

Appendix 4 – Desirable Criteria

Our desirable criteria are the tests we will apply to each of our shortlisted options to assess its suitability. They are grouped under a number of headings, or ‘investment objectives’, below:

1. Health Inequalities

Health inequalities - The extent to which this option contributes to a reduction in health inequalities including increased support services and improved cultural appropriateness.

Accessibility - The extent to which the option allows patients, staff and visitors to access the services whether using public or private transport, in terms of travel time and cost.

Environment - The extent to which the option improves the environmental impact of services.

2. Quality

Clinical quality - The extent to which the option provides timely, effective care that prevents people from dying prematurely, enhances quality of life from birth to death and helps people recover from episodes of ill health.

3. Experience

Patient experience - The extent to which the option ensures patients and visitors/carers are confident that care is patient centred, they are being treated by the right staff, with dignity and respect, in a fit for purpose environment that they perceive to be accessible.

4. Clinical Safety

Safety - The extent to which the option ensures patients are treated safely, with fewer serious incidents, minimum hospital acquired infections and lower excess mortality.

5. Efficiencies

Efficient operation - The extent to which the option enhances patient flow and supports efficient operation of the healthcare system through service redesign.

6. Integration and Alignment

Integration of care - The extent to which this option improves patient journeys through the healthcare system via a focus on collaboration and coordination between secondary and primary/ community care teams and shared pathways that cross care settings.

Alignment with wider health plans - The extent to which this option supports delivery of the ICS strategic priorities and Out of Hospital ambitions (including the Clinical and Community Services Strategy) and the NHS Long Term Plan.

7. Workforce and Sustainability

Staff availability - The extent to which this option can be staffed appropriately, meeting rota requirements, whilst ensuring an appropriate skill mix allowing efficient and effective use of the workforce.

Recruitment and Retention - The extent to which this option will support attracting and retaining the best workforce.

Staff experience - The extent to which the option ensures a good staff experience, with support for staff and volunteers, in a fit for purpose environment to reduce sickness and absence rates.

8. Capacity

Capacity - The extent to which this option is right sized and provides sufficient system wide capacity to meet expected demand for acute and specialist services.

Flexibility - The extent to which this option is future proofed and provides flexibility with the potential to change in response to changing healthcare needs.

9. Fit for Purpose Estate

Estate - The extent to which this option reduces backlog maintenance and mitigates critical infrastructure risks.

Adjacencies - The extent to which this option improves clinical adjacencies.

Complexity of build - How challenging is the build of the option, considering the impact on existing services and the local community. What is the mix of new build and redevelopment and what are the delivery risks?

Time to build - Length of time taken to build the option.

10. Digital

Digital - The extent to which this option increases resilience of the NUH data infrastructure and increases opportunities for hosting data infrastructure of other system partners.

11. Research and Innovation

Research and Innovation - The extent to which this option supports innovation and R&D.

12. Efficiencies

Benefit cost ratio - Analysis to determine whether the benefits of the investment outweigh the costs and therefore will deliver value for money value of benefits/ value of costs.

13. Anchor Institution

Net Present Social Value - Standard calculation of development cost, plus risk, less benefits to the Trust and the wider economy, over the life of the asset. Includes efficiency benefits, financial risks and phasing of capital costs.