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<b>Report To:</b>	<b>Health &amp; Social Care Committee</b>	<b>Date: 5 January 2017</b>
<b>Report By:</b>	<b>Brian Moore Corporate Director, (Chief Officer) Inverclyde Health and Social Care Partnership (HSCP)</b>	<b>Report No: SW/06/2017/HW</b>
<b>Contact Officer:</b>	<b>Helen Watson Head of Planning, Health Improvement &amp; Commissioning</b>	<b>Contact No: 01475 7125285</b>
<b>Subject:</b>	<b>GREENOCK HEALTH AND CARE CENTRE</b>	

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## 1.0 PURPOSE

- 1.1 The purpose of this report is to advise the Health & Social Care Committee on the progress of the new Greenock Health and Care Centre.

## 2.0 BACKGROUND

- 2.1 Funding has been agreed by the Scottish Government to provide a new health and care centre. The Scottish Government approved the Initial Agreement at the Capital Investment Meeting on 15<sup>th</sup> March 2016.
- 2.2 The agreed site for the new development is the former Wellington Academy site on Wellington Street. Site Investigations are currently being progressed and the final site investigation report will be made available early in the new year.
- 2.3 The new Health and Care Centre is regarded as hugely significant for the local population, as the existing health centre facilities are old and unfit for purpose in meeting the changing needs of patients in the years ahead.
- 2.4 Through the project board and delivery group we arranged four Stakeholder Engagement Sessions to allow staff and community representatives to engage with the planning and design stage and influence what success might look like for a new health and care centre.

The first event took place on 20<sup>th</sup> May when the architects presented sketches of what a building may look like on the Wellington site. The Healthcare planner presented information around the principles of a new health and care centre whilst gathering local knowledge. The second event on 27<sup>th</sup> May allowed us to visit other health and care centres: Hunter Health Centre, East Kilbride, Houldsworth Health Centre, Wishaw, Barrhead Health Centre, Possilpark Health Centre and recently a few staff were able to visit the new Eastwood Health and Care Centre which is the exemplar design. The third event involved the Architects presenting their findings from the feedback received from both previous workshops. The group were shown mock-ups of building models and discussion around site constraints. At the final workshop Hoskins Architects presented a design of what the building may look like on the site after lengthy discussions with stakeholders. A preferred option has now been agreed and shared with the Integration Joint Board members, Project Board and Delivery Group.

- 2.5 As part of the planning stage we have established an Arts and Environment Group. The group involves staff and community representatives to:

- Be proactive and supportive with arts and health communication initiatives;
- Enhance the health centre environment;
- Build relationships and involve the local community, staff, patients and their families;
- Green the healthcare environment with inclusion of living plants and involvements in landscaping (where appropriate);
- Provide a strategic direction in relation to arts and ongoing creative and performing arts activity influencing health and wellbeing at the new Greenock Health and Care Centre.

2.6 The project programme dates for the new health and care centre are detailed in the table below:

Outline Business Case	Full Business Case	Financial Close	Construction	Completion
Early 2017	October 2017	December 2017	May 2018	November 2019

2.7 The NHS Greater Glasgow & Clyde hub Project Steering Group has established governance and reporting structure which will be implemented to deliver this project.

The Inverclyde Project Board reports to the NHSGGC Hub Steering Group which oversees the delivery of all NHSGGC hub projects, through the HSCP Director. The local Delivery Group is chaired by Helen Watson, Head of Service and includes representatives from other Project Boards within NHSGGC, Facilities, Finance and Hubco.

### 3.0 RECOMMENDATIONS

3.1 The Health & Social Care Committee is asked to note the progress to date.

**Brian Moore**  
**Corporate Director, (Chief Officer)**  
**Inverclyde HSCP**

## 4.0 HSCP OFFICE RATIONALISATION

4.1 The new development has presented opportunities to rationalise some elements of the HSCP estate and bring related services together at a single location. There is also a wider piece of work ongoing to complete an accommodation plan within the HSCP incorporating both local authority and community health buildings. A key driver for the development is for it to be revenue neutral.

The new development will not only assist with the new Health and Social Care Partnership working but will enable full engagement for GP practices to be involved in the integration agenda.

The new development will be one of the HSCP key sites with integrated teams co-located, and through the rationalisation of the HSCP estate this will result in the decommissioning of 1 local authority and 4 health buildings which will release revenue for re-investment in the new centre.

As part of the rationalisation process the following sites are incorporated within the final options:

- Relocating local authority and community health staff from the Inverclyde Centre for Independent Living to the new development in Greenock. It is also proposed that site would be disposed of to release capital receipt.
- Staff currently based in the CAMHS building adjacent to the current hospital site would also be relocated to the Greenock new health and care centre development.
- Speech and Language Therapy staff currently based in Port Glasgow Health Centre would also relocate to the Greenock new development. This would create some space capacity within the Port Glasgow Health Centre and staff currently based in Boglestone Clinic will relocate to Port Glasgow Health Centre.
- Learning Disability and Drugs Service Teams from Cathcart Centre will relocate to other HSCP accommodation.

Based on the above proposals the schedule of accommodation has been completed which the design team has used to develop outline options.

## 4.2 PROJECT PROGRAMME

The project programme dates for the new health and care centre are detailed in the table below:

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## 5.0 IMPLICATIONS

### Finance

#### 5.1 Financial Implications:

This is a Health Board funded project.

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From (If Applicable)	Other Comments

### Legal

5.2 There are no legal issues within this report.

### Human Resources

5.3 There are no human resources issues within this report.

### Equalities

5.4 Tackling inequalities is one of the key drivers in our proposed operating model, so we anticipate a positive impact for those groups that experience a more negative experience of care and outcomes.

Has an Equality Impact Assessment been carried out?

X

YES (see attached appendix)

NO- This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

### Repopulation

5.5 The new Health and Care Centre could have a positive effect on re-population, demonstrating investment in the area for the future, and top quality health and care facilities.

## 6.0 CONSULTATION

6.1 This report has been prepared by the Chief Officer, Inverclyde Health and Social Care Partnership (HSCP) after due consultation as noted within the body of the report.

## 7.0 LIST OF BACKGROUND PAPERS

7.1 None.