

THE WEST HERTS HOSPITAL SITE STUDY – A QUESTION OF INDEPENDENCE

NOTE. The report of the study can be found at https://www.westhertshospitals.nhs.uk/newsandmedia/mediareleases/2020/august/sitefeasibilitystudy.asp#_ftn1

While it is important that the Site Feasibility Study (the Study) is comprehensive and accurate, it should also be seen to be fair, balanced and independent. In particular, there should not be any suggestion or perception that those who produced it had any conflicts of interest. With admirable clarity, the Herts Valley Clinical Commissioning Group set out the importance of this principle in the papers for recent Board meetings:

A conflict of interest occurs where an individual's ability to exercise judgement, or act in a role is, could be, or is seen to be impaired or otherwise influenced by his or her involvement in another role or relationship. In some circumstances, it could be reasonably considered that a conflict exists even when there is no actual conflict. In these cases it is important to still manage these perceived conflicts in order to maintain public trust.¹

We believe that those involved in commissioning and producing the Study have failed to recognise and effectively manage the possibility of a perceived conflict of interest.

The Study was commissioned by West Herts Hospitals NHS Trust (WHHT) from RFL Property Services Ltd (RFLPS) and its primary purpose is " for the RFLPS consortium consulting team, including Montagu Evans (a property consultancy) and Currie & Brown (an asset management and construction consultancy) to independently assess and determine the programme to bring forward a health facility for WHHT in consideration of town planning

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https://hertsvalleysccg.nhs.uk/application/files/1815/9525/0236/Board_meeting_held_in_public_23_July_financial_PDF_V2.pdf

constraints and the ability to acquire the land interest." The Study was "submitted" by the Director of Property at RFLPS and "authored by RFLPS and consultancy team".² Our remarks are solely directed at the work of RFLPS. We make no comment on the contribution to the Study of either Montagu Evans or Currie & Brown.

One significant weakness in the Study is that the status of RFLPS is not explained. Previous site reviews in this process were commissioned from conventional private sector companies, but the situation with RFLPS is different. Although it is a Private Limited Company, it is a wholly-owned subsidiary of the Royal Free London NHS Trust, and was incorporated in 2018. It "oversees the management of estates and facilities at the [Royal Free] trust" and was awarded a contract to "manage and be financially and operationally responsible for the completion of the Chase Farm site". At senior official level the connections between RFLPS and the Hospital Trust are close. The Chairman of RFLPS reports to the Royal Free Trust Board, the Royal Free Group's current Chief Executive was formerly an RFLPS director and the Chief Financial Officer of the Trust also currently acts as a director of RFLPS. All current directors of RFLPS give the Trust offices as their address.

In early 2020, RFLPS was awarded a two-year, £2 million contract for "Acute Redevelopment Programme Next Phase Technical Support at West Hertfordshire Hospitals NHS Trust (WHHT)."³ RFLPS was in addition asked earlier this year to carry out the Study.

In an unfortunate omission, the Study does not mention the very relevant fact that the owner of RFLPS, the Royal Free London Trust, has in recent years also worked with West Herts Trust on a range of clinical and other activities. These include:

- In October 2018, the Royal Free London Trust and West Herts announced that they had "joined forces as part of a new clinical partnership. The partnership follows months of close collaboration between the two trusts."⁴ By 2025 the West Herts Trust expects to have implemented nearly 50 'care pathways' for various conditions under this arrangement.⁵
- In January 2019 one of the Workforce Priorities discussed at a Board meeting of the West Herts Trust was to "determine opportunities for closer working with the Royal Free Hospital to achieve synergies and efficiencies [in occupational health]."⁶

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<https://www.westhertshospitals.nhs.uk/about/redevelopment/documents/WHHT%20Site%20Feasibility%20Report%20-%2020210820%20-%20final.pdf>

³ <http://bidstats.uk/tenders/2020/W07/720896512>

⁴ <https://www.royalfree.nhs.uk/news-media/news/royal-free-london-and-west-herts-hospitals-announce-new-clinical-partnershi/>

⁵ http://www.westhertshospitals.nhs.uk/about/board_meetings/2020/Agenda_and_papers-Board_meeting_06_February_2020.pdf

⁶ http://www.westhertshospitals.nhs.uk/about/board_meetings/2019/Agenda%20and%20papers%20-%20TB%20meeting%2010%20January%202019.pdf

- Also in January 2019 another of the Workforce Priorities was “Build academic partnerships and explore joint working with the Royal Free to underpin our case for university status.”
- Again in January 2019, the Board was told in an Tender Update in relation to some ultrasound services for the Herts Valley Clinical Commissioning Group that “The preferred option is to work with Royal Free London and STAHMIS [a private provider], with WHHT as the lead provider and RFL as a sub-contractor.”
- In May 2019 the West Herts Board was told that the Trust’s Interim CIO was meeting his Royal Free counterpart “to further explore opportunities for the RFL to support the development of the business case and the potential to work with the Royal Free as a GDE [Global Digital Exemplar] fast follower.” The clinical partnership with the Royal Free was described in the Board papers as one of WHHT’s ‘key strategic work programmes’.⁷
- The October 2019 West Herts Board heard that “the Trust is seeking to move towards a shared service model [on occupational health] to create economies of scale. Preliminary discussions with the Royal Free Hospital have commenced with an opportunity to appoint a joint occupational health lead under consideration.”⁸

The West Herts Trust Board papers for January 2020 set out “a summary of what we aspire to achieve in the next three years” including “We will be working in stronger partnerships both across the STP (ICS) and with our colleagues at the London Royal Free measured by at least five tangible and measurable initiatives with each.”⁹ The ‘Royal Free London Group Model’ envisages the development of a very wide range of joint working and shared services between hospitals.¹⁰

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http://www.westhertshospitals.nhs.uk/about/board_meetings/2019/Agenda_and_papers_for_Board_02_may_2019.pdf

⁸ http://www.westhertshospitals.nhs.uk/about/board_meetings/2019/Agenda%20and%20papers%20-%20TB%2003%20October%202019.pdf

⁹ http://www.westhertshospitals.nhs.uk/about/board_meetings/2020/Agenda_and_papers_Board_meeting-09jan2020.pdf

¹⁰ <https://www.royalfree.nhs.uk/the-royal-free-london-group-model/>

NHS England has warned the Service of one of the problems that can arise with partnership working:

To deliver high quality and innovative care organisations need to work collaboratively with each other, local authorities, industry and other public, private and voluntary bodies. Partnership working brings many benefits, but also creates the risk of conflicts of interest.¹¹

In the light of such close and developing strategic collaboration between the two Trusts, there may be a perception that it would be difficult for RFLPS, with its close connections to the Royal Free, to provide a fully independent assessment of potential sites, especially given WHHT's frequently-stated preference for redeveloping the Watford General site rather than building a new hospital on a clear, central site.

We are concerned that public trust in the NHS may be undermined if any perception arises that judgements on important issues such as site selection in West Herts are unduly influenced by corporate interests and are not completely independent. The breadth of the partnership between the two Trusts should have been made clear in the Site Study, in view of the requirement for openness set out in the Seven (Nolan) Principles of Public Life, which apply to all those delivering public services.¹²

It would therefore be unwise for the Herts Valleys Clinical Commissioning Group and West Herts Trust to rely too heavily in their decision-making on assessments of site viability that might not command full public confidence.

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¹¹ <https://www.england.nhs.uk/wp-content/uploads/2017/02/guidance-managing-conflicts-of-interest-nhs.pdf>

¹² <https://www.gov.uk/government/publications/the-7-principles-of-public-life/the-7-principles-of-public-life--2>