

Councillor Tony Virgo
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26th July 2011

Dear Cllr Virgo,

Following your formal request to the PCT for a response to your report on the procurement of the HealthSpace in Bracknell, I am now able to provide you with one. Please note that one of the outstanding items that is holding up the signing of the agreement with the developer is the outstanding section 106 agreement by the Council. This needs to be concluded before I am able to sign the agreement with Ashley House.

Yours sincerely,



Charles Waddicor
Chief Executive for NHS Berkshire

Encl



Berkshire East

It is recommended to the Chief Executive of NHS Berkshire East that:

- 4.3 NHS BE should give more attention to:
 - a) Providing more open, regular and comprehensive communication (paragraph 3.3a);
 - b) Providing more robust project planning information in the public domain (paragraph 3.3b);
 - c) Strengthening project direction (paragraphs 3.3 and 3.7);
 - d) Concluding negotiations with prospective service providers (paragraph 3.3 and 3.11);
 - e) Evidencing clearly and publicly how the NHS locally is to achieve substantial cost savings through re-configuring health services (paragraph 3.3f).
 - f) Explaining in more detail the service offering of, also the timetable for commissioning – the Urgent Care Centre (paragraph 3.12).
- 4.4 NHS BE should explain how the separation of the diagnostics facilities away from the Healthspace to the Brants Bridge site will not be allowed to cause operational inefficiency or undermine the concept of a 'seamless' healthspace, where a patient can move from reception, thorough to consultation, diagnosis and then treatment without leaving the same building. (paragraph 3.5).
- 4.5 NHS BE should explain how they will restore public confidence in the timetable for bringing the Healthspace into being, given the continual slippage in the timescale throughout the project (paragraph 3.6).
- 4.6 NHS BE should ensure that the terms for the sale or transfer of the land owned by the PCT at Skimped Hill to the developer are fully transparent and defensible, given the PCT's stance that it would not be making any financial contribution to the Healthspace project (paragraph 3.14).
- 4.7 NHS BE should explain how the management of the project will be kept on track during the transition period of the PCT being wound up, and clarify the future ownership of the Healthspace project after the PCT's abolition (paragraph 3.9).

Introduction:

Since the publication of this report, NHS Berkshire East has now become part of the Berkshire PCT Cluster. Whilst the statutory entity of NHS Berkshire East remains, the governance and management of the HealthSpace project going forward will be under the leadership of the Berkshire PCT Cluster. The Cluster Board, at its meeting on 29June endorsed the HealthSpace project, subject to being satisfied on a number of financial and legal issues, and looks forward to working with its partners to bring the scheme to a successful conclusion

Response to individual points:

4.3

a) The PCT is committed to maintaining open and timely communications with its partners and the public. As the HealthSpace plans continue to develop we will ensure that communications are maintained

b) We are happy to share the project plan which the Cluster Board has endorsed

c) Project direction for the HealthSpace has been considered in the new structures being put in place by the Cluster. The support to the Bracknell and Ascot clinical commissioning group will reflect the needs of the project. Resources have also been approved for the legal and professional support required

d) The PCT recognises the need to progress the discussions and reach agreement with potential providers. This has been made inevitably more complex by the degree of change in the local health systems recently, but the project plan going forward will reflect the importance of this

f) Much work has already been done to develop the Urgent Care concept, including some comprehensive stakeholder events which I know some members attended. There has been detailed work since to develop this by the Clinical Commissioning Group. We are currently writing the service specification for the service and will be involving patient representatives and other stakeholders in this.

4.4 The services represented at Brant's Bridge are very specialist in nature and do not duplicate the services planned for HealthSpace. The Bracknell Clinic at Brant's Bridge is specifically for the treatment of cancer and renal disorders. These are 'tertiary' services and therefore not services to which GPs refer directly. We are delighted that this group of patients has access to a discreet local service in such an improved environment

4.5 The PCT and the clinical commissioning group shares some of the frustration arising from the delay. It has been particularly challenging to maintain momentum for this project amidst the considerable change going on around it. We would hope that public confidence will follow as the project plan starts to be delivered.

4.6 It is the intention that the land at Skimped Hill will be sold to Ashley House as part of the development proposals. The disposal of any asset has to demonstrate best value and in addition, under new guidance issued in Feb 2011, any asset disposal has to be approved by the Strategic Health Authority

4.7 The management and any future liabilities for the HealthSpace are being taken into account as the details of the reforms unfold. The Bracknell and Ascot clinical commissioning group are well appraised of the potential implications for their organisation going forward into the future and remain firm sponsors of the scheme.