18 July 2019

Following my decision on 4th July 2019 to delay the move to the new hospital Royal Hospital for Children and Young People (RHCYP), I write to provide you with detail on the reason for that decision, the work that I have instructed to identify the factors that led to that decision and to determine the actions required to allow the move to go ahead, and the support being provided to the Board, patients and staff.

On Tuesday 2 July, NHS Lothian informed the Scottish Government to an issue with the ventilation system at the Royal Hospital for Children and Young People in Edinburgh. We were advised that the air change in the ventilation system in the critical care unit did not meet the frequency required to meet the 2014 standard.

I was not satisfied that the issue could be resolved within the very short timeframe available before services were to move to the new hospital, and given the late notice of the failure in the critical care unit, I required further assurance on all aspects of compliance with standards across the new hospital.

I therefore instructed that the planned move be halted in the interests of patient safety. There is no greater responsibility of the NHS than to ensure the clinical safety of their patients, not least when those patients are children.

Work has been initiated to identify the solution needed to ensure the ventilation in the critical care unit in the new site meets the required clinical and safety standards.

I have commissioned NHS National Services Scotland (NSS) to undertake a detailed assessment of all buildings systems in the new hospital which could impact safe operation for patients and staff, recognising how infection prevention must always be embedded within the design, planning, construction and commissioning activities of all new and refurbished healthcare facilities.

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This work will be phased, with assessment of water, ventilation and drainage systems prioritised, including the proposed fix for the ventilation unit. This will determine the timeframe for migration of services to the new hospital and a full report is anticipated in September.

Running in parallel, NSS will also provide assurance that current and recently completed major NHS capital projects comply with national standards. This work will take a risk-based approach and will inform development of the potential expansion of the current function and services provided by Health Facilities Scotland; including providing assurance going forward that NHS buildings meet extant standards.

Where required, additional specialist expertise will be secured by NSS to facilitate their work.

It is also important that we understand the factors, including information flow and timeframes, that led to the decision, announced on 4 July, to delay the move to the new hospital. KPMG have been engaged to conduct an independent audit of the governance arrangements for RHCYP, to provide an external and impartial assessment of the factors leading to the delay. This work began on 15 July and in the first instance will focus on collecting and reviewing all pertinent documentation. This will inform next steps, including interviews with key personnel and timeline for reporting, and I expect to have further clarity on this within the next week.

I recognise that the cumulative impact of the significant work required to complete the move to the new RHCYP, together with the requirement for improved performance across a number of other areas, including scheduled and unscheduled care, cancer, delayed discharge and mental health, will place significant pressure on the leadership capacity of the Board. Reflecting the significance of this challenge, NHS Lothian have been placed at Level 3 of the NHS Board Performance Escalation Framework which is defined as: ‘Significant variation from plan; risks materialising; tailored support required’.

A formal Recovery Plan has been requested from the Board, setting out clear milestones to address each of the areas I have highlighted. A package of tailored support will be made available to the Board, in order to develop and implement the Recovery Plan.

I understand that this is a disappointing time for parents and carers of patients who have appointments at the new RHCYP, and for staff.

Parents and carers are being contacted directly by the team at the existing Royal Hospital for Sick Children to confirm arrangements for their child’s appointment. Those with appointments in July are being contacted by phone in the first instance and those with appointments in August onwards will be contacted by letter. Every effort is being made to retain the same appointment date and time wherever possible. A dedicated helpline is in place for families and carers to discuss any concerns about appointments or treatment with the clinical team already caring for their child.

NHS Lothian staff have all made considerable efforts to help make the move and some have made personal and domestic plans to coincide with the move. I have written to staff today to thank them for their hard work in preparing for the move, for all that they are doing to help manage the situation and for their excellent track record of providing high quality patient care.

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NHS Lothian have also carried out a number of staff sessions and a Q&A has been posted on the NHS Lothian Intranet to answer questions received from staff to date, and going forward. The Senior Team at NHS Lothian will continue to work with all staff as we proceed with the work required to allow the move to take place.

Safe, effective and high quality clinical services continue to be delivered from the existing site in Sciennes and my officials are working very closely with the management of the Board and clinical professional organisations to ensure that we take all the necessary actions to allow the move to go ahead as quickly and safely as possible.

I have this morning answered a GQ updating Parliament of this information and I will keep them informed of progress of the reviews being undertaken and the timeframe for moving to the new hospital.

Kind regards

JEANE FREEMAN