

# JHOSC estates update

23<sup>rd</sup> November 2023

## **Agenda**



- Context and vision for estates in NCL
- Overview of estates delivery across NCL 2022/23
- NCL funding envelope and investment decisions 2022/23 (Adrian)
- NCL's prioritisation process and criteria
- Key projects in NCL
  - a) St Pancras and Project Oriel (Colin)
  - b) Finchley and Wood Green Community Diagnostic Centres
  - c) £25m investment in primary care
- Specific asks of the JHOSC

## **Context of NCL estates**



#### Headline estate metrics

- 1) NCL occupies 920,000 sq. m\* of acute space across 5 boroughs, 73% of that is PFI assets
- 2) This total estates costs is £513m pa\*, 50% is finance costs, 20% soft FM, 30% hard FM
- 3) The average cost of occupancy is £500 per sq. m pa\*
- 4) We have £187m of acute backlog maintenance, of which £69m is critical\*
- 5) NCL's community space costs £44m pa, made up of 25 assets
- 6) NCL's primary space costs £25.5m pa, made up of 182 assets

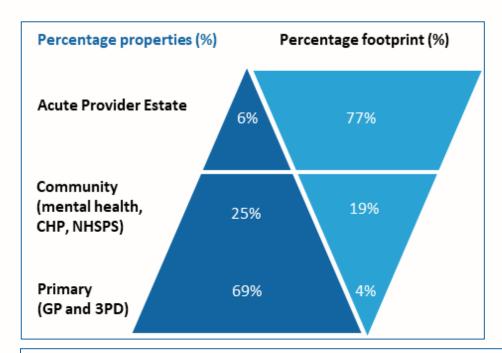
## NCL's strategic estate objectives are to:

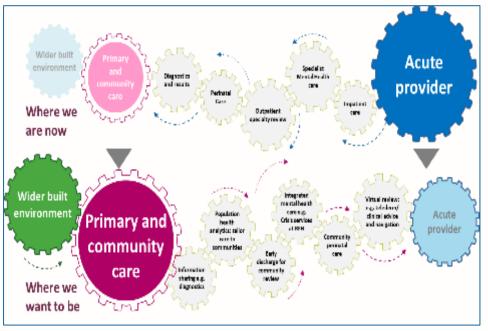
- 1) Improve and maintain existing buildings and make better use of existing assets
- 2) Balance our investment spend across acute, community and primary care estate
- 3) Invest in those areas of population growth supporting health improvements
- 4) Utilise all sources of capital to achieve overall system affordability
- 5) Ensure any new investment supports new models of care, incl digital capacity
- 6) Co-ordinate our use of the wider public estate



## **NCL** vision and estates priorities







#### Our estates priorities remain:

- 1. Developing a place based approach to allow us to optimise use of our estate in each locality to support service delivery, drawing on One Public Estate principles.
- 2. To **respond to** care requirements and changes in **demand** by putting in place a fit for purpose estate.
- 3. To increase the **operational efficiency** of the estate
- 4. To enhance delivery capability
- 5. To enable the delivery of a portfolio of estates transformation projects

## Overview of estates delivery in NCL 2022-23



#### A year of continued significant investment across NCL

- £25m\* + invested in primary and community estates
- £50m\* + invested in the Community Diagnostic Centre programme
- £2.5m\* + enabling funding from One Public Estate
- £5m + landlord funding across primary care
- £2.4m of national funding converting patient records space
- 100 + new or refurbished clinical and clinical support rooms delivered
- £8m\* + secured through the planning system to improve primary care
- Investing in sustainability agenda part of investment decisions

#### Improved partnership working

#### Council representation at

- ICS Estates Board and Local Care Infrastructure Board
- At each Borough Local Care Forum (planning, regen. and asset teams)

#### Strong partnerships now established with

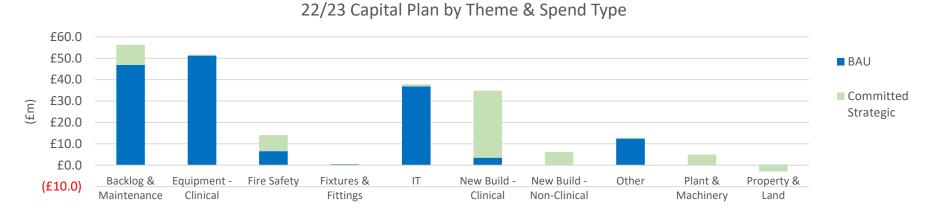
- Council colleagues in development and planning
- Community Health Partnerships/ NHS
   Property Services (the NHS Arms' Length Bodies)
- Primary Care Networks & primary care

<sup>\*</sup>multi-year amount

## **NCL Funding Envelope & Investment Routes 22/23**



- NHSE awarded **3yr allocations** to systems (22/23 to 24/25);
  - NCLs allocation reduces each year as the national funding algorithm directs more funding to backlog maintenance; NCLs is comparatively low nationally
- NCL 22/23 Capital allocation of c. £202m was over-subscribed by £15m; Primary Care Estate/Digital not included



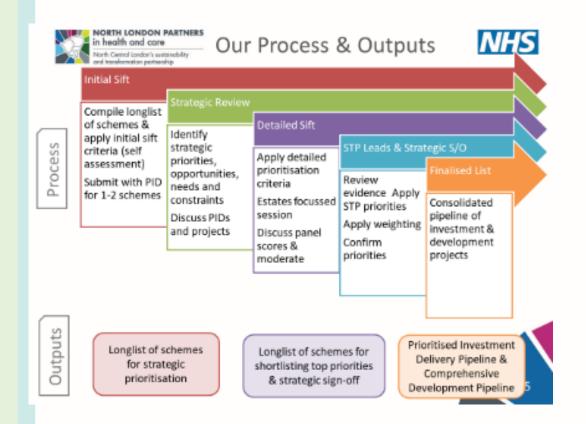
- It did however provide some opportunity to recycle funding for non-Acute schemes as;
  - Some Acute schemes were under discussion for separate national funding
  - It is common to see slippage against planned schemes throughout the year
- At M5 there was a £40m underspend vs. plan, we performed a deep-dive w/Providers which resulted in;
  - £4.6m being committed to **Primary Care** in-year with potential against any further slippage
  - Early identification of slippage risk to prevent sub-optimal use of NCL funding





## NCL's capital planning & prioritisation process





	Initial Sift Criteria		Weight	Good evidence consists of:
Initial Sift	1	Leadership	10	Strong evidence of stakeholder engagement and/or plan. High degree of support from the proposing organisation
	2a	Activity & Demand	10	Evidence and explanation of current activity / baseline and future demand assumptions
	2b	System Demand Management	20	Demonstration of how scheme supports system approach to managing activity & demand at the appropriate level of acuity. Demonstrates positive impacts on managing demand
	3	Transformation, patient benefit and workforce benefit	40	Scheme will substantially transform the service model, patient care or integration; enables transformation across clinical pathways; enables new ways of working
	4	Estates / Infrastructure Issues	20	The scheme offers improvements to the estate or releases value to support clinical priorities. This does not exclude schemes aimed at resolving backlog or compliance issues

- NCL's process has developed over time to include strategic and clinical leadership to ensure funding is targeted at NCL system priorities.
- Last updated to support 2021 planning round, using criteria identified. Work underway to further develop for 22/23 + planning rounds

## St Pancras and Project Oriel 22/23



- The St Pancras hospital site in Camden will be entirely redeveloped.
- The site is 5 acres in size and lies to the NW of St Pancras station
- A new building for Moorfields Eye Hospital to replace their existing City Road site will be built on 2 acres of the site
- The remaining 3 acres will be redeveloped with a mixture of NHS buildings, office, retail and residential spaces
- The new Moorfields Eye Hospital is expected to be ready in early 2027
- Planning permission for the Moorfields building has been granted and the business case is currently progressing through the final stages of approval
- The redevelopment of the remainder of the site is anticipated to start in 2025
- Highlights importance of improvements to mental health, dialysis, in patient beds and primary care



## **NCL Community Diagnostic Centres (CDC)**



#### CDC choice driven by:

- 1) pace, to support system diagnostic & elective recovery;
- 2) tackling of inequalities of access & outcomes, focus on accessibility;

- 3) Improve productivity/efficiency to deliver at scale;
- 4) Deliver a better & more personalised patient experience;
- 5) Integration of care across primary, community & secondary care.

18 Month Programme (Early 2021 start) 2 bids + 5 business cases £52.4m funding secured

2 New Sites: (Finchley Memorial Hospital & Wood Green) FMH Phase 1 Live:
Aug 2021
(CT, MRI, US, Cardio
+ respiratory,
Ophthalmology
Phlebotomy,
Microvascular)

WG Phase 1 Live: Aug 2022 (X-ray, US, Phlebotomy, Ophthalmology)

**50,000** patients seen (September 2022)

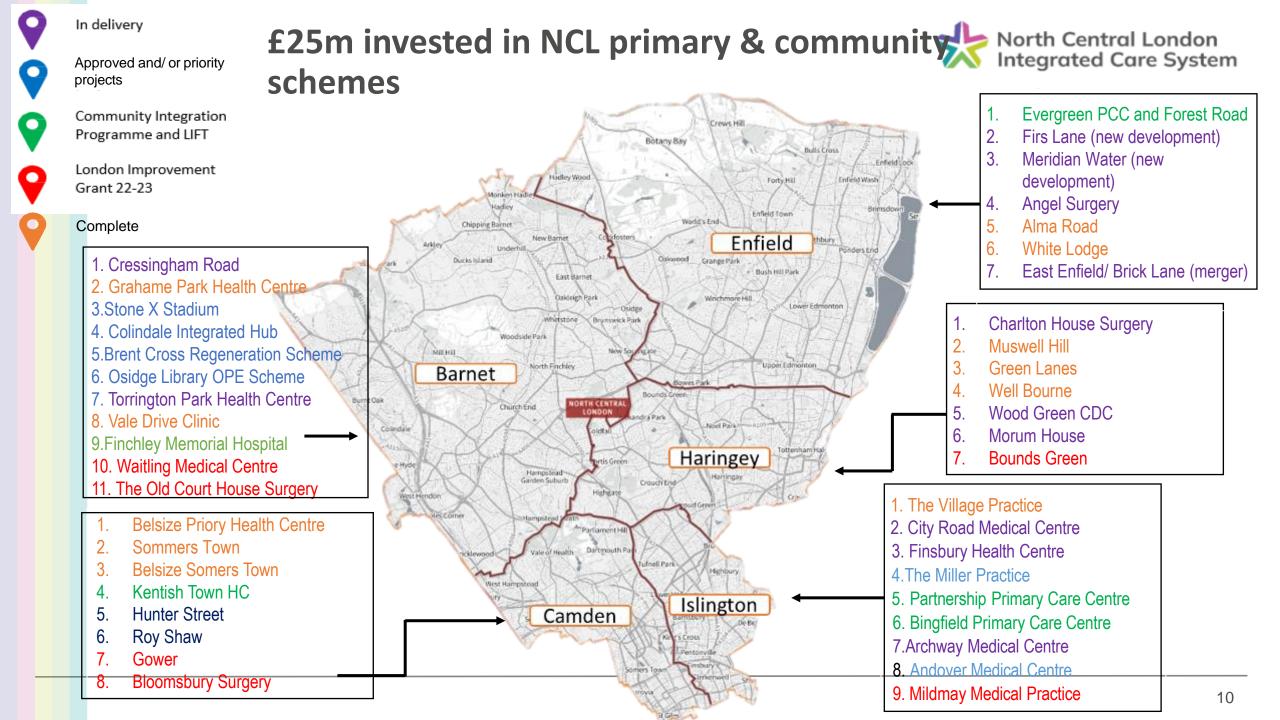
FMH Phase 2 Live: Sep 2023 (2<sup>nd</sup> MRI, CT, X-ray, Minimum respiratory tests)

WG Phase 2 Live: Sep 2023 (MRI, CT) \*









## Somers Town Medical Centre - 77-83 Chalton St, Investing Camden, supporting Oriel



 Collaboration to acquire new headlease of existing practice to create a new modern health centre

 Working with the GPs to provide a new suitable facility and enable closer working for the local community

 Closely supporting the Camden & Islington Trus (C&I) to enable a relocation in good time for the St Pancras Hospital redevelopment

- Joint working to use sales proceeds from previous NHS PS disposal to recycle into a fitout of new
- NHS PS and NCL ICS worked together to prioritise recycled funding into Somers Town
- Further NHS PS recycled funding projects to follow such as Hunter Street Health Centre



## Village Practice: Increasing the capacity & quality of primary care provision across North Islington



### **Project Impact:**

The completed works at The Village Practice have:

- ✓ Provided an additional 500 appointments per week
- ✓ Increased clinical consulting space by 40%
- ✓ Refreshed the estate so it is compliant
- ✓ Reconfigured the layout so it is operationally effective
- ✓ Reduced pressures on the surrounding healthcare estate & North Islington 1 PCN



The Village Practice is now able to provide the following additional services, increasing the quality of local care provision across North Islington:

- ✓ Islington GP Federations (IGPF) IHUB service provides out of hours service to the local population
- ✓ Facilitate the 'ARRS' workers. The practice has stated a clear intention to house the following community workers: two pharmacists, MH nurse, physio, minor surgery and a health and wellbeing coach.
- ✓ GP Training Practice: from September '22 the practice will house year 3 Imperial student alongside Junior Doctors from 'Health Education England' (UCLH) at a FY2s, FT1 and FT3 level of rotation.
- ✓ Other wider services the practice plan to deliver from the new space include:
  - Health Visitors
  - Social Prescribers
  - Additional IGPF services, notably Paramedics and blood clinics
  - Mental Health workers, namely psychologists and social workers

## Estates ask of Council colleagues – Autumn 2022



### Support development of primary & community care estates by...

- To note our thanks to partners, S106/CIL contributions has supported primary care estates delivery (see following page), we are keen to build on these successes, with additional ongoing contributions budgeted to create consistency across NCL boroughs/projects
- Supporting Local Estate Forums, involving wider Council teams with a clear route to Cabinets incl finding affordable & creative ways of bringing primary care into housing schemes, as anchor tenant
- For Councils to provide a single, senior, representative to the Estates Board or Local Care Infrastructure Board. This co-ordinated role would represent all five councils, with structure behind for wider consultation

## Support development of integrated health and social care in NCL neighbourhoods by...

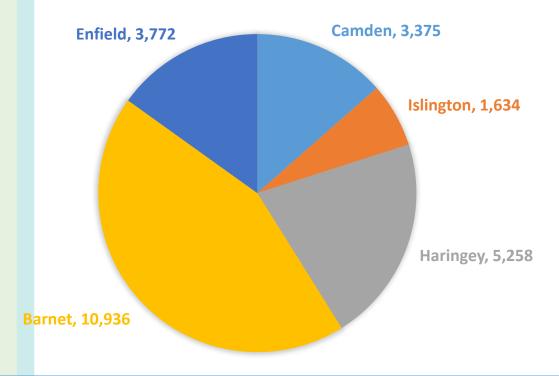
 Considering how members want to be involved in / champion development of integrated neighbourhood working in NCL in response to recommendations in the Fuller report.

## **NCL Residential Pipeline & S106/CIL**

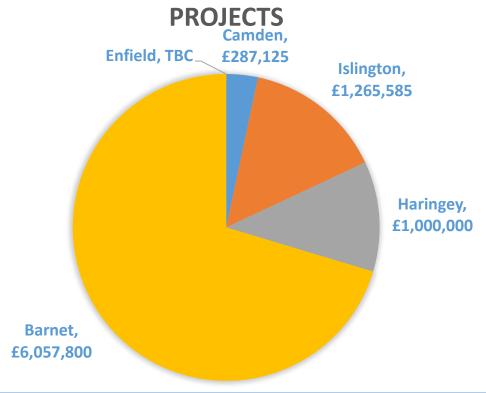


£8.6m allocated for primary care - Significant more sought, to be received once development starts

#### **NET RESIDENTIAL PIPELINE NCL**



## **S106/CIL ALLOCATED TO HEALTHCARE**



Borough	s106/CIL sought	s106/CIL allocated to healthcare projects	s106/CIL per housing unit	Note
Barnet	£6,653,580	£6,057,800	£554	£1,951,000 of s106 allocated to health. £4.1m earmarked for schemes in planning
Camden	£1,440,615	£287,125	£85	Includes £119,600 of Local CIL
Enfield	£12,336,660	TBC	TBC	IDP needs to be updated linking with the NHS strategy in order to allocate s106. Discussions regarding Meridian Water
Haringey	£5,156,480	£1,000,000	£190	Use of £1m of Strategic CIL towards the Wood Green health hub project
Islington	£2,096,940	£1,265,585	£775	Includes £1,185,585 of s106 earmarked for a new health centre as part of the Finsbury Leisure Centre development
Total	£27 684 275	£8 610 510		