

| Meeting: Primary Care Commissioning Committee | | | |
|--|--|---------------------|---------|
| Meeting Date | 23 February 2022 | Action | Approve |
| Item No. | 9 | Confidential | No |
| Title | Estates – Radcliffe Change of use | | |
| Presented By | Zoe Alderson, Head of Primary Care | | |
| Author | Zoe Alderson, Head of Primary Care | | |
| Clinical Lead | Dr Catherine Fines, Chair and Primary Care Clinical Lead | | |

| Executive Summary |
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| <p>This paper is to seek Primary Care Commissioning Committee's approval to fund the following costs:</p> <ul style="list-style-type: none"> • Payment to convert to administration rooms at Radcliffe Medical Practice |
| Recommendations |
| <p>The Primary Care Commissioning Committee are asked to:</p> <ul style="list-style-type: none"> • Support the recommendation to replace the flooring in room 1049 at Radcliffe Medical Practice at a cost of £1,682.68 to enable greater face to face clinical access. • Support the recommendation to adjust the practices existing annual subsidy to the same amount with immediate effect. |

| Links to CCG Strategic Objectives | |
|--|--------------------------|
| SO1 - To support the Borough through a robust emergency response to the Covid-19 pandemic. | <input type="checkbox"/> |
| SO2 - To deliver our role in the Bury 2030 local industrial strategy priorities and recovery. | <input type="checkbox"/> |
| SO3 - To deliver improved outcomes through a programme of transformation to establish the capabilities required to deliver the 2030 vision. | <input type="checkbox"/> |
| SO4 - To secure financial sustainability through the delivery of the agreed budget strategy. | <input type="checkbox"/> |
| Does this report seek to address any of the risks included on the Governing Body Assurance Framework? If yes, state which risk below: | |
| GBAF | |

| Implications | | | | | | |
|---|-----|-------------------------------------|----|-------------------------------------|-----|-------------------------------------|
| Are there any quality, safeguarding or patient experience implications? | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input type="checkbox"/> |
| Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| Have any departments/organisations who will be affected been consulted ? | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input type="checkbox"/> |
| Are there any conflicts of interest arising from the proposal or decision being requested? | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> | N/A | <input type="checkbox"/> |
| Are there any financial Implications? | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input type="checkbox"/> |
| Is an Equality, Privacy or Quality Impact Assessment required? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| If yes, has an Equality, Privacy or Quality Impact Assessment been completed? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| If yes, please give details below: | | | | | | |
| | | | | | | |
| If no, please detail below the reason for not completing an Equality, Privacy or Quality Impact Assessment: | | | | | | |
| | | | | | | |
| Are there any associated risks including Conflicts of Interest? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| Are the risks on the CCG's risk register? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A | <input checked="" type="checkbox"/> |
| | | | | | | |

| Governance and Reporting | | |
|--------------------------|------|---------|
| Meeting | Date | Outcome |
| N/A | | |
| | | |

Estates Request – Radcliffe Medical Practice

1. Introduction and background

- 1.1 Primary medical estates are governed by The National Health Service (General Medical Services-Premises Costs) Directions 2013. These directions lay down the requirements of NHS England in relation to premises in which Primary Medical Services are provided.
- 1.2 The management of primary medical estate is not simple, with different ownership arrangements in place. Within Bury there are practices in premises which are owned privately, usually by the GP partners, or managed by NHS Property Services (NHSPS) or Community Health Partnerships (CHP).
- 1.3 When a privately owned practice wishes to make an improvement to their practice they are able to apply for an improvement grant from NHS England and providing the bid is in line with the Directions and there is sufficient funding available, NHS England can fund up to 66% of the cost of the improvement.
- 1.4 Where a practice is located in a building managed by NHSPS or CHP, improvement work should be funded by the relevant landlord who will then review and revise rental costs as necessary to the relevant tenant. Where the relevant organisation does not have sufficient capital monies to fund the work the CCG may agree to support the funding of costs by submitting a bid to NHSE who hold some capital resources for primary care estate. The maximum reimbursement would be 66% of costs. The CCG does not have any capital resources.
- 1.5 Requests for improvement of premises should be in line with the CCG's relevant strategies and the Bury locality plan and should be consistent with the Strategic Estates Groups strategy. Currently Bury does not have a sufficiently robust estates strategy with respect to primary medical estate.
- 1.6 The CCG, via delegation from NHS England, is responsible for the reimbursement of certain rental costs (revenue cost) associated with primary medical estate. Where a GP practice is privately owned this is often the current market rate, the cost of mortgage repayments or where a property is owned outright, a 'notional rent'. Where a practice is located in an NHSPS or CHP managed building this is the cost of rent.
- 1.7 The PCCC agreed in December 2016 that where a practice requested extra space, and that the space was available, the CCG would aim to fund that extra space, subject to affordability, to a level consistent with the requirements for their list size and subject to the request being consistent with the CCG's strategy.
- 1.8 Whilst there has been no formal discussion/decision made around changes of use for space within a practices existing demise requests of this nature have been supported by PCCC previously.

2. Estate request

- 2.1 The CCG has received a request from Radcliffe Primary Care Centre to fund the replacing of flooring within Room 1049 from carpet to vinyl to be able to use the room as clinical space at a non-recurrent cost of £1,682.68 (a full breakdown of costs attached as Appendix 1). There is no revenue consequence to this decision as the space concerned is already within the Practices demise.
- 2.2 The 'space-calculator' indicates that the practice does currently occupy the correct number of rooms for its list size of 9641 (as at Feb22), however it should be noted that the list is growing at a steady rate and the rationale for change is therefore to enable additional face to face clinical appointments to be undertaken.
- 2.3 PCCC should be aware that the practice has recently indicated they are considering a boundary change, though this is with a view to resolving neighbouring CCGs registrations rather than reduce access to those residing in Bury.
- 2.4 A condition of this support would be the immediate annual recurrent reduction of £1,682.68k from the practices existing subsidy. This immediate reduction would not negate the need to work with practice to agree a full removal of the remaining subsidy.

3. Recommendations

The Primary Care Commissioning Committee are asked to:

- Support the recommendation to replace carpet flooring in room 1049 at Radcliffe Medical Practice at a cost of £1,682.68 to enable greater face to face clinical access.
- Support the recommendation to adjust the practices existing annual subsidy to the same amount with immediate effect.

Zoe Alderson
Head of Primary Care
February 2022

TENANT VARIATION REQUEST FORM

PART A (1) – To be completed by the requestor and the authorised budget holder

| | |
|---|--|
| PROPERTY: RPCC | DEPARTMENT: Radcliffe Medical Practice |
| DESCRIPTION OF WORK (include room ID from door where work is required).* | |
| TO CHANGE FLOORING FROM CARPET TO VINYL IN ORDER TO USE AS A CLINICAL ROOM | |

***Please note, In the absence of a detailed scope of work provided by the tenant, all design risk will be passed on as a result.**

Is work to be undertaken during normal office hours? (08:00 – 17:00, Mon-Fri)

| | | | | |
|-----|-------------------------------------|----|--|------------------------------|
| YES | <input checked="" type="checkbox"/> | NO | | IF NOT WHEN? Evening/weekend |
|-----|-------------------------------------|----|--|------------------------------|

| | |
|--|-----------------------------|
| Name: Irene Abbott | Job Title: Practice Manager |
| Phone Number: 0161 724 2062 | Date: 15/07/21 |
| Request for quote authorised by (Budget holder's name): Irene Abbott | |
| Budget Holders E-mail address: i.abbott@nhs.net | |

PART A (2) – Approval to proceed to quotation stage (to be completed by CHP)

| | | | | | | | |
|--|-------------------------------------|------------------|--|----------|--|-----------------|--|
| Type of Variation (please tick) | | | | | | | |
| Minor | <input checked="" type="checkbox"/> | Minor Structural | | Services | | Permission Only | |
| Other (please state) | | | | | | | |

| | | | |
|------------------------------|--|--|--|
| Funding (please tick) | | | |
| Capital Sum Paid by Tenants: | | Landlord to obtain additional finance: | |

PART A (3) – Rejection of variation request (to be completed by CHP)

Explanation

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PART B – Quotation (to be completed by LIFTCo)

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|-------------------------------------|----------------------|--------------------|
| Prepared by: Joanne McGregor | Date:22.10.21 | TVR Ref:103 |
|-------------------------------------|----------------------|--------------------|

| Capital costs: | QUOTE (exc. VAT) |
|---|-------------------------|
| Contractor cost | £1118.46 |
| Materials / Parts | £ |
| Labour / Supervision | £ 299.40 |
| FM uplift @ 10% | £ 111.85 |
| Total capital cost | £1529.71 |
| Additional fees: | |
| FM service fee Costs (Upfront cost for remainder of term) | n/a |
| Lifecycle costs (Replacement of equipment for remainder of term) | n/a |
| O&M update (Drawings etc.) | n/a |
| LIFTCo variation management fee @ 10% | £152.97 |
| | £ |
| Total additional fees | £ |
| Total variation cost (capital cost + additional fees) | £1682.68 |

PART C – Approval to proceed:

Authorised by:

| | | | |
|------------------------------|-----------------------|--------------------|-----------------|
| Tenant/Budget Holder: | Authorised by: | PRINT NAME: | Date: |
| CHP: | <i>J H Vause</i> | J H-Vause | 22/12/21 |

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| Landlord: | Authorised by: | PRINT NAME: | Date: |
|------------------|-----------------------|--------------------|--------------|

Form to be used in conjunction with Schedule 12 of the respective Lease Plus Agreement.