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Jim Lusby  
Director of Delivery and Development (South)  
NHS Trust Development Authority

Headquarters  
The Royal Sussex County Hospital  
Eastern Road  
Brighton  
BN2 5BE

Tel: 01273 664902

Dear Jim

**Brighton and Sussex University Hospitals NHS Trust: Full Business Case for the 3Ts Development**

You will be aware from our discussions over the last week that the Trust Board met yesterday to discuss the revised chapters to the Full Business Case, which were amended following the comments and clarifications sought by your team and colleagues at NHS England and the Department of Health.

The Board has approved the revisions to these chapters in line with the Board paper which has been sent to you.

In particular, the Board were apprised of the changes in the Long-Term Financial Model which has been generated by extensive and helpful discussions with your team. These will ensure that we have sustainable levels of cost improvements, generate an appropriate surplus and yield the necessary financial ratios to support our future ambition as an NHS Foundation Trust.

The Board also discussed the particular downside scenario which was informed by discussions with NHS England and which identifies the longer term challenge across the health economy with regard to demand management and further improvements to care outside the acute setting. We are confident that the actions we could put in place (further estate rationalisation or not fitting out parts of the 3Ts facilities) to mitigate this scenario would be deliverable and maintain overall affordability.

The Board also noted that the benefits of the Full Business Case greatly outweigh the costs of the scheme by a ratio of 13:1 and therefore represent good value for money for the public purse.

I am aware that concerns have been raised about the exclusion of the ED department from the business case and to that end I have copied you into a letter sent to Julie Blumgart today with further clarity of the rationale and most importantly what actions are underway to address the issues of operational performance and capacity currently faced by the Trust and our partners in the local health and social care economy. The Board discussed these at the meeting yesterday cognisant of the importance of this matter to our patients, the system and the Trust at this time.

The Board was clear that the proposals set out in the Full Business Case represent the culmination of a thread of strategic planning which extends back over 10 years, to the creation of the Trust, the Medical School and the implementation of the model of care that is still extant across the Trust.

With our partner

We have already mostly implemented the regional strategy to develop a Major Trauma Centre in the South East and are about to support this by our transitional move of acute neurosurgery to the Royal Sussex County Hospital.

The latter move is the first part of a strategy which has been unrealised for over 20 years: the transfer of neurosciences to the County site. This will be fully realised when the first stage of 3Ts is complete.

I think that it is worth restating that the overall strategic plans which have been part of commissioner and provider ambitions across Sussex for at least a decade (and in some cases longer) are embodied in the service changes and benefits which will be enabled by 3Ts as a built form: the improvement in District General Hospital services for the people of Brighton & Hove (and particularly the replacement of the Barry Building which has been identified as a necessity since 1928), the expansion and relocation of neurosciences alongside other tertiary specialties, the further development of the Major Trauma Centre, the expansion of cancer services and the further development of teaching and research facilities.

These simple strategic imperatives have formed the five objectives of the 3Ts programme since its inception on 2007 - and were designed explicitly to meet these imperatives.

I am aware that the focus sometimes seems to be the buildings. However, the Board is clear that those are the (significant) necessary enablers of this overall strategic vision and the service benefits for our patients - both locally, across Sussex and beyond. It is why we developed and launched the clinical strategy, which you and your team have, to take us from where we are today to the opening of 3Ts. It is this and the longer term strategy outlined again that I hope demonstrates the underpinning rationale for our current and future plans.

It is this significant strategic fit which has ensured that there has been strong alignment and support at local and regional level throughout the development of our plans and this remains the case through significant change in the local commissioner environment during that time. We were pleased to hear that NHS England took a positive view of the Business Case at its Finance and Investment Committee last week.

It is often said that the clinical case for change is unanswerable and is immediately apparent to anyone who has visited the County site or Hurstwood Park. The imperative for us as a Board is to seek a final approval at the earliest opportunity to finally implement this series of strategic imperatives. We are grateful for the support that has been extended to us by you and your team in the development of the Full Business Case and it is very much appreciated. We look forward to a positive outcome and if there is anything more we need to do to help with that, please contact Duane or me.

Yours sincerely



Matthew Kershaw  
Chief Executive

cc.

Amanda Fadero:	Deputy Chief Executive and Executive Director of Strategy & Change
Sherree Fagge:	Chief Nurse
Steve Holmberg:	Medical Director
Julian Lee:	Chair
Duane Passman:	SRO and Programme Director, 3Ts
Spencer Prosser:	Chief Financial Officer