

Joint Health Overview and Scrutiny Committee (JHOSC): estates vision

20 January 2020

Summary	The NHS in North West London will not be able to publish a full estates strategy until our clinical strategy is in place. This document sets out the vision for estates in North West London, the framework in which we are working (i.e. the national Long-Term Plan), what ambitions we have for estates in North West London, and what challenges we expect to face.
Date	20 January 2020
Owner	David Cox, North West London STP Estates Lead

1. **NHS Long-Term Plan: national estates vision**
2. **NHS Long-Term Plan: North West London estates vision**

1. NHS Long-Term Plan: national estates vision

The NHS Long-Term Plan has a full section on improving the use of estates (land, buildings and equipment). The work of the Long-Term Plan will be measured against five tests (view full list here). Test five is entitled: “The NHS will make better use of capital investment and its existing assets to drive transformation.”

The NHS estate benefits from world-leading facilities which allow us to deliver outstanding patient care. There are also parts of the NHS estate which are older than the NHS itself, and could never meet the demands or standards expected of a modern health service. In addition to this, the NHS needs to look at serious enhancement to our digital capability and diagnostic equipment if we are going to meet the needs of our patient population.

Investment and sustainability

In 2017m £3.9bn was allocated to the NHS to support estates transformation and to tackle the maintenance backlog. At a national level, a number of possible reforms are under consideration which support a better management of funds, with greater productivity, planning, and control over capital. For example, there are proposals to reduce fragmentation of funding resources, and make sure capital decision-making is able to focus on the long-term needs, not short-term damage control.

The national plan commits to working with all providers to reduce the amount of non-clinical space by a further 2%, and pledges an aim to reduce the NHS carbon footprint by a third (from 2007 levels) by 2020. It also sets out an ambition to improve the way we manage our estate to help to reduce emissions and to improve air quality.

2. NHS Long-Term Plan: North West London estates vision

In alignment with the national plan and its tests, our North West London ambitions for our estates strategy are that it should:

- Improve quality and patient care
- Improve productivity
- Be more sustainable, for example in terms of energy efficiency
- Reinvest money from unnecessary land into patient care
- Support government target of building new homes for NHS staff.

In addition to these national ambitions, we know from public engagement locally in North West London that our patient population has expressed concerns about accessibility, premises that fit the need for modern health and care services, and the need to be as environmentally-sustainable as possible.

Investment and sustainability

Future funding allocations for North West London will be dependent upon the HIP bids and capital decisions, which have not yet been made. North West London has put in a bid for investments to develop and improve the estates at St Mary's Hospital, Hammersmith Hospital, Charing Cross Hospital, and Hillingdon Hospital.

Imperial College Healthcare NHS Trust is developing practical and credible options for a full redevelopment of the St Mary's Hospital site, as well as significant developments at our Charing Cross Hospital and Hammersmith Hospital sites, with the Western Eye Hospital being incorporated into these plans.

Imperial College Healthcare NHS Trust is working to progress the St Mary's Hospital development as soon as possible, with funding primarily from the sale of surplus land. The Trust continues with its own programme of smaller scale estate improvements at Charing Cross and Hammersmith (and the co-located Queen Charlotte's and Chelsea and Westminster) Hospitals, before undertaking a mixture of major refurbishments and new build supported with central funding beginning around 2025/26. The Trust will seek to co-locate the Western Eye Hospital within the most appropriate part of its estate.

Reflecting the refreshed organisational strategy and the wider North West London picture, the emerging plans are expected to support a new approach to working with partners to provide more joined-up care, and to support continuing innovation and clinical advances. It is recognised that we will require at least the same level of inpatient beds and both our existing A&E departments in order to meet future need.

The NHS in North West London will also be looking at further hub developments. These will be planned on a case-by-case basis, taking into account local need, workforce and building capacity, existing conditions and the availability of funding and/or development opportunities.

The 20-bed 'decant' ward planned for the Hillingdon site has received planning permission from the local authority and funding is in place, so winter pressures and our planned rolling programme of ward upgrades will both be addressed by this development. We intend to get on with this as soon as possible.

A multi-storey ward unit, also planned for the Hillingdon site, will go out to tender shortly and its final form and function is still under discussion. Some site clearance of older buildings and repositioning of facilities such as the waste and recycling yard and some car parking, will be undertaken as part of this project. The proposed completion date is by the end of 2020.

The emergency department expansion at Hillingdon is in its final phase, with additional consulting rooms, treatment rooms and a dedicated plaster room for the Urgent Treatment Centre.

There is also ongoing work at Hillingdon within the boiler house, which is nearing completion, and work continues on an incinerator upgrade in order to bring that back into action.

In North West London we have a backlog maintenance issue which amounts to £1.037bn. Without resolving this major issue, it could become very difficult to deliver adequate, safe and appropriate care for patients in North West London to the standards we would desire. Not only do we have parts of the estate in North West London which are in very poor condition but the age of the buildings means that they will need an urgent and serious refresh if we are going to keep our patients safe and well. This needs to be incorporated carefully into our estates strategy as we look at the best ways to transform estates with the capital available to us.

How will patients benefit from our estates strategy?

The North West London estates strategy will test itself against the benefit to patients, both via its alignment to the North West London clinical strategy (when published) and via its alignment to the national Long-Term Plan.

The benefits to patients include:

- Hubs will offer more services in one place, closer to home
- Improved and better value services.
- Reduced the cost of our estate so that money can be put back into patient services.
- Improved the quality of existing buildings.
- How will we know that we're making a difference?
- More patients can access services at the right time, at the right location and to be seen by the right person.
- Patients benefit from modernised and appropriate primary care accommodation.
- Capacity for primary care is better aligned to the recent and forecast increases in our population.
- Optimised use of the health estate.
- Void space costs are reduced.

Progress in North West London so far

NHS England has graded our current estates strategy as 'strong', one of only a limited number in the country to achieve this top rating. The strategy captures our response to the clinical strategy, population need, demand, and population growth.

We have also:

- Developed a detailed delivery plan, bringing together all priority projects into a single plan.
- Created a London Estates Board, now operating in shadow form, which provides the opportunity for London to manage its own regeneration and to work as a wider system to deliver the necessary estate investment through collaborative working.

- Developed a capital investment plan across acute, community and primary care estate.
- Established an effective and collaborative Strategic Estates Committee with representatives from commissioners, providers and key partners.
- Aligned with 'One Public Estate' Partnership between Cabinet Office, Ministry of Housing, Communities and Local Government, CCGs, and NHS Property Services (PS), working to support collaborative property-led projects in local areas.
- Developed Kingswood Hospital - £4.190m invested to develop additional beds for people with learning difficulties/autistic spectrum disorders.

Successful capital schemes

- St Mary's Hospital: £1.865m awarded for the development of an Endovascular Hybrid Theatre. This will facilitate integration of fixed imaging equipment into an operating theatre to enable safer surgery and intervention.
- Central and North West London: £5,212m to improve mental health accommodation.
- Park Royal Mental Health Wards: £2.350m awarded to reconfigure wards to deliver single sex accommodation on two adult in-patient wards.
- Park Royal Practice: £1.8m capital funding awarded for a new primary care practice within Central Middlesex Hospital
- Yiewsley Health Centre: £0.5m capital funding awarded to increase primary care capacity
- Burnley Practice: £0.5m capital funding awarded to increase primary care capacity within Willesden Centre for Health and Care
- The Hillingdon Hospital Trust: £16m emergency funding to address patient safety and priority infrastructure backlog maintenance

What do we plan to do next?

- Deliver local services hubs to support the shift of services from a hospital setting to a community-based location.
- Align estates and technology strategies to maximise the potential impact of technology to transform service delivery and potential efficiencies in designing new healthcare accommodation.

- We will optimise property costs by maximising use of existing space and using technology to reduce physical infrastructure required for service delivery.
- Continuing to identify opportunities for consolidation and co-location of primary care services to maximise the potential availability of NHS England's Estates Technology Transformation Fund to improve services.
- We have identified key areas for investment (utilising local SSDPs and estate strategies) to ensure future primary care premises are fit for purpose to support delivery of high quality primary care.
- Work with Trusts to ensure unoccupied floor space does not exceed 2.5 per cent; floor space used for non-clinical purposes should not exceed 35 per cent.
- Development of an estates delivery plan
- Evaluate and map current health estate, including tenure, current void and under-utilisation across the health system. Develop strategies to reduce the void and improve efficiency of estate usage and determine additional infrastructure requirements by overlaying housing zones and developments
- Utilisation and optimisation studies will continue to be used to review the performance of existing estate and buildings. This will inform the design and development of new efficient and technologically advanced buildings and facilities.
- One Public Estate – to work closely with public sector partners to optimise joint opportunities for estate rationalisation, utilise creative investment that delivers transformational change, generate efficiencies (capital receipts and reduced running costs) and support economic growth (homes and jobs).
- Work effectively with Local Authority Planning Teams to develop Local Plans, IDP and Neighbourhood plans that convey the health requirements and estate renewal to secure funding (s106 or Community Infrastructure Levy) from housing developers.
- Develop Outline and Full Business Cases that support strategic investment for acute, community and primary care transformation, including reviewing revenue implications and cost pressures.
- Rationalise and invest in existing estate and dispose of estate that is not fit for purpose.
- Work with property partners in redeveloping existing NHS estate to provide new, modern, fit for purpose estate and support local housing objectives.