

Light beginning to shine

Making sure premises suit the needs of primary care in the 21st Century

Since my article in the Summer edition, premises continues to be much discussed within the primary care and health care sector, particularly as this is a key part of the infrastructure required for there to be transformation in the delivery of services. There is much talk of the need to move non-urgent services from the secondary care sector into the community, with primary care being the best place to accommodate and provide such services.

Certainly one of the intentions behind the Primary Care Infrastructure Fund was to support applications from practices that were seeking to undertake transformational changes in service delivery. In my experience, many of the applications made for first year funding (2015/16) have largely been improvement grants to facilitate relatively modest changes to premises. The number of new medical centres that have been approved is small, although hopefully this will change during the remaining three years of the Fund. Practical problems remain, notably the issue of funding often being approved on a capital funding basis whereas the central requirement is for revenue funding. Certainly the procurement of new medical centres in recent years (and presumably in the future) is by way of third party developers developing a new medical centre with the doctors' practice occupying it by way of a lease. Capital funding is contradictory to this with revenue funding being required to give developers and investors the underpinning revenue support to make new medical centres viable.

This question has been left for Clinical Commissioning Groups (CCGs) to answer. The more proactive CCGs are increasingly aware of this point. With CCGs now being required to prepare an estate strategy, the issue of funding is one that will need to be grappled with.

Despite this, encouraging signs have been



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emerging in recent weeks. Certainly the number of enquiries about the development and procurement of new medical centres has increased. This is in geographical patches but there are early indications that activity is about to start increasing. Significantly, some of these more recent enquiries have been instigated by CCGs approaching medical practices, particularly those that have expressed interest in relocating previously and where land has been identified that is suitable for the provision of a new medical centre. There may be opportunities emerging for relatively swift approval of new NHS medical centres where a development site has been identified and planning consent is unlikely to be contentious.

It remains likely that the identification of development sites will consider mixed use developments. The most likely scenario for this is where large scale housing developments are being proposed and where there is a requirement for the infrastructure to be imposed to serve the needs of the

expanding population. Health care is a key component of the infrastructure. Sometimes it is possible for new infrastructure to be provided as "enabling development", therefore it may be possible for the land for the medical centre to be subsidised from the overall development. This can sometimes be negotiated by way of Section 106 Agreements, however these can sometimes raise complications regarding how the capital payment for the developer can be used to support the revenue cost of a new medical centre.

There will be solutions for overcoming these funding issues and these solutions will vary depending on the scale of the development and the extent of the healthcare activity being considered. It is increasingly likely that there will be more than just a GP practice occupying a new medical centre. Whilst a pharmacy has often been included, and will continue to be so, there may also be other occupiers, possibly including secondary trusts seeking to work in conjunction with the primary care providers in the community.

Certainly the composition of health care will change and property, likewise, needs to be flexible and adapt to ensure that service delivery meets the needs of the 21st Century. ●

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