

Cabinet Member Delegated Decision 14 May 2019

Report title: Clapham Park Group Practice Primary Care Development

Wards: Thornton

Portfolio: Cllr Matthew Bennett, Cabinet Member for Planning, Investment and New Homes

Report Authorised by: Emma Peters: Strategic Director for Sustainable Growth and Opportunity

Contact for enquiries:

Christine Caton, Chief Financial Officer NHS Lambeth CCG

christine.caton@nhs.net ; 0203 049 4133

Report summary

This is to request the approval of £1.272million Community Interest Levy (CIL) funding to meet the cost of additional capacity needed for the Clapham Park Group Practice to provide and transform health services to meet the need of new populations moving into Lambeth as a result of the Clapham Park Estate development.

Finance summary

The request is for £1.272m funding in 2019/20 to meet the non-recurrent Phase 2 capital costs of providing additional capacity for the Clapham Park Group Practice. Phase 1 was funded by NHS Capital through the Estates and Technology Transformation Fund (ETTF).

It is anticipated that the full cost of this investment will be met through the application of Community Infrastructure Levy (CIL) contributions. The project involves a one-off capital payment and has no ongoing revenue implications for Lambeth Council as any revenue funding will be met from CCG allocations or GP contributions as appropriate.

Recommendations

- 1. That £1.272m of CIL is allocated to the Clapham Park Group Practice development.**
- 2. Delegated authority is given to Director of Integrated Commissioning (Adults) to finalise delivery arrangements and monitor implementation of the GP surgery.**

1. Context

- 1.1 The Clapham Park Development means that there will be a net additional new homes of 1,668 built between 2018 and 2034 with an expected population increase of up to 3,400 who need health care as well as transport and schools in the Thornton ward. The total forecast growth in the Clapham CLIP area is 5,000 up to 2034.
- 1.2 NHS Lambeth CCG developed Full Business Cases relating to the development and extension of the Clapham Park Surgery for the two phases of the scheme for approval of resources to provide healthcare facilities to meet the expected growth and improve service outcomes.
- 1.3 For the NHS Funded Phase 1, the Full Business Case (FBC) was approved by the NHS Lambeth CCG Governing Body, in October 2017 and the Phase 2 FBC was approved in November 2018 to support the submission of an application for Community Interest Levy (CIL).
- 1.4 This report relates to the Future Lambeth: Our Borough Plan 2016-2021, in that it supports the Community Outcome and people are healthier, for longer, supporting the transformation of health and social care services within the borough.
- 1.5 The CCG and Council are currently developing a joint Strategy, Lambeth Together – Integrating Health and Care in Lambeth, for final approval by March 2019 which sets out the vision, objectives and strategy approach for Lambeth Together.

2. Proposal and Reasons

- 2.1 The scheme to redevelop Clapham Park Group Practice is a two phased approach to improvement the facility located at 72 Clarence Avenue, to provide a refurbished and extended primary care facility linking to the disused Rathmell Health Centre which sits adjacent and adjoining to the existing site and which had previously been occupied by Guys and St Thomas' community services. Both premises are owned by a private landlord and leased to NHS Property Services (NHSPS).

In Phase 1, which is funded by the NHS Estates and Technology Transformation Fund (ETTF) the practice is linking to and refurbishing the Rathmell Health Centre to provide six new consulting rooms, a minor operations facility and staff training space. This is expected to be completed in May 2019.

Once completed the practice will decant into the new facility and Phase 2 (proposed CIL funded) will refurbish the old buildings and vacate unsuitable temporary consulting space in the existing garage, remove a porta-cabin, provide space for patient toilets and provide additional consulting facilities in order to appropriately accommodate trainees. Phase 2 is expected to be completed by December 2019.

- 2.2 Capital investment is needed based upon the following drivers:

- the practice registered list size at 1 October 2018 is 17,674, an increase of 15.4% in the last two and a half years, set against inadequate and constrained practice premises. This will continue to grow as a result of a number of factors, the most significant being the development of the Clapham Park estate, building a net additional 1,668 new homes and an expected population increase of up to 3,400 between 2018 and 2034. The final planning application for this development was approved by the LB Lambeth Planning Applications Committee in March 2018.

- There is a lack of functionality in the current facility that adversely affects patient experience and does not enable practice training and service development obligations. The practice works from two treatment rooms and eight consulting rooms and is using two alternative rooms which are not fit for consulting. These rooms are unsuitable due to their small size, lack of disabled access and location in a converted garage and store cupboard. The practice is currently without a training room or suitable staff facilities and does not have a CQC compliant treatment room which is needed to provide minor operations services.

2.3 Strategic Need

a) Patient Access

The practice is the main focus of the incoming residents of the Clapham Park Development. This is a scheme that will include a net additional 1,668 new homes and an increase of 3,400 between 2018 and 2034. The total forecast growth for the Clapham CLIP area is 5,000 up to 2034.

This practice is the closest practice in a residential area and has already seen the impact of the development. The existing facility is not sufficient to meet the capacity required to accommodate the growth generated by the full development and therefore needs to be physically expanded.

b) Out of Hospital Services

The practice will provide services in line with the CCG's commissioning and estates strategies by improving access to effective care and increasing the capacity to deliver out of hospital services. This enables the practice to provide a wider range of services to reduce unplanned admissions and supports the delivery of services operating at scale.

c) Training and Development

The practice will develop medical, nursing and administrative training and development.

d) Transformation of working practices

This supports service transformation by redesigning workforce arrangements. It should improve patient access and management, by streamlining access to the appropriate health professional through co-ordinated care. The practice has implemented a document management system to reduce the administrative work undertaken by GPs and is piloting e-consulting to provide additional appointment options.

e) The leases on both Clarence Avenue and Rathmell Drive would have expired in February 2017 and there are no other options in the area.

2.4 Options Considered

a) **Do nothing** - this is not a realistic option given the pressure on the space in the practice from current and future population growth.

b) **New build in the existing site** - Demolition and rebuild is not supported by the landlord and would not be cost effective as would require practice relocation and transitional costs.

c) **New build as part of the shell and core offer within the Clapham Park Development** - this building is not available until 2028 which does not address either the current or projected practice need. The refreshed Clapham Park Master Plan revises this proposal to be a payment in lieu of provision of a building shell and core within the development.

d) **Refurbish either Clarence Avenue or Rathmell Drive** – neither option would provide the space needed to accommodate the practice level growth or provide scope to transform services. Refurbishing only one of the buildings would not provide a fully functional premises solution.

e) **Refurbish and extend the existing facility linking the two existing buildings** – this is the preferred option with a build length of approximately 18 months dependent on availability of funding.

2.5 The NHS Business Case proposes that these new healthcare facilities are procured and fitted out on sites secured using Community Infrastructure Levy funds held by LB Lambeth.

3. Finance

3.1 The total capital required is £1.272m. This is subject to completing Phase 1 by early May 2019 and assumed spend between May and December 2019.

3.2 NHS Lambeth CCG secured £1.9m of NHS Estates and Technology Transformation Fund (ETTF) to deliver Phase 1 of the scheme.

3.3 It is anticipated that the full cost of the investment in Phase 2 will be met through the application of CIL funding.

3.4 The project involves a one-off capital payment and has no ongoing revenue implications for Lambeth Council as any revenue funding will be met from CCG allocations or GP contributions as appropriate.

3.5 Revenue costs implications such as rent, rates, water rates, utilities, servicing costs and landlord service charges are excluded from the capital bid. These will be met by NHS Lambeth CCG and GPs as applicable.

3.6 The capital costs are required to meet the cost of additional capacity needed to provide and transform health services to meet the need of new populations moving into Lambeth as a result of the Clapham Park Development.

3.7 This will enable the development and expansion of the Clapham Park Group Practice.

3.8 The scheme enables improvements to local primary care capacity and the NHS and GP practices are required to cover increased operating costs.

3.9 The Option Appraisal as set out in the Full Business Case demonstrates that the capital investment represents Value for Money. The development will not only accommodate practice growth but will also facilitate service transformation with the following expected benefits:

- Reduced secondary care use- A&E, outpatients, admissions
- Reduced admissions and length of stay for care home patients.
- Improved staff satisfaction and retention
- Improved patient experience
- Reduced wait time for GP appointments
- Patients receive care closer to home
- Community led health and well-being initiatives
- Population health benefits

4. Legal and Democracy

4.1 The Council has powers under section 216 of the Planning Act, 2008 to provide Community Infrastructure Levy (CIL) funding to support medical facilities. The powers are discretionary and the council is not obliged to provide them although the Borough has approved these uses of CIL funding.

4.2 This proposed key decision was entered in the Forward Plan on 12 March 2019 and the necessary 28 clear days notice has been given. In addition, the Council's Constitution requires the report to be published on the website for five clear days before the proposed decision is approved by the Cabinet Member. Any representations received during this period must be considered by the decision-maker before the decision is taken. A further period of five clear days - the call-in period – must then elapse before the decision is enacted. If the decision is called-in during this period, it cannot be enacted until the call-in has been considered and resolved.

4.3 Statement of Urgency - Delaying the implementation of this decision would substantially prejudice the public interest, as any delay in signing the contract would mean that the project cost would increase by 10% due to the contractors being stood down following the completion of Phase 1 of the scheme. Therefore the Monitoring Officer has agreed to waive the call-in procedure, as outlined in Part 3, section 27.2 (a) of the Constitution, to allow the decision to be implemented 5 clear days after the decision has been published.

5. Consultation and co-production

5.1 The Clapham Park Group Practice Development has directly involved a number of key stakeholders in the governance and development of the Project, including NHS England, NHS Lambeth CCG, the practice and the Healthy Urban Development Unit (HUDU) and through the Lambeth Estates Forum. This has been discussed prior to approval with the joint CCG/LB Lambeth Management Team and approved by the Governing Body.

5.2 The CCG attended the Planning Applications Committee on 14 March 2018 to respond to the questions posed by Councillors and public about the provision of the health facility. The CCG and practice representatives have further discussed the proposal with the Cabinet Member for Planning, Investment and New Homes.

5.3 The practice has a very active Patient Participation Group, who have been engaged in the redevelopment over the last two years. The group meet around 5-6 times a

year, and they are updated on latest developments and have the opportunity to feed into plans. They fully support the redevelopment and the improvements that it will offer to the care of the registered patients and the local community.

- 5.4 The partners are committed to the practice redevelopment and have signed the lease with their landlord, NHS Property Services. The redevelopment and all associated costs have been built into the practice business plan.
- 5.5 Practice staff have been engaged throughout this process. The new building promises a better quality of working environment for the team, including meeting room and improved staff and patient facilities.

6. Risk management

- 6.1 The main risks to the project were considered during the development of the Full Business Case for Phase 1 and Phase 2. These included:
 - CCG is unable to deliver Phase 1 of the scheme and could risk losing the ETTF Capital.
 - The practice enters into a lease agreement across both sites but the scheme is unable to progress
 - Scheme not affordable to the practice or CCG.
 - Insufficient health provision, both of staffing and physical estate, is made available to the detriment of the new and existing populations.
 - The CIL bid fails, causing a large funding gap, which would require to CCG to explore other e.g. NHS or NHSPS funding sources which would cause significant delay and potential increase to the recurrent costs of the scheme
 - The pace of sale and occupancy of new dwellings creates service pressures or unplanned over-provision.

These risks have been mitigated in part because Phase 1 funding has been secured and the scheme is underway. The CCG will continue to monitor the progress on the increase in list sizes over the period to assess how the increased capacity is being used.

7. Equalities impact assessment

- 7.1 An equalities impact assessment has been completed for the scheme and is attached at Appendix A.

8. Community safety

- 8.1 The provision of the additional healthcare capacity will ensure that the population can access healthcare on an equitable basis between existing and new residents.

9. Organisational implications

Environmental

- 9.1 Not applicable

Staffing and accommodation

- 9.2 Not applicable

Procurement

- 9.3 Not applicable
- 9.4 Not applicable

Health

- 9.5 The capital funding will be used to develop the Clapham Park Group Practice whose services are commissioned by NHS Lambeth CCG. The capital expenditure and associated outcomes will be monitored by Lambeth CCG and reported to the Lambeth Council. The Council will not be required to provide resources to monitor the expenditure and associated outcomes.
- 9.6 A lack of investment will result in insufficient health care provision in Clapham Park and increased inequality in access to primary health care services. Investment will ensure that equality of access is maintained for new and existing population groups and provide community infrastructure to meet the needs of the existing residents and the populations of new developments as described in the Lambeth Local Plan (2015) Policies S1 and S2.

10. Timetable for implementation

- 10.1 The design and planning work for the scheme have already been undertaken at Phase 1. Assuming completion of Phase 1 in March 2019, Phase 2 will commence in May 2019 with completion by December 2019.

Audit Trail

Consultation

The audit trail must be completed before the report is published.

Name/Position	Lambeth directorate / department or partner	Date Sent	Date Received	Comments in paragraph:
Councillor Matthew Bennett	Cabinet Member for Planning, Investment and New Homes	29.04.19	29.04.19	
Councillor Ed Davie	Ward Councillor for Thornton	30.11.18	30.11.18	
Councillor Stephen Donnelly	Ward Councillor for Thornton			
Emma Peters	Strategic Director for Sustainable Growth and Opportunity	16.04.19	17.04.19	
Matthew Gaynor, Finance	Finance and Investment	27.04.19	27.04.19	3
Gregory Carson, Legal Services	Legal and Governance	10.04.19	10.04.19	
Maria Burton, Democratic Services	Legal and Governance	10.04.19	10.04.19	4
Sandra Roebuck	Director: Development, Planning & Housing Growth	17.04.19	18.04.19	4
Alison McKane	Director: Legal and Governance (and Monitoring Officer)	02.05.19	02.05.19	4.3

Report History

Original discussion with Cabinet Member	17.12.18
Part II Exempt from Disclosure/confidential accompanying report?	No
Key decision report	Yes
Date first appeared on forward plan	12.03.19
Key decision reasons	2. Expenditure, income or savings in excess of £500,000
Background information	<p>Public papers from 14 March 2018 Planning Committee including the Clapham Park Estate Planning Application – Reference 17/03733/FUL</p> <p>https://moderngov.lambeth.gov.uk/mgCommitteeDetails.aspx?ID=600</p>
Appendices	Appendix A – <i>Equalities Impact Assessment</i>

APPROVAL BY CABINET MEMBER OR OFFICER IN ACCORDANCE WITH SCHEME OF DELEGATION

I confirm I have consulted Finance, Legal, Democratic Services and the Procurement Board, and taken account of their advice and comments in completing the report for approval:

Signature: _____ **Date:** _____

Post: Sandra Roebuck, Director: Development, Planning & Housing Growth

I confirm I have consulted the relevant Cabinet Members, including the Leader of the Council (if required), and approve the above recommendations:

Signature: _____ **Date:** _____

Post: Councillor Matthew Bennett, Cabinet Member, Planning Investment and New Homes

Any declarations of interest (or exemptions granted):

Any conflicts of interest:

Any dispensations: