

Community Engagement Group – Disposal of AAH site

4.00-5.00pm Thursday 22 February 2018, St Roque Boardroom, AAH

In attendance:	Representing:
Steve Shon	Senior Project manager, Major Hub Initiatives, NHS Lothian
Martin Hensman	Hub South East
Ron Finlay	Lead Architect, NHS Lothian
Nigel Ayton	Grange Ass. & Marchmont & Sciennes Community Council
Steve Gregory	Morningside Community Council
Sue Tritton	Grange Association
Helen Zealley	Merchiston Community Council
Tony Harris	Grange/Prestonfield Community Council
Roger Kellett	Grange Association
Sofia Leonard	Grange Association

Note of Meeting

Action

1.0 Introduction and Welcome

SS welcomed members to the Group and noted this third session was to provide an update on activities to date.

1.1 Update on Clinical Strategy

SS noted there was ongoing engagement with Integration Joint Boards regarding clinical planning for the AAH and REH sites. Some programme slippage has been evident due to the ongoing clinical engagement. Clinical services are being reviewed in the light of Integration Joint Boards becoming involved. Phase 2 of the REH development is directly affected due to a reassessment of the number of beds that may be required being undertaken.

The balance being a mix between the provision of hospital beds and that which can be in the community setting. Coming to an agreement on this has resulted in a change of programme, with Phase 2 being postponed and the possibility of phase three taking precedence. This is likely to cause a delay or pause of approximately two years.

1.2 Estate Rationalisation

SS noted as part of the overall clinical planning there may be an option to review accommodation needs with other Boards as part of a regional agenda. This would be factored into ongoing clinical discussions. This is part of the review of all of our major sites, with the opportunity to vacate and obtain capital receipts. We are in the process of writing a business case to enable Liberton beds to transfer to the Jardine clinic on the REH site and the possibility of intermediate care provision at the RVH. CEC are currently challenged with a shortage of staff to support new care facilities.

From an overall strategic planning point of view NHSL are looking to provide a new eye pavilion and cancer centre.

1.3 Masterplan Consultants

MH stated that following the appointment of Barton Wilmore as preferred bidder. Further assessments have been made for consultants bidding for landscape, ecology and archaeology. We have scored and have preferences in each category.

1.4 Staff Engagement

Engagement sessions that had been planned for staff have now been postponed in light of change in clinical strategies. The options for the site still include the possibility of retaining part for clinical use

2.0 Community Engagement

2.1 Engagement Strategy

As previously reported, MH confirmed the engagement strategy is benchmarked against the Scottish Government National Standards. Work will be undertaken to ensure the standard is bespoke to the needs of the AAH strategy.

2.2 Stakeholder Mapping

As previously reported, MH noted that the stakeholder mapping exercise is being prepared as part of the engagement strategy. The mapping is currently underway and will ensure the engagement is designed appropriately for the process. MH confirmed the strategy and framework will be put to the Group for agreement.

ST advised that many individuals circa 450 took up an invitation to walk the AAH site, this generated public interest and speculation about what development may take place on the site. A recent public meeting had been held by a different group interested in public ownership for all or part of the site. The masterplanning group (this group, formally representing the Grange Association and relevant Community Councils) was keen to avoid any confusion between the two groups.

MH indicated that If the community were to buy part of the site they would have to be aware of costs associated with maintenance of the site, especially tree management.

In selling all or part of the AAH site we would seek value for money rather than try to maximise receipt. Bangour hospital for example, a complex site with listed buildings has taken twenty years to get close to concluding a sale.

2.3 Programme

SS indicated that slippage on the programme was inevitable, timelines would be updated accordingly.

2.4 Ongoing and Future Communication

Community groups had not been updated about recent change of direction; there has been a communication hiatus, for which we apologise. We should apply lessons learned from the Craighouse and RHSC experience. We will reissue the timeline consultation timetable updated to reflect current status.

3.0 AOB

Cloud point survey is available to view and includes infrared and elevation information. This is a comprehensive 3D record of the site and was demonstrated by RF following the meeting.

Date of next meeting

26 April 2018, St Roque Boardroom, AAH