

minutes



Meeting LIFT (LOCAL IMPROVEMENT FINANCE TRUST) SELECT COMMITTEE

Date Monday, 19th May 2008 (commencing at 10.30am)

Membership

Persons absent are marked with `A`

COUNCILLORS

Chris Winterton (Chair)

Brian Wombwell (Vice-Chair)

A Mrs K Cutts
Andy Freeman
Pat Lally
Bruce Laughton

Edward Llewellyn-Jones
Martin Suthers OBE
Parry Tsimbirdis

Co-opted Members:

A Ms Shirley Inskip)
Mr Tom Turner) Patient & Public Involvement Forum
Mr Glen Swanwick)

Also present:

Susan Francis) Commission for Architecture and the Built Environment
Lucia Hutton) (CABE)

David Pearson - Strategic Director - Adult and Social Care and Health
Paul McKay - Service Director - Physical Disability and Independent
Living

Richard Hanson - Service Director - Property

MINUTES

The Minutes of the last meeting on Monday 21st April 2008 were agreed and signed by the Chair.

APOLOGIES FOR ABSENCE

None.

DECLARATIONS OF INTEREST BY MEMBERS AND OFFICERS

None.

USE OF LIFT BUILDINGS BY THE COUNTY COUNCIL

Richard Hanson, Service Director - Property, wished to make it clear that Nottinghamshire County Council was not a shareholder in the LIFT Company as previously reported.

David Pearson explained the history of Nottinghamshire County Council's position with regard to the LIFT Company. In 2002 Cabinet approved the Department's participation with the LIFT Company to Level 2 stage, with the option to become a shareholder at a later date but this had not been agreed. He noted the issues that continued to give cause for concern to the Department. Primarily, the LIFT Company's arrangements for raising capital, since the County Council was able to raise capital at more economical rates than the Lift Company; and secondly, the County Council's overall property strategy was to provide integrated services in buildings offering flexible use that could be adapted as required. He added that, unless there was a good business or service case, the County Council would not enter into any arrangement with LIFT Company.

Mr. Pearson also gave a full account of the County Council's involvement, and subsequent decision not to proceed, with space allocated at Stapleford Care Centre. Initially the Department had participated with the PCT and the LIFT Company to provide health care centres within local communities, and improve the provision of health care services particularly for children and the elderly. This had been a requirement of the Strategic Services Development Plan and officers from the Department had been involved at the early planning stages. However, changes to the service model and departmental reorganisation meant that Social Services and Health staff needed to integrate the services they provided, and ensure resources were used more efficiently using established County Council buildings. As there was some uncertainty both locally and nationally and no clarity on future developments, discussions had taken place with the PCT and it had been agreed that the Department would not continue its involvement in Stapleford Care Centre. The LIFT Company had been informed of this decision but continued with the original plans.

Richard Hanson said that since 2004 the County Council had worked closely with the PCT to integrate services and improve the utilisation of its buildings. He pointed out the concerns relating to Stapleford Care Centre in particular, including how value for money could be achieved when the actual costs were almost twice the original quote, the 25 year lease that was inflexible in terms of space and the ability to change use as required, and a lack of information from the LIFT Company regarding the terms of use.

Councillor Wombwell noted the involvement of officers from the department in the planning stages and suggested that earlier withdrawal may have saved unnecessary expenditure. Councillor Suthers pointed out the time taken to construct a building from the planning stage to final handover, and expressed concern about the decision to proceed with the provision of extra floors without any firm agreement to take up the designated space. Councillor Laughton commented that it would prove difficult to lease the space since costs have risen so much, and noted that this responsibility rested with the PCT.

Councillor Winterton was concerned about access for patients and staff to the care centre and asked if the department had been consulted about DDA compliance, or whether there were any procedures in place to check this. David Pearson replied that discussions at the planning stage had included Local Authority requirements for access and flexibility in a modern working environment.

David Pearson said that a meeting had been arranged with John Horton of NCtPCT to discuss future requirements for Adult and Children Services. They would also cover funding arrangements and the need for resources to be used more effectively to provide value for money.

Councillor Llewellyn-Jones pointed out the need to focus on the current problems in operational buildings, the mistakes that had been made, how to correct them and improve use in the future.

Councillor Winterton thanked David Pearson, Paul McKay and Richard Hanson for attending and answering questions.

NATIONAL BEST PRACTICE – COMMISSION FOR ARCHITECTURE AND THE BUILT ENVIRONMENT (CABE)

Susan Francis, Special Advisor for Health - CABE, gave a presentation that was based on the results of a recent countrywide survey carried out by CABE on behalf of the Government. The survey had looked at primary and community healthcare facilities provided by LIFT Companies and focused on the design and whether they were fit for the purpose intended.

Ms Francis explained how a representative sample of 20 projects had been assessed for functionality, build quality and impact, with the emphasis on urban and social integration and the patient environment. Findings on functionality included consideration being given to confidentiality in reception areas and groupings where size and fittings were well provided, with appropriate adjacencies essential for the efficient operation of services. Consulting and examination room configurations mostly conformed to good practice but there were some instances of poor layout and space standards where this reflected on the service provided and the working environment. Improvements had been made in the provision of storage which included lockers for staff and spaces for paper records, although there was some concern about the ability to adapt this space when the NHS converted to electronic records in the future.

The survey had shown a noticeable amount of underused and unused space which could prove costly for PCTs in terms of rent and facilities management costs. Access to facilities was another area that could be improved with only 2 out of the 20 schemes scoring 'excellent' for wheelchair access on pedestrian routes, despite the likelihood that mothers with pushchairs, the elderly and temporary or permanently disabled patients would need good access to their local health services.

Ms Francis went on to explain the results of the survey with regard to build quality, including materials used externally and internally, and the overall impact of reception areas, corridors and surrounding areas on the patients view of service provision.

There were some areas of concern, however, including the need for changes to be managed more effectively, not enough learnt from previous projects, a lack of good sites, the role of cost in bidder selection, the time pressure on design teams, the importance of a good brief and procedures in place for automatic checks on buildings for improvement.

The survey had made several recommendations such as; setting achievable benchmarks, rigorous evaluation of design proposals and developing a strong project team, the introduction of better training for users, post occupancy evaluation and improving the guidance on design. In order to develop capacity and avoid under use, the guidance team were to develop a planning tool that would anticipate use and services, that would enable users to share space, timetabling activities to improve overall utilisation.

Finally, Ms Francis explained that, since models of care appeared to change every 10 years, buildings needed to be flexible and robust and should improve patient experience whilst providing more effective places for people at work.

Councillor Wombwell thanked Ms Francis for her excellent presentation. He agreed that expertise was required in order to provide a good brief at the planning stage, in particular, he pointed out that Stapleford Care Centre still had difficulty with access to, and use of, the upper floors due to the size of the lifts. Glen Swanwick reported that, when this had been pointed out, the PPIF had been informed by the Architects that it was impossible to include larger lifts.

Councillor Llewellyn-Jones asked who should be included in consultations on the brief. In reply, Ms Francis highlighted the importance of understanding how the building would be used by patients, carers and staff and suggested different levels of participation by various local stakeholders, and include the Local Authority and the PCT who understand policy, the requirements of service provision and financial restrictions.

Tom Turner pointed out that the National Service Framework proposed that PPIFs should be involved at every stage. He noted that the survey had approached contractors, clinicians and staff but felt that opinions from the public and patients had been ignored. Ms Francis reminded him that the survey was to evaluate quality of buildings, and gave an assurance that CABE was committed to achieving improvements for patients and other users. Lucia Hutton added that the post occupancy evaluation was specifically geared to the experiences of users of the facilities.

Councillor Winterton suggested that, particularly with regard to public buildings, lessons needed to be learned from previous builds and attention paid to environmental sustainability in the current climate: that expertise was essential in the early planning stage. Ms Francis agreed, and added that it was possible for good people to design innovative buildings without experience, as long as they were well briefed and informed about requirements.

Councillor Winterton thanked Ms Francis and Ms Hutton for the presentation which had been most informative.

FURTHER INFORMATION AND REVIEW CONCLUSIONS

Matthew Garrard reported on the letters from Rebecca Larder, Nottingham University Hospitals Trust, Louise Newcombe, Bassetlaw PCT and background information from Eleri de Gilbert, Chief Executive Nottinghamshire Community Health, on the Polyclinic model.

Councillor Wombwell noted issues that needed to be addressed such as, the differences between the conception of a build and what had actually been achieved; very few one stop shop services; GPs concerned about their own issues; no joint working between hospitals and community care; and a lack of engagement with clinical services. Similarly, the development of secondary care schemes and care services has been abandoned with multiple practices working independently. Other issues for inclusion were 'out of hours' and 'extended hours' provision, under utilised space, and the need to raise rental income.

Glen Swanwick expressed concern that some of the information provided was misleading, with particular regard to renal dialysis, which was now provided at the community hospital.

Councillor Mrs. Kay Cutts suggested that buildings should fit the requirements of the community with integrated services providing outreach clinics as proposed. Councillor Suthers reported that there appeared to be some conflict between primary and secondary care, and rural setting as opposed to urban setting. He added that the situation was not made easier by the time taken from the conception of a building to its final handover.

Councillor Llewellyn-Jones pointed out that the provision of outreach clinics depended on the consultant being willing to visit the community, as patients will go wherever they are sent.

Matthew Garrard referred to the work programme and reported that representatives of NCtPCT would attend the next meeting. He noted that Paddy Tipping MP had been appointed Chair of Nottinghamshire LIFT and Members agreed to invite him to the next meeting on 23rd June 2008.

The meeting closed at 3.30 pm

CHAIR

Ref: LIFT Select.19 MAY 2008