



The strategic case for a new St Mary's, Paddington

Creating a healthcare and life sciences complex connecting communities, clinicians, research and industry – for local impact and global influence



Imperial College Healthcare
NHS Trust

The case for change:

St Mary's Hospital is a leading provider of clinical care, education and research and, through its major trauma centre in particular, a key part of the health system for north west London and the capital as a whole. However, a series of unsuccessful redevelopment attempts over the past 40 years have left its aging estate in rapid decline. Without a complete overhaul of its facilities, there is a real risk of having to make service closures within the next 6-9 years.

The hospital has been a leading provider of clinical care, education and research for over 175 years. It is now part of Imperial College Healthcare NHS Trust, whose 14,500 staff treat over a million patients a year and serve a local population of 2.4 million people, including those living in some of the UK's most deprived boroughs. St Mary's plays a key role in emergency resilience for the whole of London as the capital's busiest major trauma centre and the only acute inpatient facility in Westminster. Through its partnership with Imperial College London, the Trust continues its long legacy of translating academic discovery into better care and treatment, including making a major contribution to the management of Covid-19.

However, key parts of the St Mary's estate also date back to 1845 and most of its facilities are at least 70 years old. It has been developed piecemeal over the decades, creating multiple entrances and complex patient pathways. The space and configuration limitations of our old buildings also make it harder to respond to increasing and changing healthcare demands and opportunities. With estate decline accelerating, patient care and experience, as well as our staff's working lives, are significantly impacted.

In response, St Mary's – together with the Trust's Charing Cross and Hammersmith hospitals – are included in the 40 new hospitals the government has committed to build by 2030 as part of the government's wider Health Infrastructure Plan. The Trust has now completed the first stage of the St Mary's redevelopment approval process – the formal submission of a strategic outline case (SOC) to the New Hospital Programme.

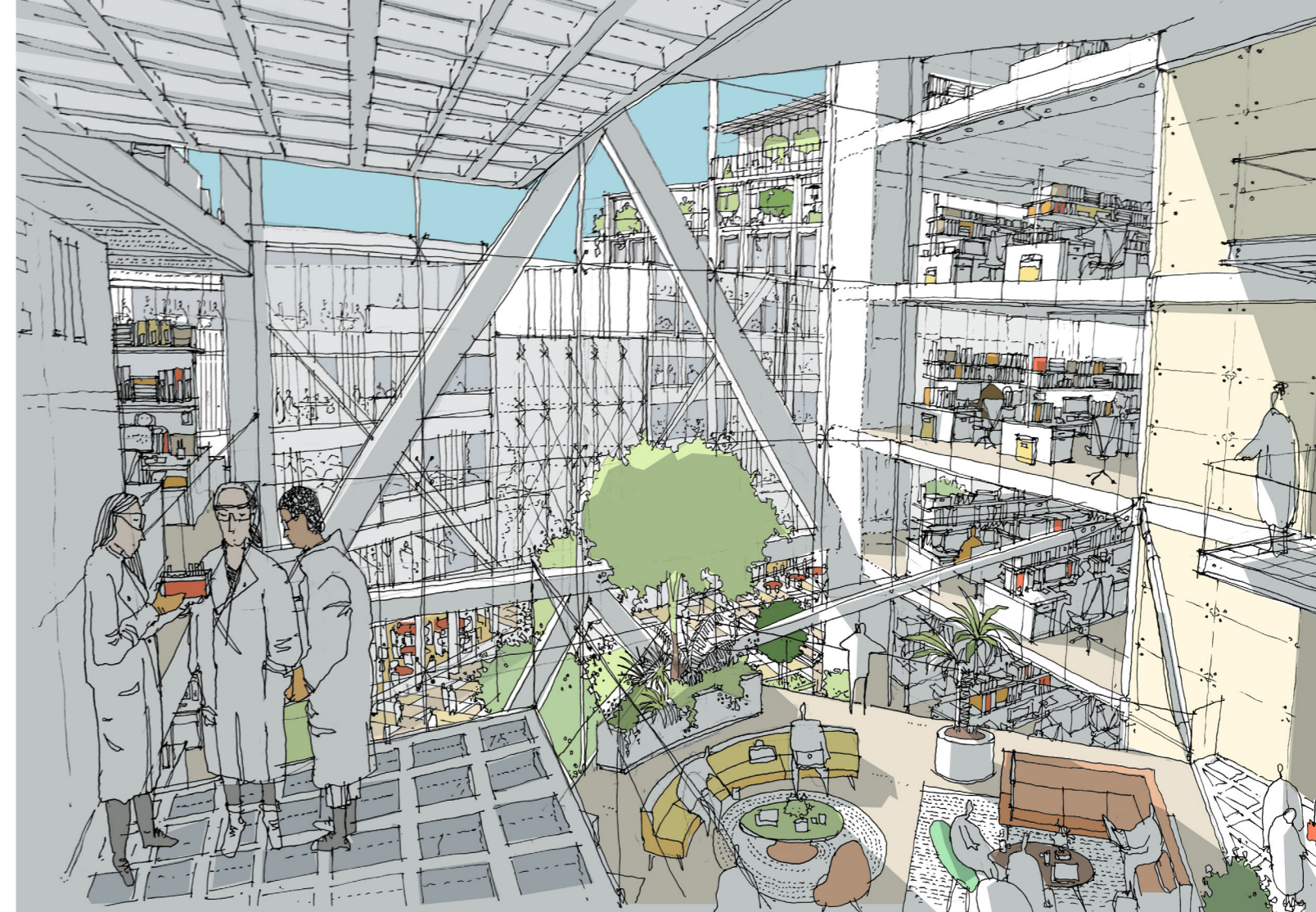
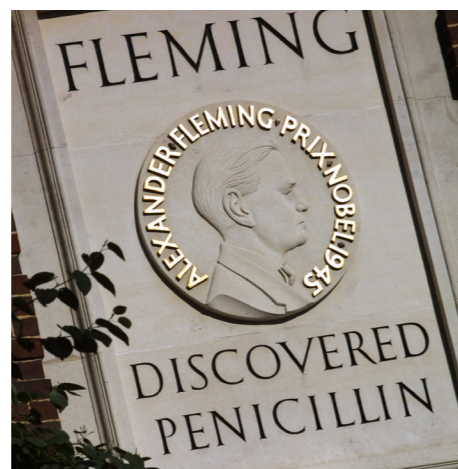


The proposed redevelopment includes:

- State-of-the-art clinical facilities for adults and children across three main hospital buildings with a total of 840 beds plus dedicated research, education and innovation spaces:
 - Particular strengths in emergency, intensive and trauma care, obstetrics, and neurosciences as well as infectious disease and a new helipad to provide rapid emergency access to the major trauma centre.
 - Separate hospital buildings for planned and emergency care.
 - A hub for primary, community and mental health services as well as social care, community and voluntary sector services.
- The development of a clinical life sciences cluster in partnership with industry and research. With better use of the estate generating surplus land, this would be used to provide flexible commercial and lab space for life sciences businesses to start, develop and grow. It would link with a new centre for clinical infection bringing together specialist expertise in infectious disease, research and education (including the Alexander Fleming Laboratory Museum).

The benefits include:

- Helping to future proof acute care provision in north west London and the capital as a whole. Capacity modelling has been based on Greater London Authority population growth projections for the next 15 years, changing demand, new ways of working and closer collaboration with partners across our integrated care system.
- Expanding capacity for London's busiest major trauma centre and enabling helicopter access for the first time.
- Improving access to a wide range of health care for some of the most deprived communities in the UK.
- Maximising operational efficiency by separating planned and emergency care and drawing on user-focused design and care pathways.
- Pandemic-preparedness, able to rapidly expand intensive care capacity when required and enabling the integration of infectious disease clinical care, research and education to accelerate new diagnostics and treatments.
- In tandem with the major Crossrail development and wider Paddington regeneration already underway, making the most of opportunities to connect with the millions of people in and around the local community to build awareness, insight and understanding in order to help drive better health and care.
- Providing a key, accessible hub for integrated care for the local population.
- Supporting seamless care management, diagnostics, monitoring, logistics and improved patient and staff experience through fully integrated digital technology.
- Net carbon zero building and operations, to help deliver sustainable healthcare.
- Catalysing wider healthcare research and innovation through the development of a life science cluster in partnership with industry and academia, helping to deliver a significant economic benefit locally and nationally.



The financial case:

- Doing nothing is not an option as there is a real risk of having to make service closures within the next 6-9 years due to the poor estate.
- If we just address the backlog maintenance in our existing buildings through repairs and basic refurbishment, it would cost at least £1 billion. But this would mean no increase in capacity or new facilities, no additional benefits in terms of improved layout and operational performance and no opportunity to release surplus land and bring in land receipts.
- A more extensive refurbishment and a small amount of new build would cost £1.5 - 1.6 billion but would allow very limited release of surplus land and land receipts.
- Our preferred option - to invest in new clinical facilities across three main hospital buildings and a clinical life sciences cluster in partnership with industry and research - is expected to cost £1.2 - 1.7 billion net, once receipts from the sale of surplus land are taken into account.

Next steps:

While we await approval of our strategic outline case, we are working up options for phasing the redevelopment to explore whether we can accelerate key aspects of delivery and benefit realisation, and spread the costs. We also want to ensure the most effective approach to service decant so that we continue to provide high quality care throughout the redevelopment.

More detailed plans, drawing on a comprehensive engagement programme involving a wider range of stakeholders, including patients and our local community as well as our staff, will be brought together in an outline business case (OBC) which we hope to be able to submit in spring 2023. This should allow us to work to a timetable that would deliver the vast majority of the redevelopment by 2030. We are also taking forward discussions and engagement on the creation of a new clinical research centre for infectious disease and the development of a wider life sciences cluster.



For further information

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