REPORT TO
DUNFERMLINE & WEST FIFE CHP COMMITTEE

THURSDAY 9 JANUARY 2014

QUEEN MARGARET DEVELOPMENTS UPDATE

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Queen Margaret Developments Update

Purpose of the Paper

The purpose of the paper is to update the DWF CHP Committee on the developments at QMH since the last report in September 2013.

1 Introduction

The Queen Margaret Development Project Board has been established since November 2012. Due to a recent retirement a new chairperson has been appointed, Chris Bowring, NHS Fife Director of Finance. The Board membership includes two members of the public. The Project Board meets monthly.

The Queen Margaret Project Team meets monthly to drive the process and ensure progress is maintained. Updates are received from each of the Workstreams.

2 Progress

Established Workstreams are as follows:-

2.1 Day Surgery, Endoscopy, Urology & Day Care Services (DTC)
2.2 Primary Care Services
2.3 Children’s Services
2.4 Maternity Services
2.5 Communication Sub-Group
2.6 Travel Planning Group (existing Group)
2.7 IT and telephones
2.8 Non-clinical
2.9 Main Entrance/Foyer

This report gives an update on the above workstreams with emphasis on the DTC and the Travel Plan. The report will also provide information on plans to improve and update the main reception and foyer area.

2.1 Day Surgery, Endoscopy, Urology & Day Care Services (DTC)

Drawings for the DTC required to be reviewed following concerns of affordability with the original plans. These have now been finalised taking account of most recent published standards in terms of bed spacing and single room provision.
2.1 Day Surgery, Endoscopy, Urology & Day Care Services (DTC) continued

This was discussed at length with technical and infection control teams and agreement reached on what was achievable with in the scope of the project. This was presented to and accepted by the Project Board.

The phase one of the Endoscopy Unit is complete and tests continue to ensure water quality prior to the installation of the ISIS machines in the reprocessing plant. This has presented some challenges but the technical staff now believe they have identified the cause and have a plan to address the problems encountered.

The second phase which includes the Day Surgery reception and assessment area is now well underway.

Work has also commenced in Ward 9/9a to create the Day intervention and urology units.

The current area for Day Surgery/23 hour stay activity has been decanted into Ward 12 to allow work to commence here.

With exception of the 23 hour stay area which will be undertaken post April 2014, all the above work will be complete by March 2014.

2.2 Primary Care Services

In addition to the services specifically mentioned in Right for Fife, other community services are being considered for integrated working which could improve services for patients. This work is being progressed via the Primary Care Resource Centre workstream and the QMH Project Team.

These services include Podiatry, Nutrition & Dietetics, Speech & Language Therapy, Diabetic Services, Children’s Physiotherapy and Occupational Therapy, Clinical Psychology, Children & Adolescent Mental Health Services, Family Nurse Partnership, Learning Disability Out-patients, Dental Services and others supported by administration services.

An area within QMH has been identified and the Design Development phase has begun for the primary care resource centre.

Children’s Occupational Therapy & Physiotherapy will be relocating into the existing footprint of Therapy & Rehabilitation at QMH. Some works are required to accommodate these services and this is currently being accelerated to meet the needs of the service.
2.3 **Children’s Services**

The model of care has been agreed taking account of emerging opportunities within Children’s services.

Funding has been identified in the capital plan 2013-2014.

2.4 **Maternity Services**

Work continues as per plan and a fuller report on this workstream will be given at a later date.

2.5 **Communication, Involvement and Engagement**

The importance of having clear and regular communication is well recognised and a communication sub-group, chaired by NHS Fife Communication Manager, meets monthly.

Following the end of the consultation period in September a paper was agreed by the formal DWF CHP committee meeting on 14 November 2013.

The paper provided evidence and outcomes from the public/patient involvement in relation to developing a Primary Care Resource Centre at QMH and acknowledge the impact of closure on the existing facilities of Carnegie Clinic and Abbeyview Clinic.

Communication on progress about the work on QMH site will be published in the next Queen Margaret Developments newsletter.

2.6 **Travel Planning**

The travel planning group have been considering for some time reconfiguration options to improve traffic flow and access to the main entrance.

Account has been taken of the views expressed by the public during the phase of public/patient involvement in relation to developing a Primary Care Resource Centre. Additional blue badge and parent/child spaces have been identified.

A one way system has been developed to improve traffic flow and minimise risk to patients and relatives crossing from the car park into the main hospital entrance. A paper was consideration by the project team and supported. This is now being discussed with the local bus service providers following all the necessary approval.
2.7 **IT and Telephones**

Work continues as per plan and a fuller report on this workstream will be given at a later date.

2.8 **Non-clinical**

Work continues as per plan and a fuller report on this workstream will be given at a later date.

2.9 **Main Reception/Foyer**

Plans to update and improve the main reception area have been developed by our architects and presented to the Project team and a group of invited representatives from our public partners. Some fine tuning was required to ensure privacy for patients is maintained while ‘booking in’ as in close proximity to the coffee shop.

The new design will allow improved patient flows and self check in.

Some further colour schemes are being developed for the main foyer which will be shared with the staff which will offer a bright and welcoming area for patients and relatives to wait.

This work will cause significant disruption at the main entrance and plans to discuss with staff their individual issues will take place in the New Year. Details of the changes will be well publicised to the public in advance of the work commencing.

3 **Older People’s Service**

The Older Peoples Wards 5, 6 and 7 have been decanted into level 3 of phase 2 to allow essential repair work to be undertaken. This will be for a period of 5-6 months. Communication with the families regarding this change was given priority and the moves have gone smoothly with no significant problems.

4 **Budget**

The redevelopment of QMH is progressing within budget.

5 **Next Steps**

The next steps include continuation of the work detailed above and commencement of the site development plan for the PCRC.
6 Recommendations

The DWF CHP Committee are asked

- To note the progress made and ongoing work as detailed in the paper.

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