.

Following my most recent one to one with the Clinical Director for the Our Hospital project I am extremely concerned regarding the delay in order to further scrutinise the access road. I am led to understand that this risks further extension to the timeline of the whole project and if that delay is significant, such increased financial pressure may make the whole project unviable.

The need for a new hospital is well rehearsed and I am aware that both you and other States Members are fully cognisant of these as well as supportive but I would like to reiterate them again.

They include: The current estate being unsuitable for the delivery of modern health care for multiple reasons including a complete lack of privacy and dignity in many circumstances when caring for islanders at their most vulnerable.

The current estate becoming unfit for purpose by end of 2026 with significant clinical risk as well as escalating costs, all of which are forecast to increase substantially in around 5 years' time.

The need to co-locate acute mental and physical health facilities if we are ever going to address the lack of parity of esteem that currently exists for these two facets of our present healthcare system.

The inability to ever get near providing the infrastructure required to deliver a modern digital health agenda which will become increasingly important as we progress through the 21st Century.

The significant infection control risks that the current estate creates which can never be mitigated to the extent that a new facility can achieve.

The reputational damage to the island and its ability to attract the highly skilled workforce we need if this project fails to be delivered this time around.

Whilst slightly outside of my remit, I am aware of the reputational damage in the eyes of building contractors that will be caused by the project failing again and the difficulty that will create in trying to attract the best companies to the island to build a facility that is fit for the people of Jersey.

The harm to our healthcare workforce in terms of their morale and wellbeing by creating further uncertainty in relation to this project, particularly given their experiences of the last year due to the pandemic. I cannot see how we would be able to engage the clinical workforce yet again in the future for a further iteration.

I believe given all the considerations above I am justified in saying that we all should be in no doubt that the longer this project is delayed then the more harm that will come to the people of the island through the continued use of a failing and inadequate facility.

I believe it is only fair to my fellow healthcare workers that I highlight our concerns to you on their behalf and seek assurance that we will not be held to account for the harm that I have described above that

will almost inevitably occur as a result of the continued use of a facility that is already well beyond its reasonable life. I have taken opinion from my Deputy and Associate Medical Directors in addition to the most recent Chair of the Medical Staff Committee who have as a group endorsed my view.

As always, we are available for further dialogue and discussion on this subject

Thank you for your consideration.

Yours sincerely

A handwritten signature in black ink, appearing to read "Patrick Armstrong". The signature is written in a cursive style with a large, sweeping initial 'P'.

**Mr Patrick Armstrong MBE
Acting Group Medical Director.**