

	Cabinet 15 January 2024
	Report from the Corporate Director of Resident Services
	Lead Member - Cabinet Member for Environment, Infrastructure and Climate Action (Councillor Krupa Sheth)
Northwick Park Public Mortuary Expansion Project Business Case	

Wards Affected:	Northwick Park
Key or Non-Key Decision:	Key
Open or Part/Fully Exempt: <small>(If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)</small>	Open
List of Appendices:	None
Background Papers:	None
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1.0 Executive Summary

- 1.1. Brent Council operates Brent Mortuary, situated on the site of Northwick Park Hospital, which provides licensed storage, post-mortem facilities and technical staff, covering three of the five boroughs within the Jurisdiction of HM Coroner for North London, LB Brent, LB Harrow and LB Barnet.
- 1.2 Due to multiple external factors, predominantly, year on year increases in the number of deaths being investigated by HM Coroner and increases in the average length of stay of each deceased, the Human Tissue Authority (HTA) reported in their 2021 audit, that the mortuary facility no longer meets the HTA requirement for sufficient storage.

- 1.3 A feasibility study was completed in 2022 to which options were explored to expand the mortuary at its existing site at Northwick Park.
- 1.4 This project business case sets out the proposed project to expand the mortuary by 80 storage spaces for a budget of £2.63m. Brent's contribution towards this cost would be £900,621.

2.0 Recommendation(s)

That Cabinet:

- 2.1 Note the need for additional mortuary capacity to meet the standards laid out in the Human Tissue Act 2004.
- 2.2 Support the proposals contained in Option 2 of the options appraisal at paragraph 3.4 of the report as the means of best meeting the requirement for additional mortuary capacity.
- 2.3 Subject to Barnet Council's and Harrow Council's capital contribution confirmation, approve the business case to carry out capital works to expand the public mortuary capacity for a cost of £2.63m.
- 2.4 Subject to Barnet Council's and Harrow Council's capital contribution confirmation, note Brent Council's contribution towards the total project budget is £900,621.
- 2.5 Subject to Barnet Council's and Harrow Council's capital contribution confirmation, approve the use of Strategic Community Infrastructure Levy to fund Brent Council's contribution as detailed in recommendation 2.4 above.
- 2.6 Approves the delegation of authority to the Corporate Director, Resident Services, in consultation with the Corporate Director, Finance and Resources to amend the project business case should either Barnet Council and/or Harrow Council not receive their respective approvals to contribute towards the cost of the project as set out in this report.
- 2.7 Approves the delegation of authority to enter into the new lease with the NHS to the Corporate Director, Finance and Resources, in consultation with the Corporate Director, Resident Services and Lead Member for Environment, Infrastructure and Climate Action should the new lease exceed the Corporate Director's current approval levels as set out in Part 3 of the Council's Constitution, paragraph 11.

3.0 Detail

3.1 Cabinet Member Foreword

- 3.1.1 Brent provides, through an inter-authority agreement with LB Harrow and LB Barnet, a licensed shared mortuary and post-mortem facility, covering three-

fifths of His Majesty's Coroners Jurisdiction for North London. As a licensed facility (under the Human Tissue Authority) the council and partners have a responsibility and commitment to ensure that the premises, facility and equipment continue to meet the standards laid out in the Human Tissue Act (2004).

- 3.1.2 By recognising and meeting these standards, the council demonstrates it has a commitment to ensuring the continued security and dignity in the ongoing care of the deceased through the Coronial process, as part of the wider death management process. The proposed expansion will ensure that the mortuary remains legally able to continue to deliver its services to residents and support the Coroners Service and Metropolitan Police.
- 3.1.3 This expansion supports our residents in tackling health inequality, the proposed mortuary storage expansion will ensure that there are sufficient localised services to match the local need and that this sensitive service can continue to be delivered in a cost-effective manner under the dedicated and highly regarded Brent team.

3.2 Background

- 3.2.1 Under section 198, Public Health Act (1936) Brent Council operates Brent Mortuary, situated on the site of Northwick Park Hospital, which provides licensed storage, post-mortem facilities and technical staff, covering three of the five boroughs within the Jurisdiction of HM Coroner for North London, LB Brent, LB Harrow and LB Barnet. By law, the facility is required to provide suitable amounts, and types, of storage for both community and hospital deaths that have occurred anywhere within the three boroughs of the Jurisdiction and/or that HM Coroner is investigating, under the Coroners and Justice Act (2009).
- 3.2.2 The current facility, opened in 1984, merged the individual Mortuary facilities and staff serving LB Brent and LB Harrow respectively. Through the initial merger agreement, LB Brent retained ownership, operational control and responsibility of the facility and staff, with LB Harrow recharged annually on a per capita basis for usage. In 2014, Brent and Harrow were approached by LB Barnet to form a tri-borough shared mortuary service. In 2015, the authorities entered in a ten year Inter Authority Agreement (IAA).
- 3.2.3 The Human Tissue Act (2004) was passed into law and its statutory functions began in April 2006. Around 2010, the Human Tissue Authority "HTA" (an executive non-departmental public body, sponsored by the Department of Health and Social Care) began notifying Local Authority and NHS Mortuaries, that they would commence site inspections and audits to ensure facilities and processes were in compliance with the Human Tissue Act (2004)
- 3.2.4 In 2021, the HTA undertook an audit of the public mortuary at Northwick Park. The audit noted that due to multiple external factors, predominantly, year on year increases in the number of deaths being investigated by HM Coroner and

increases in the average length of stay of each deceased, that the mortuary facility no longer meets the HTA requirement for sufficient storage (PFE/2).

- 3.2.5 The HTA Code states that, in a HTA licensed facility, there must be adequate deceased refrigerated/frozen storage, (in both number and type) to allow for predicated peaks of usage, such as yearly seasonal pressures and, that the use of contingency storage on a regular basis outside of these times indicates an ongoing capacity issue, which must be addressed. The use of different types of refrigeration, dependent on length of stay, is outlined in the HTA guidance.
- 3.2.6 Additionally, and throughout the lifetime of the current IAA, our boroughs are steadily growing in population and generally getting older. Easy regular access to GP services is becoming more difficult (this is one of the causes for referral to HM Coroner) and through the cost-of-living crisis, access to sufficient funds to pay for a funeral has become harder. The service is also seeing a steady increase in the number of obese and bariatric deaths which can often require additional storage space.
- 3.2.7 To ensure the facility and functions remain fit for purpose and compliant with license conditions, an agreed temporary contingency plan is in place. However, this has limited scope for further expansion and cannot be considered a long-term solution.
- 3.2.8 In 2021-22, officers commissioned technical consultants to undertake a feasibility study into the options to expand the mortuary at Northwick Park. It was determined that the best option was to expand the mortuary by 80 places using an un-used under-croft immediately next to the existing mortuary as well as renovate the existing mortuary to ensure it meets current guidelines and requirements. This option was supported by the hospital by expanding provision as well as making use of an un-used area.

3.3 Options Appraisal

3.3.1 The feasibility report looked at the following potential options for this project:

3.3.1.1 *Option 1: Do Nothing*

This is not an option as the mortuary is currently at capacity and would not deal with the current issues as well as the expected service demand in the future. The three local authorities would also be at risk of not meeting the requirements of the HTA audit and could be liable to financial penalties and fines for not doing so.

3.3.1.2 *Option 2: Provide capital funding to expand the existing public mortuary by building in the under-croft and remodelling the existing space (recommended option)*

This is the **recommended option** as it provides the required capacity as indicated within the HTA report. It also deals with ensuring the existing

space is appropriate for a modern mortuary use and to provide the appropriate zoning of facilities to operate the public mortuary.

3.3.1.3 *Option 3: Provide capital funding to expand the existing public mortuary by building in the under-croft only (no remodelling of the existing space)*

This option has been discounted as it does not deal with the existing mortuary and will retain the inefficient use of this space. The existing space requires rationalisation of space to allow a more efficient operation of the service. By doing this at a latter point will cost more and incur greater inconvenience to the service and its stakeholders.

3.3.1.4 *Option 4: Buy into other local authority public mortuary provision.*

This option has been discounted as there is currently no other local authority provision capable of providing their existing service and the needs for Brent.

3.3.1.5 *Option 5: Close the public mortuary provision within Brent.*

This option has been discounted as it is a statutory service and as with option 4 above, it cannot be provided by other authorities.

3.3.1.6 *Option 6: Refurb an existing vacant Council building and provide the expanded mortuary there.*

As a HTA licensed facility carrying out licensable activities, any associated mortuary function, including the storage of deceased persons under the jurisdiction of HM Coroner, must be undertaken in a suitable facility, that meets all requirements. This option has been discounted as the premises must meet stringent standards, in both its construction, maintenance, security, management and running. The significant additional ongoing resources (in terms of logistics, body movements, staff, security, licensing and general running costs) required to legally operate a satellite site, preclude this from being a financially viable option.

3.3.2 In the unlikely event of the withdrawal of one or both of the IAA partners from the agreement, given that there are no suitable alternative facilities available for partners to use, the existing mortuary storage and facility would likely remain requiring upgrading and expanding, due to the insufficient type and number of storage spaces to match intake.

3.3.3 Option 2 is the recommended option as it is the most cost-effective approach to expanding the mortuary to meet the requirements of the HTA report and refurbish and remodel the existing space. It will allow the existing arrangements with Harrow and Barnet and the NHS to continue and make use of a wasted space on the hospital site.

3.3.4 Colleagues in Barnet and Harrow Councils are working on their respective approvals, and officers are requesting Cabinet approval subject to receiving the same from Barnet and Harrow Councils in due course.

3.4 Objectives and Benefits

3.4.1 The project's objective is to meet the HTA audit requirements by delivering an expanded Mortuary Service to meet the increasing needs for the three boroughs as well as remodel the existing space to provide a more efficient and effective operation of this space.

3.4.2 The expanded facility would increase the overall mortuary capacity by a minimum of 80 spaces and will include various types and sizes of storage in sufficient numbers to meet the HTA license requirements and allow for continued and predicted annual growth over a number of years.

3.5 Indicative Capital Programme

3.5.1 The table below sets out the timescale to obtain necessary capital approvals for the three boroughs as well as the anticipated timings for the key milestones for the capital project delivery.

Milestone	Start	Finish
Cabinet Approval	November 23	January 24
Appointment of Consultants	February 24	April 24
Design Work	May 24	January 25
Planning application & approval	October 24	January 25
Contractor Procurement & Award	February 25	April 25
Works on site	May 25	June 26
Handover	June 26	June 26

3.5.2 A detailed GANTT chart will be created and will be reviewed and updated as the project progresses and will be monitored through the Council's capital project governance processes to ensure the project meets required benefits and allocated budget.

3.6 Procurement

3.6.1 The Council will appoint a Multidisciplinary Technical Advisory Organisation. They will provide project management services, design services, cost consultancy and Principal Designer services. This organisation will be procured and will deliver stages RIBA 1-7.

3.6.2 It is likely that further one-off appointments will be made throughout the project for specialist services such as surveys to ensure full details of any renovation works are completed sufficiently to obtain fixed prices from contractors.

3.6.3 The Contractor is proposed to be appointed using a Framework or a tender process. The contractor will be appointed using a JCT Contract and will commence works/services from RIBA 5 onwards.

3.6.4 Before invitations to tenders are sought from the contractors on the framework, an initial period of time is provided to the contractors to confirm their interest and whether the project can be delivered in the proposed timeline and budget. This gives both parties the opportunity to review in order to ensure expectations are measured before committing to tendering.

3.6.5 The above will consist of very low value, low value and medium value contracts. Proposals for tender opportunities will be issued via separate reports requiring approval.

3.7 Risks

3.7.1 A detailed risk register will be created for the project. The main risks for the project are included below:

1. Inability to secure approval to progress the project. The project relies on gaining internal Council approvals.
2. Not all Boroughs obtain approval to contribute to the project meaning a change to the project's benefits, costs and programme.
3. Site identified for other Council/NHS requirements, causing the project to stop or be revised after development work has begun.
4. The NHS do not support the use of the under-croft to expand the public mortuary.
5. Lack of interested contractors during procurement.
6. Increased demand within the construction industry meaning price increases above inflation leading to unaffordable projects and calls on additional financial contributions.
7. Statutory approvals (Planning, Building Control) not being granted.
8. Site surveys identify constraints (e.g. underground utilities, contaminants) that cause delays and cost increases to address.

3.8 Assumptions

3.8.1 The following assumptions apply to this project:

1. The feasibility report produced that form the works in the project is an accurate reflection of the requirements
2. Costs associated with the identified works are an accurate reflection of the costs required to complete the works
3. The budget request is sufficient to cover the costs of the project throughout its life to complete the works
4. Access to consultants and contractors to complete works is provided promptly
5. Market place interest from technical consultants and contractors to complete the works in the required timeframe
6. The other Councils obtain approval for capital investment.

4.0 Stakeholder and ward member consultation and engagement

- 4.1 The Cabinet member for Environment, Infrastructure and Climate Action has been informed of these proposals.
- 4.2 The Ward Members will be kept up to date on project milestones such as planning applications, works starting on site and practical completion.
- 4.3 The NHS have been consulted on and advised of these proposals and are in support. They have intimated they would be interested in making use of the increased capacity when the hospital mortuary is at capacity. They will be kept up to date with project progress.
- 4.4 A working group has been set up with Barnet Council and Harrow Council. They are in support of the proposal to increase the capacity of the service and officers expect their capital contribution confirmations in due course. Through the working group, the partners will be kept up to date with project progress.

5.0 Financial Considerations

Capital Implications

- 5.1 The budget for the capital works for the preferred option (option 2) is outlined in the table below:

Spend	£
Construction	1,535,000
Fees	200,000
Surveys	30,000
Statutory	10,000
FFE & ICT	350,000
<i>Sub-total</i>	<i>2,125,000</i>
Contingency	500,000
Overall Total	2,625,000

- 5.2 Owing to the early design stage of the design proposals, a contingency figure of 20 per cent has been proposed for this scheme. This should be sufficient to cover any further inflationary pressures as well as provide contingency as the design develops and further details are identified.
- 5.3 It is proposed that the three boroughs contribute their own capital contributions to the project costs listed above, using the population share proportions set out in the agreement between the three authorities. This would represent the following contributions:

5.3.1 Barnet: £1,031,818 (39.31%)

5.3.2 Brent: £900,621 (34.31%)

5.3.3 Harrow: £692,561 (26.38%)

- 5.4 For Brent's share, there is currently no available capital funding for the Council to use. Officers are proposing the use of Strategic Community Infrastructure Levy (SCIL).
- 5.5 The Infrastructure Officers Working Group (IOWG) has endorsed the request to utilise SCIL for this project. With the 46,000 new homes in Brent expected to be delivered in the Local Plan period of 2019 to 2041 (notwithstanding the proposed increases for Barnet and Harrow), this project will assist in providing the required body storage infrastructure needed to meet the proposed increase in the number of deaths that will occur due to this increase in the number of residents. The Public Mortuary is situated at Northwick Park Hospital which is part of the Northwick Park Growth Area. Further, this expanded capacity will serve all of Brent so covering all growth areas listed in the local plan.

Revenue Implications

- 5.6 Total annual costs for the running of the mortuary service are recharged to IAA partner authorities based on population usage.
- 5.7 As per the terms of the current IAA, the budget contributions from LB Barnet and LB Harrow are set in Q4 of the previous year, with an initial invoice sent out in Q1 and a final invoice sent out in Q4.
- 5.8 An expansion project of this cost and size is not covered by the existing terms of the current IAA (which expires in Q3 2025). However, the parties to the IAA are currently negotiating the terms of a new IAA that is proposed will be in place which reflects the newly expanded service and the boroughs will be charged in line with the existing arrangement proportions.

6.0 Legal Considerations

- 6.1 Brent Council provide mortuary and post-mortem facilities under section 198 of the Public Health Act (1936). The mortuary has gained an excellent reputation with all stakeholders and employs a team of dedicated professionals who ensure all expected standards are met. Failure to meet license standards can result in reputational loss, fines and potentially imprisonment for serious breaches.
- 6.2 The NHS own the hospital that the Public Mortuary is situated. The Council has an existing lease for the current demise at a peppercorn rent. Officers would look to surrender the existing lease and enter into a new lease with the NHS for the existing mortuary and the additional undercroft space required to expand the mortuary service. The commercial terms of any new lease are yet to be agreed but they are expected to remain the same as the current lease. As detailed in recommendation 2.6 Cabinet is asked to delegate authority to enter into the new lease to the Corporate Director, Finance and Resources, in consultation with the Corporate Director, Resident Services and Lead Member for Environment, Infrastructure and Climate Action should the new lease exceed the Corporate Director's current approval levels as set out in Part 3 of the Council's Constitution, paragraph 11.

- 6.3 The Council is in a contract with Harrow and Barnet Councils so they can provide a mortuary service for their residents. These authorities pay into an agreement on a population share. It is expected the Council will not seek to vary this agreement to reflect the increased size of the provision but for Harrow and Barnet to contribute via their own CIL or capital funding contributions.
- 6.4 Should recommendation 2.3 be approved, the project will require the procurement of Low Value Contracts and a Medium Value Contracts. All procurement will be conducted in accordance with Contract Standing Orders.
- 6.5 Approval to procure and subsequently award the contracts will be sought from the relevant Corporate Director or Director in line with their delegated powers as set out under Part 3 paragraphs 9.5 and 9.7 of the Constitution.
- 6.6 CIL is a charge which can be levied by local authorities on new development in their area. It helps them deliver the infrastructure needed to support development. It can be used to fund a broad range of facilities including transport facilities, play areas, open spaces, parks and green spaces, cultural and sports facilities, healthcare, schools, district heating schemes and other community facilities.

7.0 Equality, Diversity & Inclusion (EDI) Considerations

- 7.1 The Council must, in the exercise of its functions, have due regard to the need to:
- a. eliminate discrimination, harassment and victimisation
 - b. advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and
 - c. foster good relations between persons who share a relevant protected characteristic and persons who do not share it,

pursuant to s149 Equality Act 2010. This is known as the Public Sector Equality Duty.

- 7.2 Under the Public Sector Equality Duty, having due regard involves the need to enquire into whether and how a proposed decision disproportionately affects people with a protected characteristic and the need to consider taking steps to meet the needs of persons who share a protected characteristic that are different from the needs of persons who do not share it. This includes removing or minimising disadvantages suffered by persons who share a protected characteristic that are connected to that characteristic.
- 7.3 The Public Sector Equality Duty covers the following nine protected characteristics: age, disability, marriage and civil partnership, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

7.4 There is no prescribed manner in which the Council must exercise its public sector equality duty but having an adequate evidence base for its decision is necessary. The proposals in this report have been subject to screening and officers believe that there are no adverse equality implications. Indeed, the proposals set out in this report aim to ensure that there is a suitable mortuary provision for all Brent residents and that their diverse needs are met.

8.0 Climate Change and Environmental Considerations

8.1 The proposed project will consider use of energy efficient materials and equipment to reduce the impact on the environment this expansion will create. Some of the structure of the building is already in place (e.g. undercroft will act as ceiling/roof) and so the project will also seek to reuse existing structures and materials in place to reduce the need for new and reduce materials going to landfill.

8.2 Any alternative options proposing the use of offsite storage will incur additional carbon emissions compared to the preferred option as the deceased will need to be examined at the mortuary before being stored elsewhere. This leads to unnecessary travel journeys and excessive carbon emissions.

9.0 Human Resources/Property Considerations (if appropriate)

9.1 There are no expectations that staffing levels would increase due to this project. External providers will be procured and appointed to carry out the consultancy service (design, contract management) as well as the works.

9.2 The Council would need to surrender the existing lease and enter into a new lease with the NHS to occupy the revised mortuary service space at the hospital site as well as the IAA agreement with Barnet and Harrow.

9.3 The venue for our current temporary mortuary contingency operation, within Brent Funerals Services at the Marsh Road depot (put in place as part of our HTA corrective action plan), is due to be handed over to Veolia, as a waste contract commitment in 2025. Given the likely gap between this exit and the proposed mortuary expansion, Brent Funeral Service and the temporary contingency operation must relocate to a new (and not yet secured) alternative base of operations as a short term and interim measure.

9.4 Brent has an obligation under both the Human Tissue Act (2004) and Inter Authority Agreement, to ensure we continue to provide a mortuary service (including contingency storage operations) whilst expansion plans and build phases are ongoing. Work is ongoing to seek and secure suitable premises for contingency storage operations. It is likely the cost can be met within existing revenue budgets and so not be an additional burden. 'Business as usual' mortuary operations are scheduled to continue onsite throughout the planning and build phase.

10.0 Communication Considerations

- 10.1 Officers will need to communicate with the project stakeholders, including the mortuary service partners and the NHS to ensure regular updates and communication materials are shared with them.
- 10.2 Owing to the sensitive nature of the site location, careful communications and consideration will be given to bereaved families who may need access to the public mortuary during the project's lifespan.

Report sign off:

Peter Gadsdon

Corporate Director of Resident Services