

Report Title	Initial Agreement for the Investment in Facilities to Support the Redesign and Modernisation of Primary and Community Care Services in Aberdeen City.
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### 1: Purpose of the Report

The purpose of the report is to update the IJB on the development of the Business Case for the Investment in Facilities to Modernise Primary and Community Care Services (PCCS) in Aberdeen City.

The Initial Agreement (IA) to replace the Denburn Health Centre in the Central Locality with a newbuild on a Greenfield site was approved by the Scottish Government Health and Social Care Directorate SGHSCD Capital Investment Group (CIG) in early 2014.

NHS Grampian agreed with the Scottish Government Capital Investment Group (CIG) to refresh the IA to take account of a number of changes in the strategic drivers locally and nationally, including ensuring the refreshed IA is compliant with the refreshed Scottish Capital Investment Manual (SCIM) Guidance published in early 2015.

While the work is being undertaken within the Health and Social Care Partnership and supports the IJB's strategic direction, issues of Capital remain the responsibility of NHS Grampian and, as such, approval by the NHS Board will be sought at its next meeting.

# 2: Summary of Key Information

**Appendix A** provides a summary of key information contained within the initial agreement. The initial agreement will be considered for approved for submission to the Scottish Government by the NHS Grampian Board at its meeting of the 1<sup>st</sup> of February 2018. The approved Initial Agreement will then be considered by the







Scottish Government Health and Social Care Directorate (SGHSCD) Capital Investment Group (CIG) meeting to be held on 27<sup>th</sup> of February 2018 (the Initial Agreement will be made public following formal notification of the decision by SGHSCD CIG).

In 2014, the key strategic drivers were the ongoing deterioration of the Denburn Health Centre which was also deemed functionally unsuitable for the provision of modern PCCS and the urgent need to respond to the growth in new communities.

Since that time, a number of key drivers have changed including; the establishment of IJBs and the publication of the Strategic Plan in 2016, the slowdown in the build out rates of emerging communities and the need to ensure the ongoing provision of General Medical Services (GMS) to the communities of Northfield and Mastrick.

The IJBs Strategic Plan (2016-2019) sets out the vision for the future delivery of services, whilst building on the work undertaken to redesign PCCS. The refreshed IA sets out a proposed service delivery model that will support the delivery of the IJBs strategic priorities:-

- Ensure a person centred approach;
- Support and improve the health, wellbeing and quality of life of our local population;
- Promote and support self-management and independence for individuals for as long as reasonably possible;
- Contribute to a reduction in health inequalities and the inequalities in the wider social conditions that affect our health and wellbeing (specifically in the communities of Northfield and Mastrick); and
- Support our staff to deliver high quality services that have a positive impact on personal experiences and outcomes.

The new service delivery model will also contribute to the delivery of the following big ticket items included within the IJB Transformation Plan;

- Acute care at home, by increasing the number of people supported to be cared for in their own communities;
- Management of Long Term Conditions, by ensuring the future service delivery model includes a Multi Disciplinary Team to support self management and management of Long Term Conditions;
- Modernisation of primary health and community care services, by delivery new roles in Primary Care, integrated health and care at Locality level and







ensuring the modernisation of the infrastructure to support the delivery of that vision:

- Organisational culture change, by ensuring new ways of working and shared used of buildings and clinical space; and
- Transformation of ICT, by investing in new technologies support triage models, paperlite offices, electronic records and innovative ways of consulting with patients at home and in their own communities as well as consulting with colleagues in the acute sector

Between May 2016 and October 2017, the Project Team worked with Clinical Leads, Practice Partners, Practice Managers, NHSG Planners, NHS Finance, clinical and professional colleagues across PCCS including Public Health, Community Nursing, Allied Health Professionals, Adult Social Work Managers and Patient representatives from the Denburn Health Centre to refresh the Strategic Case for Change and develop a proposed future service delivery model. In January 2017, the Denburn Medical Practice secured the commission to deliver GMS to the communities of Northfield and Mastrick. A key condition of the offer of contract was that the provider commits to the ongoing delivery of services within the communities of Mastrick and Northfield. The Northfield and Mastrick Practice is now an independent practice under the new name of the Aurora Medical Practice.

The proposed option, is to build a single new integrated Community Hub for the delivery of health and care services at a Greenfield Site in the Central locality in close proximity to the existing services in the communities of Northfield and Mastrick. This will be a purpose built facility with a Schedule of Accommodation designed to maximise utilisation of space and encourage increased community access through flexible use of the buildings. This will ensure the sustainability of the future service model from a 3 site to a 1 site model with patients getting access to equitable GMS provision within close proximity to the existing Denburn Health Centre (from wider Central Locality Practices, Northfield Surgery and Mastrick Clinic (from a new purpose built facility within close proximity to the existing Practices).

All newbuild options on a Greenfield site will be identified within close proximity to the communities of Northfield / Mastrick. The Initial Agreement sets out the investment for improved facilities to provide GMS to these communities. The aim moving forward will be to ensure patients are aware this is not the removal or reduction of service but an investment in purpose built facilities to extend the service delivery model to better meet the needs of the population, ensure the







sustainability of GMS in those communities and increase access to GMS for people in these communities who are currently registered with other GPs across the City (most of which are registered with City Centre Practices).

It is anticipated that the capital costs will be financed partly from NHS Grampian's formula capital allocation (£5m) supplemented by additional capital funding of £3.1m allocated specifically to support the project by the Scottish Government Health Finance Directorate. This is a significant investment in facilities to improve the wellbeing of the population and reduce health inequalities.

During the period of review the Project Team were unable to undertake consultation of communication with the Denburn / Aurora Medical Grouping patients and point of care staff to allow for the formal staff transfer and TUPE process to conclude and the new service to bed in. Following consultation with the new Aurora/Denburn Medical Group and the NHSG Public Engagement Officers, it was agreed to run additional 'drop in sessions' at the Denburn Health Centre and the first in a series of 'drop in sessions' at the Northfield Surgery and Mastrick clinic in early January 2018. In addition, 'drop in sessions' and 1-2-1 briefings were offered to Ward Councillors and MSPs to brief them on the submission of a refreshed Initial Agreement in February 2018.

A detailed programme of consultation will commence from February 2018 to engage the Denburn, Northfield and Mastrick patients and wider community on the following aspects to be further developed in the Outline Business Case and Full Business Case:

- Proposed service delivery model
- Benefit realisation for the community
- Design quality statement
- Site options
- Site design options

The programme of consultation will include emails, newsletters, social media communications, public events and invitations to workshops. A Community Engagement Group was established in November 2017 to develop the programme of work and the NHSG Public Engagement Officers are seeking to secure wider representation on that group from patients and public representatives from the Denburn Health Centre, Northfield Surgery and Mastrick Clinic. A briefing is being developed for circulation following the NHSG Board on the 1st of February 2018 to advise the public how they can engage in future public consultations. Community feedback will be included in the ongoing development of the Outline Business Case (OBC) and Full Business Case (FBC) up to the final submission to CIG in







September 2019.

#### **Appendices**

 NHS Grampian Infrastructure Investment Initial Agreement for the Investment in Facilities to Support the Redesign and Modernisation of Primary and Community Care Services in Aberdeen City (embargoed until the NHS Grampian Board on the 7<sup>th</sup> of December 2017).

#### 3: | Equalities, Financial, Workforce and Other Implications

Equalities, financial, workforce and other implications are considered robustly throughout the report and the full initial agreement.

### 4: Management of Risk

#### Identified risk(s):

The Risk Register (RR) will be finalised at the OBC stage and will set out more detail around the consequence, likelihood and specific action taken to manage or mitigate the risks. Risks for the IJB at IA stage have been identified in the following:-

- Securing a Greenfield site within close proximity to the existing services in the communities of Northfield and Mastrick
- Patient support for the proposed new service delivery model during OBC and FBC consultation
- Reviewing Practice boundaries and managing the redistribution of patients to GMS closer to their own communities
- Scottish Government Health and Social Care Directorate approval of additional £3.1m funding to ensure the case is deemed affordable at OBC and FBC stage and that the investment in infrastructure enables the IJB vision for the future delivery of Primary and Community Care Services

#### Link to risk number on strategic or operational risk register:

9: There is a risk that the IJB does not maximise the opportunities offered by locality working.







10: Workforce planning across the Partnership is not sophisticated enough to maintain future service delivery.

How might the content of this report impact or mitigate the known risks:

The project has a detailed Risk Register in place in line with SCIM Guidance which is reported to the North Corridor Programme Board.

#### 5: Recommendations

It is recommended that the Integration Joint Board:

- 1. Note the initial agreement as outlined in appendix A and that it aligns with the IJB's strategic vision for primary care, prior to submission to the Scottish Government Health & Social Care directorate Capital Investment Group in January 2018;
- 2. Note that the Initial Agreement will be presented to the NHS Board on the 7th of December and that a consultation process will now commence; and
- 3. Note that the Chief Officer chairs the programme board and that under Government requirements that the NHS Grampian Board is the decision maker for capital projects.

6: Signatures	
Judian Prost	Judith Proctor (Chief Officer)
AL	Alex Stephen (Chief Finance Officer)



