



Barnet Health Overview and Scrutiny Committee

6th February 2017

Title	Colindale Health Project Update
Report of	LB Barnet, NHS England and Barnet CCG
Wards	Colindale, West Hendon
Status	Public
Urgent	No
Key	No
Enclosures	None
Officer Contact Details	Neil Taylor – Strategic Lead, Development and Regeneration Neil.Taylor@barnet.gov.uk Neil Snee Neil.Snee@barnetccg.nhs.uk Anthony Davis Anthony.Davis@barnetccg.nhs.uk

Summary

At their meeting in July 2016, the Barnet Health Overview and Scrutiny Committee were informed that an Outline Business Case for the replacement of the Grahame Park Health Centre, together with a Full Business Case for a new start-up Practice in Beaufort Park would be going through the internal governance processes for NHS England and Barnet CCG in autumn 2016.

The Committee requested an update report following the business cases being reviewed by NHSE. This report will provide an update on the business cases.

The Committee requested details on the timing of providing additional GP capacity in the Beaufort Park area. The Committee sought assurance that a new GP service would be in operation within a year, or that it would be imminent and in conjunction with increased GP capacity in the area too.

This report provides details on the NHSE procurement process to date and the timing of providing additional GP capacity in the Beaufort Park area.

Recommendations

1. That the Committee note the report.

1. WHY THIS REPORT IS NEEDED

1.1 The Barnet Health Overview and Scrutiny Committee requested an update report following the business cases being reviewed by NHSE in autumn 2016. The Committee requested details on the timing of providing additional GP capacity in the Beaufort Park area.

1.2 Updates in relation to matters previously raised by the Committee

- 1.2.1 Update following business cases being reviewed by NHSE in autumn 2016
 - The submission of business cases for new health centre in Grahame Park and Central Colindale was postponed until outcome of ETTF (Estates and Technology Transformation Fund) Bids was known. The reason for this is that the final level of capital contribution achievable into the project from the different sources needed to be established to inform the financial modelling within the business case(s). The greater the capital contribution the lower the potential rental will be and this will impact in turn on the rental reimbursement to the GP practice(s) occupying the building. ETTF bids were submitted in June 2016 and the outcome of the bids became known in November 2016.
 - Update on ETTF Bids outcome:
 - The CCG submitted 3 bids for capital through the NHS England Estates and Technology Transformation Fund. The bids were as follows:
 - For capital in relation to the re-provision of Grahame Park (successful)
 - For capital in relation to securing temporary accommodation for a new Central Colindale APMS (Alternative Provider Medical Services) primary care contractor (not successful, deemed an enabler and not transformative in and of itself)
 - For capital to contribute to permanent estate solution for new APMS contractor (not successful – completion date of 2024 outside of the 2016-2021 timeframe for the scheme – the same timeframe as the GP Forward View).
 - The ETTF programme was massively over-subscribed for the funding being made available.

- Successful Grahame Park ETTF bid (value £950k) is now going through due diligence. NHSE are expecting an Outline Business Case to be submitted ASAP and have informed parties that this value is not yet fixed, i.e. can go up or down. The exact ETTF amount will be determined at Outline Business Case.
- Potential section 106 health monies (up to circa £1.9m) are also being sought for the delivery of new Grahame Park Community Hub (contribution towards health component of build). Report(s) are being taken to ARG (Asset, Regeneration and Growth) and Health and Well-Being Board in March 2017 to confirm spend. Therefore, Outline Business Case for Grahame Park cannot be submitted to NHSE until section 106 contributions are confirmed.
- LBB is to retain Freehold of new Grahame Park Community Hub (co-locating health centre, children's centre, nursery, community centre and café). LBB Property Services are presently drafting Heads of Terms (lease arrangements and service charge assumptions) for health tenants of new Grahame Park Community Hub and engaging with existing health tenants, namely Everglade Practice and CLCH, as well as engaging with other health, community health, children's health providers interested in occupying space in the new hub.
- The relocation of Parkview Practice (consolidating Parkview satellite service in the existing Grahame Park Health Centre with its main practice in Cressingham Road) will be included in Outline Business Case being put forward for new Grahame Park Health Centre. The re-location of the Parkview Practice enables the Everglade Medical Practice to increase its capacity in the Grahame Park Community Hub and accommodate the increasing demand arising from population growth in the area.
- In addition to enabling an increase in GP capacity to meet the projected local population growth, the new Grahame Park Community Hub will also facilitate greater integration of local health and social care services.

Planning application for new Grahame Park Community Hub is to be submitted March 2017 with planning consent anticipated in September 2017. Replacement health facilities in Grahame Park are to be completed (ready for occupational use) late 2019 prior to demolition of existing health facilities (anticipated early 2020).

1.2.2 Timing of providing additional GP capacity in the Beaufort Park area

The zero list procurement for Central Colindale has commenced and providers will be invited to bid for the tender. The tender process should be concluded in summer 2017 with a planned contract start date in autumn 2017. The procurement team at NHSE are continuing to support the project in terms of the premises and relocation. Work is progressing to secure a temporary site and a business case will be submitted under the NHS Premises Cost Directions.

- NHSE have confirmed that a business case will be presented for temporary and permanent site in Central Colindale, once the final premises solutions have been confirmed.
- There is risk in not securing temporary site on time for APMS contract, that is, if a suitable temporary site is not found or an alternative solution identified, it will impact on whether a new APMS contract can be awarded as part of the 5th wave APMS procurement in 2017/18.

2. REASONS FOR RECOMMENDATIONS

2.1 By receiving this update, the Committee will be kept up to date on the issues surrounding primary care provision in the Colindale area.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

3.1 None in the context of this report.

4. POST DECISION IMPLEMENTATION

4.1 Once the Committee has scrutinised the report, they are able to consider if they would like to make any recommendations to NHS England.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

The Overview and Scrutiny Committee must ensure that the work of Scrutiny is reflective of the Council's principles and strategic objectives set out in the Corporate Plan 2015 – 2020.

The strategic objectives set out in the 2015 – 2020 Corporate Plan are:-

The Council, working with local, regional and national partners, will strive to ensure that Barnet is the place:

- Of opportunity, where people can further their quality of life
- Where people are helped to help themselves
- Where responsibility is shared, fairly
- Where services are delivered efficiently to get value for money for the taxpayer

5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

This report is asking Committee to note the up-date for the Colindale health project, and provides an up-date following the review of business cases by NHSE. There are no additional financial implications at this point.

5.3 Social Value

The Public Services (Social Value) Act 2013 requires people who commission public services to think about how they can also secure wider social, economic and environmental benefits. Before commencing a procurement process, commissioners should think about whether the services they are going to buy, or the way they are going to buy them, could secure these benefits for their area or stakeholders.

5.4 Legal and Constitutional References

- 5.4.1 Section 244 of the National Health Service Act 2006 and Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013/218; Part 4 Health Scrutiny by Local Authorities provides for the establishment of Health Overview and Scrutiny Committees by local authorities.
- 5.4.2 The Council's Constitution (Responsibility for Functions) sets out the terms of reference of the Health Overview and Scrutiny Committee as having the following responsibilities:

"To perform the overview and scrutiny role in relation to health issues which impact upon the residents of the London Borough of Barnet and the functions services and activities of the National Health Service (NHS) and NHS bodies located within the London Borough of Barnet and in other areas."

5.5 Risk Management

5.5.1 Not receiving this report would present a risk to the Committee in that they would not have the opportunity to scrutinise the provision of primary care facilities within the area.

5.6 Equalities and Diversity

- 5.6.1 Equality and Diversity issues are a mandatory consideration in decision making in the Council pursuant to the Equality Act 2010. This means the Council and all other organisations acting on its behalf must fulfil its equality duty when exercising a public function. The broad purpose of this duty is to integrate considerations of equality and good relations into day to day business, requiring equality considerations to be reflected into the design of policies and the delivery of services and for these to be kept under review.
- 5.6.2 The specific duty set out in s149 of the Equality Act is to have due regard to need to:

Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;

Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;

Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The relevant protected characteristics are – age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; sexual orientation. Health partners as relevant public bodies must similarly discharge their duties under the Equality Act 2010 and consideration of equalities issues should therefore form part of their reports.

5.6.3 Equality and Diversity issues are a mandatory consideration in decision making in the Council pursuant to the Equality Act 2010. This means the Council and all other organisations acting on its behalf must fulfil its equality duty when exercising a public function. The broad purpose of this duty is to integrate considerations of equality an good relations into day to day business, requiring equality considerations to be reflected into the design of policies and the delivery of services and for these to be kept under review.

5.7 **Consultation and Engagement**

5.7.1 NHS England and Barnet CCG are taking the opportunity to engage with the Barnet Health Overview and Scrutiny Committee by submitting this report.

5.8 Insight

5.8.1 None in the context of this report. Upon considering the report, the Committee will determine if they require further information or future updates.

6. BACKGROUND PAPERS

None.