

# UPDATE: STRATEGIC ESTATE DEVELOPMENT

<b>Relevant Board Member(s)</b>	Dr Ian Goodman, Chair, Hillingdon CCG Councillor Phillip Corthorne
<b>Organisation</b>	Hillingdon Clinical Commissioning Group
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<b>Papers with report</b>	Section 106 Healthcare Facilities Contributions (March 2017)

## 1. HEADLINE INFORMATION

<b>Summary</b>	This paper updates the Board on the CCG strategic estate initiatives and the proposed spend of s106 health facilities contributions in the Borough.
<b>Contribution to plans and strategies</b>	Joint Health & Wellbeing Strategy, Out of Hospital Strategy, Strategic Service Delivery Plan
<b>Financial Cost</b>	To be identified as part of the business case for each individual project
<b>Relevant Policy Overview &amp; Scrutiny Committee</b>	External Services Scrutiny Committee
<b>Ward(s) affected</b>	All

## 2. RECOMMENDATION

**That the Health and Wellbeing Board notes the progress being made towards the delivery of the CCGs strategic estates plans.**

## 3. BACKGROUND

In 2014, Hillingdon CCG published its Strategic Service Delivery Plan (SSDP) which outlines the local context in Hillingdon CCG, the scale of change required to deliver the Out of Hospital Strategy and the model of care that is being developed at a national, regional and local level.

The document also considers the delivery implications of this new model of care. The aim is to achieve a patient-centred and integrated system of accessible, proactive and coordinated care; but in order to implement this major change to the existing health and care infrastructure is required.

The SSDP presents detailed activity and estates modelling, focusing on the use of the existing health estate, the future space requirements and the identification of potential sites for locality based health and wellbeing hubs.

The pipeline for hubs has been identified as the following:

- Hayes and Harlington: Hesa Health Centre (already operational)
- Uxbridge and West Drayton: St. Andrew Park development as the preferred location
- North Hillingdon: Mount Vernon Hospital site as the preferred location

To realise the benefits outlined in the Five Year Forward View, The Department of Health issued a guidance document in June 2015 titled 'Local Estate Strategies – a framework for commissioners'. CCGs were asked to:

- produce a Local Estate Strategy in partnership with local stakeholders
- establish a Strategic Estate Group

The Hillingdon Strategic Estates Group was formed in September 2015 and has met quarterly since then. Representatives from the Council, Central and North West London Trust, Hillingdon Hospital Trust, NHS Property Services, the Local Medical Council and CCG have been in attendance.

It is essential that service and estates planning are integrated to ensure that quality estate is available to deliver high quality services and make well informed investment decisions. This approach will facilitate the best use of existing property, ensure that new estate developments meet service need and enable the disposal of surplus estate.

Good quality strategic estates' planning is vital to:

- maximising use of facilities
- delivering value for money
- enhancing patients/public experiences

Local circumstances should dictate what is appropriate for local health economies. The strategy should reflect the local footprint and should include secondary and tertiary care in addition to community and primary care and include wider public sector partners in its development.

The main priority of the Strategic Estates Group to date has been to produce the draft estate strategy; this document is based on the SSDP and in addition provides an overview of all estate in the Borough used for the delivery of healthcare services and capture future investment plans of each stakeholder.

The membership of the Group and the Terms of Reference (ToR) has recently been reviewed to reflect the work required to support the delivery of the Sustainability and Transformations Transformation Plan. The revised membership and ToR will help foster greater collaboration between local government and the NHS. The aim is to develop a joint estates strategy taking account of all regeneration and service rationalisation plans, to deliver the agreed network of local hubs and GP practices, supported by the One Public Estate programme.

#### **4. HILLINGDON ESTATE STRATEGY**

The CCG is in the process of implementing the key priorities set out in its current estate strategy. An overview of the strategy was presented to the Health and Wellbeing Board in December 2016.

Below is an outline of the Hillingdon vision of how the key priorities outlined within the Five Year Forward view and the STP guidance will be addressed:

### Health & Wellbeing

- Working collaboratively across health, social care and public health we will improve outcomes and reduce inequalities for our population with a focus on those with both traditional Long Term Conditions (including both physical and mental health LTCs) and emergent categories of LTCs such as pain, frailty and social isolation.
- Our coordinated programme of work will bring together our existing plans for the BCF and our Health & Wellbeing Strategy (HWBB) and engage our whole community to create a resilient population and assist people to remain independent with better quality of life for longer.

### Care & Quality

- We will provide care that is safe, effective and delivered by experienced practitioners through collaborative working across health and social care services.
- We will be able to share information that improves the quality of health and social care services and that enables our population to make informed choices.
- We will deliver the best and highest quality care possible within the constraints of our local economy and the growth in demand that we are predicting.

### Finance & Efficiency

- It is simply not viable to continue trying to respond to increasing demand for services, particularly at the expense of preventative action. We are committed to finding financial savings and ways to achieve better outcomes for individuals and their families through the better integration of services and by reducing demand through an increased focus on prevention and patient activation.

The SSDP had previously been developed to identify the estate solution required to support the delivery of the transformation of care and established a plan for a hub service of between 2,700 and 3,600 m<sup>2</sup> split over three key locations across the Borough.

The estate strategy has been further developed to include the Local Authority and primary care estate used for the delivery of health/social care and overall estate metrics on condition, market rent impacts and cost per clinic room/workstation.

### Key Drivers and Challenges

- To meet an estimated increase in demand and complexity of care delivered in the community for out of hospital care across the area of 30% - 35%
- Enable a major shift in care from within a hospital setting to an out-of-hospital setting so more people are treated closer to their homes
- A need to improve utilisation of the existing estate and effectively target strategic investment in new estate in locations appropriate for a Hub health care delivery model

Forecast population and demographic growth in Hillingdon suggests an increasingly diverse population.

## Key points emerging from the strategic review

- The need to progress the aims of the SSDP and implement the hub strategy. Focussing investment in locations which support the out-of-hospital health care challenge at Uxbridge/West Drayton, North Hillingdon and Hayes & Harlington
- The need to secure long term premises solution for the Shakespeare Medical Centre
- The need to address poor primary care infrastructure by making sure GP practices are in the right location and in fit for purpose accommodation

## Current status of strategic estate priorities

The table below summarises the projects and the current status.

Project	Status
Create an out of hospital Hub in North Hillingdon	The Hillingdon Hospital Trust has decided to progress with a planning application to create a new skin clinic on the Mount Vernon site. The planning application was approved by Committee in May 2017 and the Trust will now work with the CCG to establish how its requirements may be accommodated.
Create an out of hospital Hub in Uxbridge and West Drayton	Since the last meeting the land on the St Andrews Park development previously considered for health use has been re-marketed. A third party developer, working with the CCG, bid for the site but was unsuccessful. The CCG continues to work in partnership with Central and North West London NHS Foundation Trust (CNWL) to identify alternative site options and will also approach the new purchaser of the site, once known, to establish whether it may be interested in working with the CCG.
Building capacity for Hayes and Harlington	The CCG is working closely with Council colleagues to establish the impact of the Hayes Town Housing Zone on local health services. It has been identified that in addition to the Hub at Hesa Health Centre accommodation of between 1000m <sup>2</sup> and 1500 m <sup>2</sup> is required to deliver additional capacity for primary care. This requirement has been built into local infrastructure plans and the Council planning team has been successful in securing 936m <sup>2</sup> for health use on the former Vinyl Factory site.
New premises for Shakespeare Medical Centre	Negotiations between the practice, CCG and Council are progressing well for the proposed relocation of the practice to new premises on the former Woodside Day Centre site. The indicative design and final draft Heads of Terms have been received by the practice. The Council Cabinet will now be asked to agree to proceed with a planning application for the scheme.
Yiewsley Health Centre	The CCG has been successful in securing funding to refurbish some recently vacated space at the site into additional clinical accommodation. This will create additional capacity for primary care provision at the site. A

	long term solution for the site is still being explored with the support of CNWL.
Future of Northwood and Pinner Community Hospital	<p>NHS Property Services now has an in-house development team leading the development proposal for the Northwood and Pinner Community Hospital site which is seen as a potential key opportunity site for early delivery of a new health facility and residential development, subject to the necessary required consents and approvals.</p> <p>NHS PS is preparing a business case for its executive approval to commit the funds required to work up the preferred option (redevelopment of both the Northwood and Pinner Community Hospital site and Northwood Health Centre sites to include the re-provision of the health centre on the Pinner Road site)</p> <p>NH PS is in the process of procuring a design team and planning consultants are appointed already. Once the design team is appointed, NHS PS hopes to engage with the CCG in July/August 17 on design and floor space requirements.</p>
Improving Access to Primary Care	The CCG continues to review the quality and capacity of primary care premises across the borough. A primary care strategy is being developed and is due to be approved by the Primary Care Board in June 2017.

#### Other property considerations

- Further data and property analysis on the condition of the public sector estate undertaken and being incorporated into strategic planning documents.
- A full review of the GP estate by NHS England and the CCG has been undertaken and will inform the production of a primary care strategy in summer 2017
- Conclude work with Hillingdon Hospital Trust over the next 3 months to determine the preferred site for the Hub at Mount Vernon Hospital.
- Work with the planning and property teams at the Council to close down the future health estate requirements within the Hayes Town Housing Zone.

#### Financial considerations

Across North West London the NHS is undertaking a review of the Implementation Business Case (ImBC) developed for the Shaping a Healthier Future Programme, including both the capital and revenue implications of the Hubs. The NWL CCG Governing Bodies in December 2016 approved the Implementation Business Case for the first tranche of capital required to deliver the Shaping a Healthier Future estates projects including the two Hillingdon Hubs and investment at Hillingdon Hospital. The document is now with NHS England for assurance and approval which is now programmed for June 2017.

Hillingdon Council, in consultation with the NHS in Hillingdon, has been collecting s106 contributions for health from residential developers where the size and scale of the housing scheme has been identified as having an impact on the delivery of local health services. Funding has been secured by the Council for investment in health premises and services in the Borough in order to help meet increased demand for health services as a result of new

development. This additional non-recurrent funding has been used to build capacity within the primary care estate and subject to the Council's formal s106 allocation process, it is proposed that any further contributions received are used to the remainder will help to offset the cost of the Hubs.

The CCG will identify the financial implications of all estate investment as part of the business case development process for each project.

## 5. S106 HEALTH CONTRIBUTIONS HELD BY THE COUNCIL

1. Appendix 1 attached to this report details all of the s106 health facilities contributions held by the Council as at 31st March 2017. Since the last report to the Board in March, the Council has received the final instalment of the contribution due from the development at Royal Quay, Harefield (held at H/54/343D). As at 31st March 2017, the Council holds a total of £1,178,661 towards the provision of health care facilities in the Borough.
2. The CCG has "earmarked" the s106 health contributions currently held by the Council towards the provision of the health hubs as outlined in Appendix 1. To note, two contributions held at case references H/20/238F (£31.4K) and H/37/301E (£13K) have spend deadlines within the next 18 month period. These are currently earmarked towards the provision of a new health hub in the North of the Borough. A request to allocate individual contributions towards further schemes will be submitted as each scheme is brought forward.

## HILLINGDON COUNCIL FINANCIAL IMPLICATIONS

As at 31 March 2017, there is £2,386,655 of Social Services, Housing, Health and Wellbeing s106 contributions available, of which £1,207,994 has been identified as a contribution for affordable housing. The remaining £1,178,661 is available to be utilised towards the provision of facilities for health and £545,797 of these contributions have no time limits attached to them.

The s106 contribution held at H/20/238F has a time limit to spend by February 2018, which has been earmarked to the North Hub Health Scheme. There is a risk that the s106 contribution will be returned to the developer with accrued interest if it is not utilised by the spend deadline of February 2018 as per the s106 agreement.

Officers in conjunction with the CCG and NHSPS are actively working towards allocating the outstanding health contribution to eligible schemes. Funds totalling £1,143,040 are provisionally earmarked towards proposed health hub schemes as follows:

<b>Proposed Health Hub Scheme</b>	<b>Amount</b>
North Hub	184,884
Uxbridge / West Drayton Hub	520,593
New Yiewsley Health Centre	433,661
Pine Medical Centre	3,902
<b>Total Earmarked</b>	<b>1,143,040</b>

The remaining balance of £35,621 (ref H/30/276G) is yet to be earmarked to a scheme.

## **HILLINGDON COUNCIL LEGAL IMPLICATIONS**

Under the provisions of section 111 of the Local Government Act 1972, a local authority has the power to do anything which is calculated to facilitate, or is conducive or incidental to the discharge of any of its functions. The work to be carried out in accordance within this report would fall within the range of activities permitted by Section 111.

Regulation 122 (2) of the Community Infrastructure Levy Regulations 2010 states that a planning obligation may only constitute a reason for granting planning permission for the development if the obligation is:

1. necessary to make the development acceptable in planning terms;
2. directly related to the development; and
3. fairly and reasonably related in scale and kind to the development.

Any planning obligation must be relevant to planning and reasonable in all other respects. The monies must not be used for any other purpose other than the purposes provided in the relevant section 106 agreement. Where monies are not spent within the time limits prescribed in those agreements, such monies should be returned to the payee.

When the Council receives formal bids to release funds, each proposed scheme will need to be assessed and reported to the Leader and Cabinet Member for Finance, Property and Business Services in order for the monies to be released. As part of that process, the Council's Legal Services will review the proposal and the section 106 agreement that secures the funding, to ensure that the Council is permitted to spend the section 106 monies on each proposed scheme.

The use of section 106 monies for future schemes mentioned in the report will need to be assessed against their respective agreements when these are finalised on a case by case basis.