Steve McGuire was born in 1959 in Wigan to a coalmining family. On leaving school in 1975, he himself keen to be miner, but, since none of his family had ever been to college or university to train in mining engineering, he determined that this was the route he should follow. Aged 16, he found himself down a mine shaft at Golborne Colliery near Leigh in Lancashire as an apprentice – ‘a real shock to the system to find yourself plummeted down a mineshaft with a cage full of seasoned miners about a week after leaving school’. He spent the first five years of his career working in local mines in and around Leigh in Lancashire, combining his time at the coalface with gaining a mining education, initially on a college course at St Helen’s Technical College in Stafford, and, subsequently at Stafford University.

He said: “I think the way that we were trained as mining engineers – a 50/50 mix of practical and academic training – was first-class. I reflect on this a lot, because I think it is really important in terms of what we look to offer young recruits, and particularly apprentices, joining Essentia. There are not generally enough opportunities today for kids to go into the apprenticeship route, but we have made offering apprenticeships a big part of our remit at Essentia.

Completing a formal education

“Legally,” he continued, “you can’t operate as a coal mining engineer and run a mine until you’re 27, so from 16 to 27 I completed my formal education and worked in various junior jobs at the mine, and at headquarters. I did every job – driving tunnels, using pneumatic drills, working on coalfaces.” In March 1979 there was a mining disaster at Golborne; a gas ignition saw 10 men killed. Steve McGuire said: “This is still a poignant memory. I had got to know a number of the men pretty well; the workforce was like a large family.”

As part of his training, and after qualifying, he was asked to join the Mines Rescue Service, and, shortly after, was called to an incident at another local mine, Parsonage, to help deal with an underground fire. He said: “I went underground with the Mines Rescue Team, and we extinguished the fire – a pretty scary experience. To go into a building that is on fire is frightening enough, but a coalmine fire is even more daunting.

“The combination of practical and academic training I received makes you understand people – the importance of looking after them, as well as the process. You couldn’t have a better career grounding.”

Vital qualifications gained

Steve McGuire went on to gain both a Degree in mining engineering, and the ‘much sought after’ ‘First Class Certificate in Competency’, without which a mining engineer cannot manage a coalmine. His first management appointment was at Bickershaw Colliery in Leigh, where,
In 2011 the then Capital, Estates, Facilities, IT South West London and South East London Shared Services Partnership borrowed £5 m to modernise sterile services facilities.

The striking atrium at the Evelina London Children’s Hospital at St Thomas’s Hospital.

Aged 28, he was given the job of under-manager. Three months later, however, he was sent back to the Parsonage mine, as manager. He said: “It later turned out to be Lancashire’s last working coalmine. I did several years there; I had a close affinity to Parsonage. I remember the men being really brave and unflinching, and us working to put the fire out that Saturday morning in an atmosphere that was well beyond the threshold, in carbon monoxide terms, for using breathing apparatus. Had we done so, however, it would have slowed us down.”

At Parsonage, he managed a 1,000-strong workforce. He said: “We were doing really very well, and achieving all of our targets, but one day in 1989 my boss came in and threw a newspaper onto my desk, which reported that a Yorkshire coalmine had broken the European tunnelling record. Knowing the remark would simply spur me on to try and break the record with my team, he said: ‘Why can’t you do that?’

‘We were just going into a new part of the mine, using a new American tunnelling technique, driving a square, instead of an arched tunnel, and I said: ‘We are going to do this’. The target was to tunnel more than 100 metres in a week, the ‘conventional’ tunnelling distance being about 25-40 metres. I said: ‘We will do 100’, and everybody laughed. We had a brilliant team; the men that eventually left the mine when it closed went to work on the London Underground driving the Jubilee Line tunnels. Once the team had achieved 75 metres, they had the bit between their teeth, and worked around the clock. I remember a phone call telling them they had just done 101 metres, and I took the newspaper to my boss, and told him: he was over the moon.”

A change of profession
It was at this point, in 1992, that Steve McGuire took what, despite leaving a profession for which he clearly still harbours great affection, proved a propitious move, and one which was later to see him as one of the founders of the multi-faceted business that is Essentia today.

He explained: “I was actually keen to become a primary school teacher, as I had always felt I never got a very good education in primary and junior school. However, after the mines closed, I stumbled into the NHS pretty much by accident. At the time NHS Trusts, and indeed Trust Boards, were just being formed, and there was a big drive to attract people from industry into the service. Somebody said: ‘Would you talk to the people at Leeds, a directly managed unit?’ I went up and was appointed director of Estates and Facilities. It wasn’t primarily the job or title that attracted me, but rather that my job would include working with the local community to raise the profile of the three hospitals run by the Trust at the time – Seacroft, Killingbeck and Wharfedale, for instance working with schools, so it struck the right chord.

A Chartered Engineer
“I was using the fact that I was a Chartered Engineer, and had some collateral, in terms of knowledge, of industry, engineering, and people. The local community, in the east of Leeds, was very similar to where I’d come from – very poor, with high unemployment, and drug and school problems. I spent 10 years in Leeds in the NHS, in what eventually became the Leeds Teaching Hospitals. We went through two or three reorganisations, and the organisation kept getting bigger until it formed the Trust. I was Property and Support Services director, covering the whole of Leeds; we later had six hospitals to look after.

Not financially stable
“We employed around 16,000. It wasn’t financially stable, and the estate needed considerable investment to make it safe. There was a constant struggle to try to improve the infrastructure. We did what we could to improve standards, but I was always frustrated that there was never enough resource. When I joined the NHS, it was toward the end of the big drive for compulsory market testing, which I think did an awful lot of damage, since there was a big push to reduce costs, but no real eye to quality.

‘That was really restrictive to our supporting services – the way we fed people, the way we cleaned hospitals, and the supporting services. I was determined...
to keep our services in-house, which we did. We made efficiencies through investment in power systems, and things like that, but there was never enough capital to make enough of a difference. I was asked to come to Guy’s and St Thomas’ in 2003, and found that a really exciting prospect.

Setting up a new department
“I joined to set up a new department. My task was to pull together what used to be called Capital, Estates, and Facilities into a new entity that could design, build, and service Trust infrastructure, but also draw up a plan for the future. It would be fair to say the Trust’s estate wasn’t in good shape, due to a lack of investment, and a disjointed approach to the service. The first job was to design and manage a programme of investment into power infrastructure – power systems, generators, and back-up systems. We then invested heavily in the built environment – wards, departments, corridors, main entrances, alongside massive painting and other improvement programmes; all between 2003 and 2005.”

In 2004 the Trust achieved Foundation Trust status. Steve McGuire said: “One of the reasons we were keen to become a Foundation Trust is that it would enable us to create surplus, and then re-invest this back into the estate. When we did so, we ramped up investment – for example, we spent £10 m on two CHP units, one at Guy’s Hospital, and the other at St Thomas’. The business case was predicated on two factors – the first being St Thom as’. The business case was

Carbon footprint reduced
“The second factor was that the two CHPs’ installation, and subsequent use, would reduce our carbon footprint by 20 per cent – one of the first investment cases we took to the Board. We then set about writing a plan for the future – an investment, rather than a pure estates strategy, focusing on two big things: putting right failing infrastructure, and moving forward significant clinical development.

“At Guy’s Hospital we have the Guy’s Tower, the world’s tallest hospital building, but the exterior was beginning to deteriorate. We began by putting a case to the Trust to repair the concrete on the tower, to re-clad part of it, to replace all of the windows, and to make it more sustainable. The façade was clad in energy-efficient aluminium that will potentially cut the Tower’s energy consumption by about 18%. The £40 m scheme was delivered last year, on time, and under budget; not one patient complained about noise or other disturbance, and not one patient appointment was cancelled as a result of the work.

Using ‘more fun techniques’
We had previously built the Evelina London Children’s Hospital at St Thomas’ – our first patient-centred project – which was completed in 2005. We started to use more fun techniques in designing capital projects. For instance with the Children’s Hospital, I not only had a Technical Board, a Commissioning Board, and a project director, but also a Kids’ Board. The latter’s role was to feed us with views around design, and some of the design features you’ll now see in the Evelina came out of the Kids’ Board. For example the children told us there was an anxiety and a fear around noises at night, so we had curved corridors designed into the wards. These act as sound mufflers, and also mean that young patients cannot see beyond a certain point what is going on. It is often just nurses and doctors at work, but the noises at night can be really frightening for some young children, so getting the youngsters’ views proved really worthwhile.

Patient involvement
“Since then, everything we’ve done as an investment has seen us involve the clients and patients in terms of getting contributions to design. Following the Evelina project and the Guy’s Tower refurbishment, we moved on to the East Wing Tower project at St Thomas’. The tower was built post-war, but has always leaked. We are re-cladding the tower, and the two-year, £27 m scheme is due for completion shortly.” The new design will retain and enclose the high quality materials of the existing façade within a new glazed exterior, creating two new atria, improving energy efficiency, and adding extra patient lifts. Bespoke artwork, funded by the Guy’s and St Thomas’ Charity, will hang in the atria.

“We also had, as part of our plan, a scheme to re-design, re-build, and expand, our Accident and Emergency services, and to create a new Emergency Floor at St Thomas’.” Steve McGuire explained. “To do this, we needed to expand the footprint, so moved all our outpatient services out of the Lambeth Wing at St Thomas’ and centralised them on the ground floor of the Trust headquarters at Gascoigne House. “We used a technology-led design solution to change the way in which ‘Outpatients’ works. The result is a new St Thomas’ Outpatient Department that is bright, modern, airy, and built on a really effective technology platform that we have designed ourselves. It works like an airport – you turn up; you check yourself in, and the minute you have checked in, the consultant has access to your records electronically. The consultant can then manage you through the department quickly, with electronic screens telling you how long you have to wait, and where you have to go. There is never a queue. We can
now manage people through the system more quickly and efficiently, and don’t need as many consultation rooms.

**Bigger footprint secured**

“Having moved our Outpatients’, we secured a bigger footprint to redevelop A&E into a large Emergency Department, and to move our Emergency Admission Ward beds from the top of one of St Thomas’ tower blocks to be part of this area. That business case was agreed, and the scheme is currently being executed.

“In fact, all the things we planned in 2006 as part of our investment strategy, we have either done, or are in the process of doing, which I think is unique in NHS terms.

“The last part of the plan,” he continued, “was to build a new Cancer Centre at Guy’s, so we devised a property solution in terms of location, wrote the business case, and assisted in finding a funding solution. The scheme cost is £160 m. We have borrowed £80 m from the Foundation Trust funding facility, and are building four floors of private patients’ space on top of the building. Having leased that space to private healthcare provider, HCA, the resulting revenue pays for the premium on our loan.”

Largely funded by the Guy’s and St Thomas’ NHS Foundation Trust, the new Cancer Centre has also been made possible by a £25 m grant from Guy’s and St Thomas’ Charity, and a £15 m grant awarded to King’s College London from the UK Research Partnership Investment Fund (managed by the Higher Education Funding Council) for a Research and Innovation Hub in the new Cancer Centre. Steve McGuire said: “We put the scheme out to design competition – a procedure that we follow with all our major schemes.”

**Sustainable construction**

Steve McGuire said: “Laing O’Rourke is building the sections of the new Centre in its own fabrication plant in Doncaster. Sections are cast by computer, brought to site, and then assembled; we believe it is one of the market’s most sustainable construction techniques.” The Centre will be open to patients in 2016.

“The building structure is complete, and we are now in a fit-out stage,” he added. “There are some unique design features, again a number incorporated due to patient feedback. For instance, while the linear accelerators and bunkers used in cancer treatment are generally in a hospital’s basement, here they will be on the second floor. While there will be no natural light inside the bunkers themselves, patients awaiting treatment will sit in a pleasant, open, naturally lit environment. All the ideas came from a massive consultation exercise with patients.” The Cancer Centre will be the UK’s first to wholly locate its radiotherapy treatment above ground.

**An evolution**

Having discussed some of the major capital and building schemes completed, or in progress, since he and his team drew up the initial investment strategy, Steve McGuire explained that key to their success had been a continual learning process, as the remit of his department, and subsequently Essentia, evolved.

**Unifying ‘world-class’ cancer treatments**

The Cancer Centre has now been designed by architects, Stantec and Rogers Stirk Harbour + Partners, and is being built by Laing O’Rourke. Arup is providing integrated structural and building services engineering. The facility is ‘designed around the needs of patients and staff to unify world-class cancer treatments and research in an uplifting, non-institutional, and clinically efficient healthcare setting’. The 14-storey building is arranged into a series of vertically stacked ‘Villages’ to make it more manageable for patients – each Village addresses a particular patient need, and has been given a unique identity. There are three treatment villages for Radiotherapy, Chemotherapy and Outpatients. To complete the Centre, there is a Welcome Village with communal spaces on the ground floor, and the private patient unit on the upper four floors.

The new Guy’s Cancer Centre will be the UK’s first such treatment facility to wholly locate its radiotherapy treatment above ground.
He said: “We learned under what was then Capital, Estates and Facilities, the skills of IT, and were then asked to run IT services. We then became Capital Estates, Facilities and IT. After subsequently acquiring the support services that supported South West London, we became Capital, Estates, Facilities, IT, and the South West London Shared Services Partnership, and, on later being asked to run similar services for South East London Community Services, became Capital, Estates, Facilities, IT, South West London and South East London Shared Services Partnership. These developments had all taken place by around 2010.

“The recession had already hit in 2007-2008, and although initially it didn’t really affect the public sector and the NHS, and was coupled with the banking crisis, you could see that this was going to be the deepest, most difficult recession in history. At some point, it would very significantly affect public service delivery.

Protecting what we had achieved

“I knew we had to start to think about protecting what we had done in improving the quality of our estate. There was a danger that funding sources would dry up if we didn’t look at alternatives. We had also become very big, with a turnover of some £130 m, and had started providing services to others people outside of the Trust. For example we were providing sterile services support to other London Trusts. In 2011, mindful of all this, we asked the Trust for a loan, borrowing £6 m to invest in Guy’s and St Thomas’ to start modernising and re-building our Sterile Services facilities, the plan being to re-pay the loan from the profits secured from providing services to other organisations in London, which is working well to this day.

“We also decided that we should think carefully about converting what was Capital, Estates, Facilities, IT, South West London Shared Services and South East London Shared Services into one, more streamlined, organisation, part of which could then be commercialised, and marketed to other parts of the NHS, where the service might be short of the skill and expertise we had experience in.

Essentia created

“We asked our own staff what they felt we should be called. The vast majority of what we do is in-house at Guy’s and St Thomas’ – whether cleaning floors, or moving people about in wheelchairs, transporting people between sites, our building engineering, all our support services. Our staff feel incredibly proud of what they do: their work is critical to good patient care. The staff are the Trust’s backbone, and an essential part of delivering healthcare – hence the name ‘Essentia’.

“The Trust agreed to our business case – to maintain the part of what we do which provides services to Guy’s and St Thomas’, ‘Essentia Core’, and to create another part of Essentia, a commercial arm, Essentia Trading, as the vehicle for marketing what we do to other NHS organisations. The income we receive goes back to the Trust, but we retain 5% to re-invest in our staff to help educate and train them, and grow our workforce.”

The Board of Guy’s and St Thomas’ NHS Foundation Trust agreed to the creation of Essentia Core and Trading in 2012, with Essentia Trading ‘going live’ on 1 April, 2013. Steve McGuire added proudly: “By the end of the 2014-2015 financial year, the company will be in profit.”

Growing and developing people

“One thing we have always been keen to do,” he added, “and this has echoes of my time in mining – is to grow and develop our own people, and to create jobs for local people.” To help achieve this goal, the Essentia Academy was formed in 2012.

Steve McGuire elaborated: “The Academy’s purpose is to develop our own people – it runs training and development courses up to MBA level – and to make a positive social impact in the boroughs we operate in by creating more jobs.

“We also,” he explained, “operate an Ambassador programme: there are currently 100 Ambassadors, who spend time talking to local schools, job fairs, and, for example, the South Bank University, one of the major UK universities specialising in construction, the trades, and the technical world. The Academy also runs our Apprenticeship scheme: we currently have 25 apprentices across the whole spectrum of our operations – including the electrical and mechanical trades, housekeeping, catering, business administration, and IT. It is my ambition to take on at least 20-25 apprentices every year, and to eventually increase this to up to 50.

Apprenticeship scheme

“We operate one of London’s biggest NHS apprenticeship schemes, but my goal is to run one of the country’s biggest. For me it goes back to creating an organisation that does good and encourages the training and education of professional engineers, but also provides routes into work for young people who, at that stage in their life, do not necessarily aspire to be professional engineers, but can progress through apprenticeship schemes, ultimately into higher education.”

The Essentia Apprenticeship scheme has recently won a National Learning Awards 2014 Bronze Award from the Learning Academy, in the ‘Apprenticeship of the Year’ category. In charge of the scheme at Essentia are Sue Fisher and Karen Adewoyin. Steve McGuire said: “Sue Fisher was originally a housekeeping manager, but is now qualified at Degree level, and drives our Academy. She is a glowing example of what Essentia is all about – the opportunity to grow, advance, and do well – at scale.”

I asked the Essentia Trading CEO about services being provided to other NHS Trusts and external bodies by Essentia Trading. He said: “We have taken on some really expert people at a senior level from the private sector to work for Essentia Trading. For example, our healthcare
Estates and facilities services

Samuel King, who has completed an apprenticeship in Business Administration, and now works on the Essentia Workforce Team, and Joseph Banton, who undertook an apprenticeship in Hotel Services, and is now a team leader for St Thomas’ Housekeeping Rapid Response team.

Planning team is now working in Belfast, Dublin, Doha in Qatar, and in other parts of the NHS in the UK. What we can do for other NHS organisations is broadly what we have done for Guy’s and St Thomas’ i.e. help them to target capital investment to improve the standards on their estate, and reduce their operating costs to become more efficient. Our client list is growing constantly. I don’t think there is another organisation in the public or private sectors like Essentia. We have captured, and blended together, the best of the NHS and public sector, and the best of the private sector.

Capabilities and skills

“I also don’t believe there is any other private sector organisation with the capability and skill set around the design that Essentia has – from first principles, to construction and servicing of healthcare infrastructure – whether from a built environment or technology standpoint. We are now designing technologies we believe are ground-breaking in healthcare.

“For example, we have a project called eNoting, which aims to bring disparate clinical systems together in one paperless system, and make the data easy to view in a clinical setting. We have designed this ourselves, and there is considerable interest from the IT market. The system effectively replaces the doctor’s writing on the folder at the end of the bed. That data goes into the electronic system, and can be read by clinicians from anywhere.”

Another key current Trust IT-related innovation initiative should allow the organisation’s clinical staff, particularly, to work more flexibly, on a ‘more mobile’ basis. Steve McGuire explained: “The Trust currently uses Windows XP as its operating platform, but XP is no longer supported by Microsoft. We’ve therefore chosen to move to Windows 8.1 and then Windows 10, and indeed we will be the UK’s first public sector organisation to deploy the latter, working with Microsoft.

Mobile computing, more mobile’ staff

“The move will enable us to employ mobile computing techniques to help our clinical workforce operate in a ‘more mobile’ way. For instance, we employ district health nurses and health visitors, who currently have to return to base frequently throughout the day. This new ‘End User Technology’ project, and eNoting, are systems we view as a significant catalyst in transforming the way our clinical colleagues work, which will significantly improve efficiency and reduce operating costs.

“A prime objective is clearly to try to make better use of our estate. We operate in inner London; there are staff having to travel from outer to inner London and incurring very significant travel costs. We also have very expensive estate. These technologies give us the opportunity to look at more innovative ways of employing people, in a more mobile, more flexible way.”

Aside from the Guy’s and St Thomas’ sites, the Trust has around 100 smaller properties providing community services throughout Lambeth, Southwark, and Lewisham. Steve McGuire said: “In future I can see us being less reliant on estate, and more reliant on technology, to provide healthcare. You can see virtual hospitals and a virtual healthcare system being designed around technology. We are looking with Microsoft at products that could be deployed in healthcare, including telehealth devices on the IT platform that we will have.”

Greatest achievements

I asked what he felt had been the greatest achievements to date for Essentia and the Capital, Estates and Facilities team that preceded it. He said: “I think designing and delivering the Trust’s investment strategy, creating significant efficiencies for the organisation as a consequence of properly targeted capital investment, and growing our own workforce.”

Alongside its focus on recruiting young people, Essentia is now indeed also starting to look at the possibility of establishing an ‘older person’s Apprenticeship scheme’, for instance to provide a potential change of role for somebody who might wish to move from catering into engineering.

Steve McGuire added: “I am very much a believer that that people are a successful organisation’s greatest asset. Accordingly, as part of what we call ‘The Essentia Way’, we want our employees to genuinely feel they have a say in how Essentia works.

Listening exercise

“Last year we carried out a massive listening exercise, to understand from our employees what they feel working here is like. It’s an incredibly diverse group of personnel – covering a range of professions and trades. We asked: ‘What is it like to work here, and what are your aspirations?’ We surveyed all our staff, held workshop sessions with several hundred in multidisciplinary groups, and got from them six themes that we needed to focus on: the way we communicate; the way we lead and manage; our organisational form; development; cutting bureaucracy and red tape, and customer focus. We have since set up workstreams to help us identify how we can improve. There are over 100 staff actively involved, and we are in the process of going back out to explain the progress they have made.”

“From this work we have already initiated 20 things, such as establishing a pilot where housekeeping staff are now training to become nurse assistants. In 2015 we will hold another, similar, listening exercise. Eventually our staff will be so confident that they have a say that it will become part of a routine. We want an organisation that has a set of values, and I believe that now we could be. There has never been a time where the economy and politics, and the logic around the public sector, have been so uncertain, and it is at a time like this that the brave, and those with the right principles, step forward and put alternatives on the table. Everybody wins from this model.”

Ambitious goal

“Our goal is to be the UK’s biggest provider of health infrastructure support services, and I believe that now we could be. There has never been a time where the economy and politics, and the logic around the public sector, have been so uncertain, and it is at a time like this that the brave, and those with the right principles, step forward and put alternatives on the table. Everybody wins from this model.”

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