

Property Strategy 2023 – 2025



CONTENTS

- Part 1 Introduction**
- Part 2 Background**
- **Demographics**
 - **HSCP Property List – Current Accommodation**
 - **HSCP Workforce**
- Part 3 Progress Achieved to Date**
- Part 4 Objectives**
- **HSCP Wide Priorities**
 - **Locality Plans**
- Part 5 Primary Care & Community Services**
- **Primary Care Property Requirements**
 - **General Practice**
 - **Older People Mental Health Service**
 - **Care at Home Services**
- Part 6 Adult & Mental Health Services**
- **Primary Care Mental Health**
 - **Joint Learning Disability Team**
 - **Community Mental Health Team**
 - **Alcohol & Drug Recovery Services**
- Part 7 Children Services**
- **Children & Families**
 - **School Nursing**

- **Criminal Justice Services**
- Part 8 Hosted Services**
 - **Oral Health – Primary Care**
 - **Specialist Children’s Services**
- Part 9 Moving Forward Together**
 - **Moving Forward Together Implementation**
- Part 10 Finance**
 - **NHSGG&C Capital Funding**
 - **Capital Allocation - HSCP**
 - **HSCP Accommodation Reserves**
 - **Revenue Implications**
 - **Premises Improvement Funding**
 - **Developer Contributions**
- Part 11 Sustainability**
- Part 12 Governance**
 - **Integrated Joint Board**
 - **Property and Assets Group**
- Part 13 Risk**
 - **Primary Care Programme Delivery**
 - **GP Infrastructure**
- Annexe 1 Timeline**
 - **Appendix 1**
 - **Appendix 2**

INTRODUCTION



Caroline Sinclair

Chief Officer

**East Dunbartonshire
HSCP**

As Chief Officer of East Dunbartonshire's Integration Joint Board, I am pleased to present the second HSCP Property Strategy for the period 2023 – 2025. This will align to our Strategic Plan 2022 – 2025 and will set out our aspirations for modern, fit for purpose accommodation from which to deliver health and social care services to the population of East Dunbartonshire and in support delivery of our strategic priorities.

A key element within this strategy is our ambition to deliver services to people within the right setting and in the right location, as close to local communities as possible. There have been significant changes over the last few years in how we work with and support service users and patients and this strategy seeks to build on these new ways of working and have accommodation that supports working with people in a multi-faceted way.

The HSCP has had to respond to a number of key policy initiatives and has seen an expansion in the workforce and services it delivers requiring an increase in our accommodation capacity. An integrated, partnership approach to how we work remains at the heart of our approach to service delivery and this is reflected in this Property Strategy.

Caroline Sinclair

Chief Officer, East Dunbartonshire Integration Joint Board

BACKGROUND

The Scottish Government's Financial Planning Guidance for Health and Social Care Integration states that:

“The Chief Officer of the Integration Joint Board is recommended to consult with the Local Authority and Health Board partners to make best use of existing resources and develop capital programmes. The Integration Joint Board should identify the asset requirements to support the Strategic Plan. This will enable the Chief Officer to identify capital investment projects, or business cases to submit to the Health Board and Local Authority for consideration as part of the capital planning processes, recognising that partnership discussion would be required at an early stage if a project was jointly funded.”

East Dunbartonshire Health and Social Care Partnership (HSCP) strives to deliver a broad range of services to the population of East Dunbartonshire from high quality, accessible properties which can meet a variety of health and social care needs. The HSCP does not own any properties across East Dunbartonshire, and utilise either East Dunbartonshire Council (EDC) or NHS Greater Glasgow & Clyde (NHS) assets to carry out health and social care functions.

The HSCP first produced a Property Strategy in May 2018 and this second iteration of our plan will align with the HSCP Strategic Plan Priorities 2022 - 2025 by:-

Empowering People through

- Reducing inequality and inequity of outcomes by ensuring services are accessible and delivered close to local communities

Empowering Communities through

- Building local Integrated Teams
- Modernise Day Services

Post Pandemic Renewal through

- Understanding and responding to the impact of the pandemic by creating space within accommodation to deliver services safely, adhering to ventilation, infection control and other requirements learned during the pandemic.

Maximising Operation Integration through

- Right Care, Right Place: Urgent and un-scheduled health and social care redesign by ensuring there is capacity within local accommodation to deliver services in the right setting as close to local communities as possible in line with the NHSGGC Moving Forward Together strategy.

Workforce and Organisational Development through

- Supporting the wellbeing of the health and social care workforce by having modern, fit for purpose accommodation which provides a positive working environment and supports staff to work flexibly in line with hybrid working policies
- Equipping the workforce and workplace during and after the pandemic by embracing the work practices developed during the pandemic and building on these through improvements to accommodation to facilitate a different way of working

Medium Term Financial Planning and Strategic Planning by

- Maximising Available Resources by ensuring existing accommodation is used to its full potential and, first and foremost, supports frontline service delivery to our patients and service users and consider the priorities for increasing accommodation capacity across the HSCP area.
- Delivering Financial Sustainability by maximising hybrid working opportunities which facilitates better use of current accommodation to deliver frontline and clinical services

Collaborative Commissioning and whole system working by

- Supporting Primary Care improvement by developing accommodation solutions to expand clinical services in delivery of the GP Contract.

Infrastructure and Technology through

- Modernising health and social care delivery through improvements to accommodation to achieve modern, fit for purpose premises from which to deliver high quality services
- Maximising the potential of digital solutions to reflect new ways for individuals to access and receive services through a digital first approach with buildings adapted to meet and facilitate the digital challenge.

The estate utilised by the HSCP requires to develop to meet evolving guidance and legislation, be fit for purpose to meet changing need, and support how we wish to deliver health and care services.

The key policy drivers and of relevance to the development of the HSCP Property Strategy- include:-

- NHS GG&C Property Asset Management Strategy (PAMS)
- NHS GG&C Primary Care Property Review
- East Dunbartonshire HSCP Strategic Plan (2022 – 2025)
- East Dunbartonshire HSCP Workforce and Organisation Development Plan 2022-2025
- East Dunbartonshire HSCP Medium Term Financial Plan
- East Dunbartonshire Council Asset Management Plan
- COVID-19 response
- NHS Scotland Property Appraisal Manual and associated Estate Asset Management (EAMs) alongside wider premises guidance
- The new GP Contract and GP Premises National Code of Conduct
- Moving Forward Together, NHSGG&C's vision for health and social care services
- East Dunbartonshire Council Sustainability and Climate Change Framework
- Scotland's Climate Change Plan 2018 -2032

Covid-19 and post pandemic recovery have provided an opportunity to relook at how we support clinical and non-clinical service delivery, including use of digital solutions to consult with service users with the utilisation of video conferencing to meet online as well as face to face consultations. During this period we used our premises to support a blended working approach, where staff work from our buildings and at home. In maintaining options for on and off site working, we need to ensure that we meet service needs and retain flexibility in our approach to use of our office and touchdown accommodation.

There has been some movement of staff in late 2022 and early 2023 to maximise team adjacencies and integrated working, as well as ensure sufficient touch down space.

It is anticipated, that as we continue to move to a business as usual approach and recovery from the pandemic, the HSCP and parent organisations will continue to review and enhance the use of digital and hybrid working solutions which will continue to inform the future shape of our accommodation needs. Digital access to services, enables service users to engage online with our services and can maximise clinical time, removing the need to travel to patient homes or clinic settings. This approach needs to take into consideration that not all service users can access digital appointments due to lack of devices, confidence and ability to engage in this way. Staff groups also require training to make best use of developing technology.

The HSCP will continue to make best use of our assets and where there is an additional need will seek opportunities to utilise council or NHS estate. There may

be a need to look to other premises solutions working closely with East Dunbartonshire Council or NHSGG&C on all available options.

The Property Strategy will cover a 3 year period from 2023 - 2025, however will detail short (0 – 3 years), medium (3 years +) and long term (8 years +) clinical and non-clinical accommodation priorities and the vision that the HSCP has in addressing these needs.

The HSCP will update on progress annually with regular reports going to our Integrated Joint Board for review and approval.

Demographics

The estimated population of East Dunbartonshire is 108,900 at 30th June 2020, according to the National Records Scotland (NRS) Population estimates published in June 2021. GP Practice population in East Dunbartonshire is around 110, 000 people.

National Records for Scotland (NRS) population projections indicate a likely increase in the region of around 8,300 people (7.6%) over the next 25 years if current trends continue.

East Dunbartonshire, is less deprived than other authorities in Scotland, however there are specific areas that fall below the Scottish average with some areas in the lower quartile for deprivation indicators.

Of note is that the population in East Dunbartonshire has a longer than average life expectancy for both male and females in comparison to the Scottish average.

Life Expectancy						
Area	Males			Females		
	2017-2019	2018-2020	2019-2021	2017-2019	2018-2020	2019-2021
Scotland	77.1 years	76.8 years	76.5 years	81.1 years	81.0 years	81.8years
East Dunbartonshire	80.5 years	80.2 years	80.0 years	84.0 years	83.4 years	83.5 years

Source: National Records of Scotland – Life Expectancy for Administrative Areas within Scotland 2019 – 2021

East Dunbartonshire has also seen an increase in new housing developments, along with the potential for developments and population moves as projected in the Local

Delivery Plan. These contribute to a net migration into East Dunbartonshire with more people requiring to access health and social care services in the local area.

Between 2020 to 2022, there was an increase of 193 households. East Dunbartonshire had an average household size of 2.31, higher than the Scottish average of 2.12. The table below sets out projections for new housing developments over the next 7 years.

Locality & Area	Capacity	2020-21	2021-22	Programming 2022-23	2023-24	2024-25	2025-26	2026-27	2027-28	2028-29	Post 7 Year
West											
Balmore	10					10					
Bearsden	185			23	17	63	15	2			65
Milngavie	128					4	44	50	30		
East											
Bishopbriggs	362	7	54	82	72	51	76	20			0
Clachan of Campsie	6		3	3							0
Kirkintilloch	811	24	52	193	82	103	130	97	62	22	46
Lennoxton	347							25	73	60	189
Lenzie	168	14	39	47							68
Torrance	79							25	22	16	16
Twechar	155					4	4		10	16	121

Completion of the potential developments detailed above will increase demand on primary care and HSCP services where East Dunbartonshire has limited facilities to expand to meet service delivery.

HSCP Property List – Current Accommodation

A list of properties utilised by the HSCP are detailed below, noting ownership, whether there is a lease agreement in place and the HSCP's future plan for each premise. All of the sites below are primary delivery areas, with the exception of Milngavie Enterprise Centre and NE Sector Offices. Primary delivery areas are utilised for provision of service user and/or clinical activities as well as providing staff accommodation.

Site	Owned by EDC/NHSG G&C or Other	Lease	Tenure	Objective	Comment
WEST LOCALITY					
Milngavie Clinic	NHSGG&C	No	N/A	Feasibility Study to remodel the site, increasing clinical and interview space. Provide touch down space for HSCP and visiting staff. Accommodation requires to be found for health visiting team located in the clinic to allow conversion to clinical space.	Ongoing 2023. Redraft of drawings, and recosting of scheme to be progressed for review and business case submission to GGC Capital Groups. Revisit and refresh business case proposal for a health and care facility in the West Locality.
Milngavie Enterprise Centre	EDC	Rental of Suite 12, Craigallian and Craigmaddie Suite	2 years initially	Medium to long term creation of West Locality Hub. Relocate staff from this site into other office/touchdown accommodation should this develop.	
EAST LOCALITY					
Lennoxton Hub	EDC	Yes - health rent first floor	N/A		Relocation of HV team to Southbank House, will release a small office with 9 desks.

Woodlands Resource Centre	NHSGG&C	No	N/A	Feasibility Study to remodel the site, increasing clinical and provide quiet therapeutic rooms for use of mental health services. Improve and increase parking provision.	Ongoing 2023. Redraft of drawings, and recosting of scheme to be progressed for review and business case submission to GGC Capital Groups.
Kirkintilloch Health and Care Centre	EDC	Yes - NHS lease Ground & First Floor	N/A	Feasibility Study to remodel Ground Floor to maximise clinical space. Moves of office accommodation across 1st and 2nd floors for HSCP teams.	Capital Project support assigned, will progress from August 2023 to review requirements and then commission design team to provide feasibility drawing and costing for ground floor space.
NE Sector Offices (Glasgow HSCP)	NHSGG&C	No	N/A	Review of utilisation of office space for HSCP staff, Oral Health and HR. Will progress August 2023	Office space may be made available for central HSCP teams. Requirement to provide space for School Nurse Team
Southbank (Children and Families)	EDC	No	N/A	Health Visiting Team for East Locality to fully relocate once IT connections are established.	
Kilsyth Road (Criminal Justice Team)	EDC	No	N/A	Adaptations to be made to create space for group work programmes as a statutory commitment.	
Union Street Offices	Archdiocese	Yes	?	Part of Day Services Review	

HSCP Workforce

The HSCP Workforce and Organisation Development plan covers the same period as our Strategic Plan 2022 – 2025. The plan details the challenges the HSCP face to have our workforce in the right place at the right time.

The HSCP had 973 staff delivering services at 31 March 2023, of the 973 staff, 585 are directly employed by East Dunbartonshire Council and a further 388 are employed by NHS Greater Glasgow and Clyde.

Our workforce is distributed across care groups including: Adult Services, Older People Services, Children Services, Criminal Justice, Business Support, Pharmacy and Prescribing, Health Improvement, Oral Health and Specialist Children Services. Staff work from a variety of settings, often a main base setting and work from other HSCP and citywide settings. The HSCP Property Strategy needs to develop to meet the evolving needs of our workforce.

PROGRESS ACHIEVED TO DATE

The Annual Delivery Plan for 2023/24, setting out the annual priorities to support delivery of the HSCP Strategic Plan 2022-2025, was presented to our Integration Joint Board and approved on 23rd March 2023. This also reported on completion of infrastructure and technology developments achieved as part of the 2022/23 Annual Delivery Plan at the end of March 2023.

Initiative	Strategic Plan Priority	Strategic Plan Commitment	National Outcome
Initiatives Successfully Completed By End 2022/23:			
Identify a staff base in the West locality	Empowering Communities	Building local integrated teams	1, 2, 3, 4, 5, 6, 9
Review accommodation arrangements in line with Scottish Government guidance and alongside Health Board and Council policies	Post Pandemic Renewal	Understanding and responding to the impact of the pandemic	1, 4, 5, 8, 9
Develop and implement an organisational development plan in support of staff	Post Pandemic Renewal	Understanding and responding to the impact of the pandemic	1, 4, 5, 8, 9

orientation back to buildings			
Develop and implement an HSCP Property Strategy	Infrastructure and Technology	Modernising health and social care facilities	2, 5, 7, 9
Redesign of HSCP website	Empowering People	Improving information and communication	1, 2, 3, 4, 5, 6, 7, 9

A review of East Dunbartonshire HSCP estate was undertaken by the NHSGG&C Capital Team with Hub West and Higher Ground Healthcare Planners. The project was undertaken across all of the Glasgow HSCP's at the request of NHS Greater Glasgow & Clyde with the aim of developing a Primary Care Estate Strategy (PCES) to produce a portfolio of accommodation needs and requirements. Both NHS and EDC Estates teams engaged in this review, with site visits to HSCP properties, desktop reviews and data analysis on the utilisation of space. Consideration was given to the potential for properties to adapt to demands and agree the strategic importance of the HSCP premises they occupied. The HSCP fully engaged in this review and a final report was made available in October 2022.

The work commissioned by the NHSGGC Capital Team will test and support any future business case for site optimisation, reconfiguration or hub proposal for new facilities for the HSCP. The outcome of the review will feed into the Infrastructure Investment Strategy for NHSGG&C. The final report is available on request, and recommendations are detailed on Appendix 1 (Timeline).

A full Primary Care Estate Property Strategy (PCES) inclusive of all 6 Glasgow HSCP's is anticipated in 2023, as part of the Moving Forward Together Strategy being developed by NHSGG&C.

OBJECTIVES

The key objectives of the HSCP Property Strategy 2023 - 2025 are:-

- To gain best value from the properties at the disposal of the HSCP, including, but not limited to NHS, EDC and GP accommodation.
- To ensure that health and social care services are provided in and from fit-for-purpose buildings
- To enhance provision of health and social care services in local communities
- To align accommodation provision to support key strategic and policy requirements
- To progress towards the development of appropriate, modern facilities that enable co-location of team members and services as well as alignment with GP Practices

- To rationalise our estate, where possible, in order to reinvest savings into frontline services
- To maximise the potential for digital solutions across our infrastructure, by delivering a comprehensive Digital Strategy and Action plan whilst ensuring equality of access for everyone.

HSCP Wide Priorities

There are a number of key priorities for the HSCP to progress.

- Development of a revised business case for an integrated health and social care centre proposal for the west locality
- Maximize the use of our current property portfolio in support of our key strategic objectives and in line with hybrid working policies across our partner agencies
- In collaboration with partners, identify accommodation options, both clinical and non-clinical space for the co-location of the West locality community health and social care teams in Bearsden/ Milngavie
- Support the delivery of the Moving Forward together agenda and the re-location of clinical services currently delivered within an acute setting closer to local communities
- Work in collaboration with partner agencies to align priorities and support delivery of partner body priorities
- Assessment of HSCP and GP practice accommodation and how this could support the delivery of the HSCP Primary Care Improvement Plan including delivery of Community Treatment and Care Service, Vaccination Transformation programmes and Pharmacotherapy Hub (5)
- Work with Capital Planning, Premises Teams and EDC to progress non HSCP premises options for delivery of HSCP programmes, where there is no HSCP or GP Practice accommodation available.
- Support feasibility studies for Woodlands Resource Centre, Milngavie Clinic and Kirkintilloch Health and Care Centre Ground Floor. Agree design options, seek costings and prepare business cases to seek capital or HSCP funding for these schemes.
- Support development of clinical and non-clinical accommodation for Specialist Children Services including regional developments, provision of inpatient West of Scotland premises and community service delivery points.
- Support development of clinical and non-clinical accommodation for Oral Health Services.
- Progress moves of health visiting staff to Southbank House as agreed with EDC.
- Continue to review non clinical accommodation use, maximizing space and continue to support options for hybrid working.
- Scope and appraise the premises implications of the further implementation of the Older People's Day Care Strategy and the Strategic Review of Learning Disability Services

- Continue to support the Operational Building Management Groups for each HSCP premise.
- Establish and review capital planning and minor works priority schemes for the HSCP.
- Consider and progress any centre/clinic accommodation issues
- Review accommodation requests by internal and visiting services to maximise access to services across East Dunbartonshire.

Locality Plans

In addition to HSCP wide priorities there are specific priorities to be progressed within each Locality in East Dunbartonshire.

West Locality

Integrated Health and Care Centre

The HSCP aspires to have an integrated health and care facility in the West Locality. A previous bid in 2020 was unsuccessful and with previous weighting of proposals based on deprivation, was ranked relatively lowly against other competing HSCP bids in areas of greater deprivation. However this locality has unique risks to primary care provision that require to be included in a revised business case.

A large health and social care development would enable the HSCP to further integrate health and social care services along with multiple GP Practices, and third sector services for the population of Bearsden and Milngavie. There would be economies in having one facility in comparison to the current facilities which do not allow opportunities to expand. A new centre would be a sustainable long term aspiration for service delivery in the West Locality and a revised proposal will be progressed, with support from NHS GG&C Capital Planning Team.

Milngavie Enterprise Centre

Non clinical premises in Milngavie have been established and suitably adapted for the use of HSCP staff within the West locality. This is a short to medium term solution, on a rental basis. This option supports local integrated working and opportunities to remodel and enhance clinical accommodation in Milngavie Clinic whilst a long term solution can be progressed. Staff relocated to this site include District Nurses and the Community Rehabilitation Team formerly located at Milngavie Clinic. There is touch down space for Advanced Nurse Practitioners and Diabetic Specialist Nurses as well as meeting and storage space on the ground floor.

Milngavie Clinic redevelopment

A feasibility study to maximise clinical and non-clinical space at Milngavie Clinic,

concluded in March 2023. Two design options were produced for the HSCP to consider giving an increase in clinical and interview rooms, redesign of reception, waiting and touch down areas. Indicative costs to deliver Option 1 was £1.7m or Option 2 at £1.9m. Given there is limited GCC capital funding, the HSCP has been working with the Capital Team to refine the requirements to produce a revised design with works split over subsequent financial years. There may be works that could be undertaken via Minor Works processes rather than full construction which would reduce the costs. On production of a preferred design option, there will be a requirement to seek local or board wide agreement to develop the required business case in support of capital investment or an alternative to this.

Milngavie/Bearsden Scoping

NHSGGC Capital Team commissioned a feasibility study of a large retail unit situated in Milngavie Town Centre and a few options were offered for consideration using the ground and first floor of the premise. A business case for capital funding was approved in September 2022 via GGC Capital, given the significant cost to remodel the site to ensure delivery of health services. The total capital approved was £1.829m split over two financial years.

A review of the construction costs by current design team and those previously provided as part of the feasibility study, showed a significant increase in costs of £1.8m to £3.2m, an increase of £1.4m (78%). As there was some concerns about the initial period of lease indicated by the landlord the project was unable to progress as the investment and short lease term meant that the scheme was not financially viable. After a pause, where the design team had to halt work on the design and feasibility, the landlord has now indicated a longer lease term of up to 15 years with a break at 10 years to support the additional investment into the premises.

As the financial ask is likely to be over £3m a revised business case will need to go through the board governance groups for review and approval, requesting part or full funding by NHSGG&C and the project being split over financial years.

Revenue costs including rent/rates could be met in the short term (3 years minimum) from HSCP reserves, with an expectation that these will form part of the overall PCIP costs once future funding allocations are confirmed or this will form part of financial planning for the HSCP in future years.

East Locality

Bishopbriggs Retail Units

Two adjoining retail units in the Bishopbriggs/Auchinairn locality were identified as available and suitable to deliver services from. The lease agreement for the units is nearing completion and offers a tenure of 10 years with a lease break at 5 years,

with the tenant giving landlord 6 months' notice.

The HSCP has been provided with refreshed design plans which will deliver 4 high quality treatment rooms in one location, meeting standard room sizes, and infection control and ventilation requirements for newly created treatment rooms. Although this is less clinical space than first anticipated, the 4 rooms will offer 40 clinical sessions per week which provides 60% increase in provision than the current sessions in place via the practice hosted model.

On review of the construction costs the current design team and those previously provided as part of the feasibility study has shown an increase in costs from £0.7m to £1.24m to enable this to deliver health services. Given the longevity of the lease and the site potential as a medium to long term plan, the HSCP were keen to progress the development despite the increase in costs. The HSCP submitted an additional ask for capital funding and this was taken through GG&C Capital Planning Group in early March 2023, who approved the increased funding requirement.

Total NHS GG&C Capital Approved	£1.24million
Revenue Costs (rent/rates)	£88.8k per annum

There will be recurring rental and rates costs which will be met from HSCP budgets.

It is anticipated the project will take up to 50 weeks and that completion will be August 2024.

North East Sector Offices (review)

The HSCP will continue to review how space is utilised across all of its premises, this will include a review of use of office and touchdown space for teams located in North East Sector Offices both in the short term and longer term which may include some consideration of options to redevelop clinical and non-clinical space with Glasgow HSCP.

Southbank House

Children and Families Services have relocated to Southbank House in Kirkintilloch, with moves of the health visiting team for this area relocating once IT connections can be established.

Woodlands Resource Centre redevelopment

Running in tandem with the Milngavie Clinic study, a feasibility study was undertaken for Woodlands Resource Centre. The aim was to maximise clinical and non-clinical space at the centre, to use this site as a quiet therapeutic environment. One preferred design option was produced, however indicative costings to deliver the changes were circa £1.7m. The Capital Team have provided some support to review the design to refine the requirements and costs, with option to produce a revised design plans and costing which will be brought back for final review and taken to HSCP and NHS GG&C Capital Forums/Primary Care Improvement for funding.

KHCC feasibility study

The HSCP has received approval via the GCC Capital Group to progress a feasibility study to reconfigure the ground floor of Kirkintilloch Health and Care Centre to maximise use of clinical space and consolidate storage space. An initial meeting has taken place with the Capital Team, with a further meeting arranged to refine the brief before a design team will be commissioned.

Day Service Redesign (East and West Locality)

Across all of the HSCP's day service redesign approaches, there has been a continued focus on developing community-based support alternatives to formal day care with employment opportunities and programmes developed in line with an employability pathway and the continued growth and development of community assets.

Following a period of consultation on a new model for the delivery of social support options for older people, the Social Support Strategy for Older People 2023-2028 was developed and approved.

The first year of the Strategy involves undertaking activities to commission and develop the agreed day centre model, moving to two rather than three formal centres, and to progress the growth in informal community-based social supports.

This will facilitate the release of leased accommodation within Kirkintilloch from which these services are currently delivered and requires the re location of office based staff to alternative accommodation.

PRIMARY CARE & COMMUNITY SERVICES

Primary Care Property requirements

In 2016 the Scottish Government and the British Medical Association published the new General Practice Contract, which included a Memorandum of Understanding (MOU) detailing service delivery by HSCPs or by centralised health board teams.

Therefore the HSCP has responsibility for implementing the GP contract through the Primary Care Improvement Plan. There are three core commitments which the HSCP are required to progress which are Vaccination Transformation Programme (VTP), Pharmacotherapy and the Community Treatment & Care (CTAC) Service.

To deliver on the primary care priorities and commitments of the Primary Care Improvement Plan (PCIP) programme, the HSCP still require a significant number of clinical rooms as well as touchdown and office space to deliver on commitments of the PCIP programme:

1. Bearsden and Milngavie cluster

At this time there is no PCIP Community Treatment Rooms within the cluster.

- 10 treatment rooms required
- Touchdown space

2. Kirkintilloch and Lennoxtown cluster

At this time there is the equivalent of 3.2 PCIP community Treatment Rooms across the week within KHCC as well as the use of 1 Treatment Room within Lennoxtown Hub. In late 2023 a further room will be provided for the service following an upgrade to a vacant clinical room in KHCC.

- 5 Treatment rooms required
- Touchdown space within the KHCC

3. Bishopbriggs/Auchinairn cluster

- Bishopbriggs Retail Units will provide 4 Treatment Rooms on completion – August 2024. There will be a requirement for 3 further rooms.
- Touchdown space

4. Vaccination Transition Programme (VTP)

- The Vaccination Transition Programme (VTP) will also require sessional space in each cluster area to deliver the 2-5 flu vaccination programme.

5. Pharmacotherapy Hub

- The service will require up to 16 desks ideally (short/medium term) ideally in one location within the HSCP. Long term plans see this requirement may see this increase to 20 desks.

Pharmacotherapy and Community Treatment and Care (CTAC) services are included as core services within the General Medical Services contract meaning practices are not contractually obliged to offer these service, unless they have an existing arrangement with the Health Board.

Pharmacotherapy and CTAC delivery are a key priority for delivery in 2023-24.

The HSCP has been unable to fully deliver these services due to financial and accommodation requirements, with 38% of CTAC services being delivered; 24% for Treatment Room Nurses and 43% for Health Care Support Worker. 42% delivery for Pharmacotherapy services has been achieved. VTP future delivery has yet to be confirmed. Therefore a key focus within this strategy will be to enhance / expand clinical space within which primary care services can be delivered where there is funding available to support the service delivery aspect of these services.

General Practice

There are 15 GP premises within East Dunbartonshire, 2 of which operate from HSCP (EDC) premises (one at KHCC and the other from Lennoxton Hub).

In the West Locality, GP owned or leased premises are in converted 19th century buildings or re-purposed residential properties which offer no opportunities to expand or remodel to meet increasing need.

The East Locality presents a slight better picture, with a number of GP practices being in purpose built facilities, however there remain limited opportunities for expansion.

11 GP Practices are owned by the Practices, 2 are private lease arrangements and 2 are lease agreements with East Dunbartonshire Council.

The East Dunbartonshire HSCP Primary Care Property Review determined the following risks:-

- West Locality
 - 1 x GP Practice with physical capacity challenge
- East Locality
 - 1 x GP Practice with physical capacity challenge

- Varying suitability for short, medium and long term delivery of health care based on condition, location and adaptability.

It was noted that East Dunbartonshire HSCP GP Practices are unique in terms of the volume of GP services delivered from GP owned/lease premises covering 91% of the general practice population. Only 2 GP Practice operate from NHSGG&C owned/leased premises, serving 9% of the population.

Older People Mental Health Services

There is a requirement to have interview and clinical space in the West Locality, all clinics take place in the East Locality in Woodlands Resource Centre. Remodelling of space within Milngavie Clinic would enable provision of touch down space and service appointments to be scheduled in the West Locality.

Care at Home Services

All care at home services currently run from the East Locality (KHCC) including those delivered into the West Locality. The desire would be to have services delivered from the West Locality which would meet a number of strategic priorities such as service efficiency, reduced carbon footprint, and integrated working with other health services delivering in this area.

ADULT & MENTAL HEALTH SERVICES

Primary Care Mental Health

Primary Care Mental Health (PCMHT) Services are able to see patients in both the West and East Locality, the service requires quiet therapeutic space from premises that are trauma informed. Whilst Kirkintilloch Health and Care Centre can offer more space, the current configuration of space on the ground floor has often been uncondusive to the types of therapy being offered, due to issues with soundproofing, lighting and the flow of the building past therapy rooms. Remodelling and increasing the number of Interview rooms at Woodlands Resource Centre may provide a more conducive environment for therapeutic interventions. There has also been significant investment in mental health services locally through Action 15 MH monies which has seen an increase in staffing numbers and services delivered in the area.

The service would like to provide appointments in the Bishopbriggs area, however there are no suitable therapeutic spaces available for the service to use.

Joint Learning Disability Team

The Joint Learning Disability Team are looking to expand services to service users and relatives by provision of wheelchair weight clinics and physical health clinics. To date there has been limited offerings of these services from Kirkintilloch Health and Care Centre.

The service is investigating some space for Psychology provision, which includes looking at Kirkintilloch Health and Care Centre or Woodlands Resource Centre.

Community Mental Health Services

Community Mental Health Services provide medic, psychology and duty services predominantly from Kirkintilloch Health and Care Centre. There has been a recent upgrade to a dedicated Treatment Room space. It would be advantageous to provide services from a site in the West Locality, with rooms meeting Royal College of Psychiatry standards and in a trauma informed environment.

The HSCP are exploring shared space options with other areas, for interventions that require specific provision (Therapeutic Kitchen) given the competing need for services, when space within buildings is at a premium and in high demand.

The service are looking to deliver further interventions for Occupational Therapy, Nursing, Cognitive Behaviour Therapy and Peer Support Worker access across the HSCP. The provision of these services will be similar to primary care mental health, including providing trauma support to people with multiple trauma and co-morbidities. Most of these appointments will be on a face to face basis rather than digitally via Attend Anywhere system.

Alcohol and Drug Recovery Services

East Dunbartonshire HSCP Alcohol and Drug Recovery Services provide clinics from Kirkintilloch Health and Care Centre, Lennoxton Hub and Milngavie Clinic. However delivery of Medication Assisted Treatment (MAT) standards and provision of support so that people are able to remain in treatment for as long as requested mean that we require sufficient delivery points offering, treatment, interview and trauma informed care. MAT Standards state that all people accessing services have the option to start MAT from the same day of presentation and remain in treatment for as long as they need.

CHILDREN SERVICES

Children and Families

The health visiting team for the East locality will relocate to Southbank House once IT connections can be established. This will ensure integrated working across children services social work and health visiting.

School Nursing

School Nursing Team are working from temporary accommodation in Milngavie Clinic, this is temporary as space will be remodelled into clinical rooms. It is proposed that the School Nursing team relocate to office accommodation in NE Sector Offices at Stobhill providing a more central location for the team. This change is anticipated in late 2023.

Criminal Justice Services

The service works from Kilsyth Road work space, which provides a discreet standalone facility where service users can be seen in a trauma informed environment. The facility has a workshop space which is fully utilised, and there is a further development planned with some remodelling to maximise the space available.

HOSTED SERVICES

Oral Health – Primary Care

The Oral Health Directorate do not provide clinical services from any premises within East Dunbartonshire HSCP. The service released a clinical room within KHCC to allow the HSCP to utilise the space which will be reconfigured for Treatment Room use.

The service will be fully involved in the review of the North East Sector Office which provides accommodation and meeting space for the General Manager for the Oral Health Directorate, the Primary Care Senior Management Team and support services. The services within Primary Care Dental are the Public Dental service, the Oral Health Improvement team and the General Dental Service Administration team.

Specialist Children Services

Specialist Children's Services (SCS) consists of Child and Adolescent Mental Health (CAMHS) and Specialist Community Paediatrics (SCPT) teams. SCS delivers secondary care within Health and Social Care Partnerships (HSCPs) across NHSGGC. NHSGG&C agreed that there should be a single system management arrangement for Specialist Children's Services (SCS) which includes CAMHS and Specialist Community Paediatrics Teams. This brings together, into a single management and financial structure, the currently delegated Tier 3 HSCP SCS services and the Board wide Hosted Tier 4 services. This transferred over to East Dunbartonshire HSCP in April 2023.

This arrangement detailed that:-

- Services will continue to be delivered locally, and by existing teams
- Services will remain located within their current HSCPs
- Services will continue to work closely in partnership with HSCP colleagues

The table below details where CAMHS and SCPT teams are located. SCS management team work from Templeton Business Centre within Glasgow HSCP.

HSCP	Number of CAMHS Teams	Number of SCPT Teams
Glasgow City New Gorbals Health and care centre Woodside Health and care centre Templeton Business centre Bridgton Health centre West Centre	4xCAMHS (North/South/East/West)	4xSCPT (North/South/East/West)
Renfrewshire Aranthrue Centre	1xCAMHS	1xSCPT
East Renfrewshire Barrhead health and care centre	1xCAMHS	SCPT provided from Glasgow HSCP
Inverclyde Greenock Health and Care centre	1xCAMHS	1xSCPT
West Dunbartonshire Vale of Leven hospital	1xCAMHS	1xSCPT
East Dunbartonshire Stobhill hospital	CAMHS and SCPT services provided by Glasgow City HSCP, other than SLT	

SCS has 760.3 whole time equivalents (WTEs) members of staff.

The service has requested support to progress planning to create an Adolescent Psychiatric Inpatient Unit for the West of Scotland, adjacent to the existing adolescent unit which is Skye House situated on the Stobhill campus. In discussion with Glasgow HSCP, Munro Ward on the campus has been identified as available to create an interim IPCU facility whilst a longer solution is sought. A request was tabled and agreed at the Capital Planning group in March 2023. The Scottish Government has committed funding to this facility.

SCS has circa 100 staff located in the West Ambulatory Care Hospital and in line with the demolish plan these staff will need to be relocated. Predominately the staff cover the whole Board area making their location flexible. Staff based in the Templeton Centre will also require to be relocated due to the provision of the New Parkhead Hub. The HSCP will work with the NHSGGG&C Board who will co-ordinate accommodation centrally for staff and services for both of these sites.

MOVING FORWARD TOGETHER

Moving Forward Together Implementation

The NHSGGC Board approved the Moving Forward Together (MFT) Vision for Health and Social Care services as the blueprint for the development of future models of care on 24 June 2018.

Health and social care service delivery in Greater Glasgow and Clyde is changing, to provide care in an effective, safe, modern and person centred way. This will help meet the needs of the population now and in the future. Moving Forward Together is dependent upon flexible, adaptable, and compliant estate and infrastructure, which is in the right place and aligned to service needs.

Discussion with representatives from the MFT team have identified that any future Primary Care property strategy must respond to the objectives of MFT but also act as a key property enabler for it, recognising that buildings – especially in local communities - will have a major impact on enabling the shift required in the balance of care proposed.

<https://www.movingforwardtogetherggc.org>

FINANCE

NHSGG&C Capital Funding

In 2023/24 Capital Funding has been secured to support improvements to accommodation developments in non-traditional premises in Bishopbriggs/Auchinairn. A bid for funding to progress development of a retail unit In Milngavie will be taken forward in September 2023, with an ask to split across 2023/2024, 2024/2025 and beyond.

There is a feasibility study underway in Kirkintilloch Health and Care Centre, Milngavie Clinic and Woodlands Resource Centre which will have a financial ask in 2023/24 and should schemes progress to business case a further ask will be required in future financial years.

Capital Allocation - HSCP

Capital funding identified for the HSCP via NHSGG&C for year 2023/2024 is £41,500 as part of an annual allocation to partnerships. The allocation of this funding has been taken to the Property and Assets Group for approval. There will be an ask of £17k used to fund feasibility/design schemes including remodelling of the ground floor of Kirkintilloch Health and Care Centre, and further design proposals for Woodlands Resource Centre and Milngavie Clinic remodelling. £17.5k will be committed for upgrade of one room in KHCC to provide a Treatment Room for Community Treatment and Care Service use.

Funding of £7k will be allocated to support the feasibility/design of retail unit in Milngavie.

HSCP Accommodation Reserves

The HSCP has created an earmarked accommodation reserve of £3 million to fund accommodation redesign requirements as set out within the Property Strategy. Dependant on NHSGG&C funding bid outcomes and costs for each of our feasibility and remodelling schemes we will require to allocate funding across financial years to support schemes as described in the HSCP Property Strategy.

Revenue Implications

There will be recurring revenue implications to support rental and rates of leased premises, which will come from a number of HSCP budgets including Primary Care Improvement, and HSCP Accommodation budgets. This is likely to include office

accommodation at Milngavie Enterprise Centre, Bishopbriggs Retail Units x 2 and any future development of external premises for Milngavie/Bearsden.

Premises Improvement Funding

An allocation is made each year from NHS GG&C from underspends on other GMS budgets to support improvements to GP premises through a bidding process. Given the financial pressure on GMS budgets this may not materialise during 2023/24. The HSCP holds an earmarked reserve to support the development of GP premises of £228k and this is available to support improvements to GP premises and more targeted investment in delivery of the HSCP strategic priorities. The purpose of these funds are to:-

- Funding to assist with premises improvement and to support Health Boards to expand primary care into non-traditional primary care settings by leasing high street and retail units.
- The making of Premises Improvement Grants to GP contractors who own their premises or lease them from private landlords;
- The continued digitisation of paper GP records to release space for clinical, training and administrative uses;
- Modifications for the purposes of improving ventilation; and
- Increases to the space available in NHS owned or leased premises for primary care multi-disciplinary teams

Developer Contributions

As part of the development of East Dunbartonshire Council's Local Development Plan, a process for securing developer contributions was introduced to support for homes and care home developments as a contribution towards primary care provision within each cluster area. Contributions will apply where the development is located within a GP cluster area that has been identified as being either already over capacity or will exceed capacity as a result of housing development sites allocated within Local Development Plan 2.

The capacity in each GP cluster area has been calculated by taking the total current list size and adding the number of potential new patients generated by development and comparing this combined figure with the number of patients that the cluster can accommodate using the East Dunbartonshire average list size of 1,630 patients per individual GP. A percentage payment for the number of bedrooms in the property in the development needs to be applied.

The contributions will be spent on physical infrastructure to increase primary healthcare capacity within the relevant GP cluster area through either of the following:

- New or reorganised clinical and associated support space directly for use by the additional GP's
- Equivalent new or reorganised multi-functioning space providing supportive and complementary healthcare services where this will have a direct improvement on GP capacity in the cluster area.

SUSTAINABILITY

The HSCP works closely with NHSGG&C and East Dunbartonshire Council to ensure environments align to sustainability, climate change, carbon targets and how we use our premises for our service users and staff.

Any remodelling of premises, new developments and changes to accommodation and service delivery points will be considered.

East Dunbartonshire Council will be progressing installation of electronic car charging points at Kirkintilloch Health and Care Centre to support renewal of the care at home fleet cars, with an installation of 10 charging points in 2023.

GOVERNANCE

Overall responsibility for the implementation and delivery of the HSCP Property Strategy rest with the HSCP. There are reporting mechanisms via existing governance and capital planning arrangements of NHSGG&C and East Dunbartonshire Council.

Integrated Joint Board

The Chief Officer of the Integration Joint Board is recommended to consult with the Local Authority and Health Board partners to make best use of existing resources and develop capital programmes. The Integration Joint Board should identify the asset requirements to support the Strategic Plan. This will enable the Chief Officer to identify capital investment projects, or business cases to submit to the Health Board and Local Authority for consideration as part of the capital planning processes, recognising that partnership discussion would be required at an early stage if a project was jointly funded.

Regular reports, on a no less than annual basis, will be taken to the Integrated Joint Board on progress with HSCP Property Strategy and Accommodation updates.

Property and Assets Group

The HSCP has a Property and Assets Group, which is chaired by the Chief Finance and Resources Officer who has a remit for property and assets. Group members include stakeholders from the HSCP, East Dunbartonshire Council and NHSGG&C as well as Trade Union representatives. The HSCP do not own or lease their own property. Property is either owned or leased by NHSGGC or EDC and occupied by the HSCP.

The Property and Assets Strategy Group will report to the SMT, with any issues or support requirements escalated to the Glasgow HSCP Capital Property Group/Capital Planning Group and EDC Property and Assets Group.

The Group will also receive regular updates and reports from the site management/project groups.

The group meets on a bi-monthly basis, when key pieces of work are underway this will increase to a monthly meeting.

RISK

The HSCP has detailed accommodation as an ongoing risk on the Corporate Risk Register (HSCP13). This was last reviewed at June 2023, and detailed the inability of the HSCP to secure appropriate accommodation in the West Locality to deliver effective integrated health and social work services in that area due to the lack of capital funding available to progress development of an integrated solution.

In addition the competition / prioritisation of need across NHSGGC and other HSCP priorities taking precedence is a significant factor for East Dunbartonshire HSCP, where there is an inability to effectively evidence need in context of NHSGGC priority matrix i.e. deprivation.

The NHSGG&C Primary Care Property Strategy is under development and will be included as part of Moving Forward Together, which will set out board priorities for primary care accommodation.

The HSCP will continue to regularly engage with colleagues within the Council / NHS board to scope options for progressing strategic priorities, with the GG&C HSCP Capital Planning Group established to review board wide HSCP priorities.

Backlog maintenance costs in maintaining the current estate may increase as properties age and require significant investment to maintain operational sites, there will also be reactive costs if maintenance is not undertaken. A similar forecast will be seen across the GP estate.

There has been an increase in the resource and capacity of the Capital and Minor Works teams for NHSGG&C to support the ask of our HSCP and across the Glasgow HSCP's. Both of these teams provide expert input to our programmes and unless they have capacity we would be unable to progress with the necessary changes to our buildings.

Primary Care Programme Delivery

Options for refurbishment / extension across HSCP and GP premises in the area remain very limited due to nature and location of current estate which has implications for delivery of programmes such as PCIP and ADRS/Mental Health.

GP Infrastructure

In the West Locality there are risks identified as premises may not be suitable for medium to long term use, particularly in the Bearsden/Milngavie area, Bishopbriggs and Auchinairn areas. There is a lack of space to expand or to adapt practices to meet future need, and lack of funding available for a West Health and Care Centre which could help mitigate issues in this locality. This should be viewed as a unique and significant risk for the HSCP. Milngavie Clinic, the only HSCP facility in this locality would be unable to provide accommodation even in part to meet additional demand.

TIMELINE

Appendix 1

Short Term (0-3 years)

- 1) Support operational re-alignment of existing services/staff where feasible to make better use of existing available property resources based on the data collected and reviewed.
- 2) Seek formal support from the Capital Planning & Premises Team to undertake project support and development activities.
- 3) Review and re-present the augmented argument for a new "West Locality Health & Care Complex", supported by an amended Schedule of Accommodation (S of A), intended primarily to address those issues identified in the original "Milngavie Health and Care Centre" paper (presented as a component of the previous NHSGG&C prioritisation process) but with an added understanding of the substantial risk associated with existing premises in the area and space requirements as highlighted by this review.
- 4) Finalise work already underway relating to the alternative means of delivering "shared satellite space" across the HSCP area to physically

increase capacity available to support the delivery of clinical services and support short-term contractual and policy obligations whilst mitigating those risks identified associated with GP owned/leased premises in the area.

- 5) Secure the funding required to implement those preferred solutions identified as essential in the short-term.
- 6) Seek the inclusion of the preferred strategic option(s) identified in local HSCP plans within the next appropriate NHS GG&C capital prioritisation process to understand the actual timetable for development and/or any remedial actions required.

Short to medium-term term (0 – 10 years)

- 1) Seek appropriate local and Board-wide agreement to develop the required business case(s) in support of capital investment or an alternative to this.
- 2) Develop the business case(s) agreed as being required to support infrastructure developments in response to the findings of the option appraisal conducted and in the context of the relevant NHS GG&C Capital Planning & Prioritisation process/project programme.
- 3) Develop the detailed briefing documentation required to support the development of detailed designs for any capital projects approved, ensuring that these can deliver the required range of services for the required planning period (including more detailed assumptions relating to changing demand and capacity requirements)
- 4) Implement any remedial actions required in reflection of projected differences between strategic capital investment programmes and local demand/facilities (if required).

In the medium to long-term (3 – 10 years plus)

- 1) Use “otherwise essential investment” and new monies secured through the capital business case process to maintain, develop, refurbish and/or construct the physical infrastructure associated with approved business cases in line with the overarching NHS GG&C Primary Care Estate Strategy and place-based investment approach.

This is likely to include, most notably:

The replacement of Milngavie Clinic, +/- local GP Practices, (The proposed “West Locality Health & Care Complex” or “hub”).

The provision of HSCP “shared satellite space” in the Bishopbriggs/Auchinairn area or an alternative to this agreed through an option appraisal process.

HSCP Capital & Minor Works Timeline

Appendix 2

Site	Service	Timeline	Finance Source	Expected Completion subject to approval and funding	Capital or Minor Works
Bishopbriggs Retail unit	Primary Care Improvement Plan – Community Treatment and Care	2023/2024	NHSGG&C Capital Funding	August 2024	Capital
Milngavie Retail Unit	Community Treatment and Care Community Health and Care Services Teams	Business case to go through Capital Forums in November 2023	To be confirmed –	2024/2025	Capital
Woodlands Feasibility	Older Peoples Mental Health	To be confirmed	To be confirmed	2024/2025	Minor/Capital work
Milngavie Clinic Feasibility	Mental Health Alcohol and Drug Recovery	To be confirmed	To be confirmed	2024/2025	Minor/Capital work

	Primary Care Mental Health Older People Mental Health Moving Forward Together – Acute Services				
Kirkintilloch Health and Care Centre Feasibility	Community Treatment and Care Services Mental Health Alcohol and Drug Recovery Primary Care Mental Health Joint Learning Disabilities Physiotherapy Podiatry Moving Forward Together – Acute Services	To be confirmed	To be confirmed	To be confirmed	Minor/Capital work

	GP Practice				
North East Sector Offices – review of accommodation/feasibility	Oral Health Community Health and Care Services School Nursing	Late 2023	To be confirmed	To be confirmed	To be confirmed
Upgrade of room to Treatment Room – KHCC	Community Treatment and Care Service	Late 2023	Capital funding – EDHSCP 2023/2024	Late 2023	Minor Works
Upgrade of room to Treatment Room - KHCC	Alcohol and Drug Recovery Service	Late 2023	Mental Health funding – 2023/2024	Late 2023	Minor Works
West Locality Capital Planning Business Case for a Health and Care Centre	Primary Care GP Practices 3 rd Sector HSCP Services (all)	2023 – 2025	Capital/Scottish Government funding	2023/2024	Capital