

Report To: Inverclyde Integration Joint Board **Date:** 6 November 2018

Report By: Louise Long
 Corporate Director, (Chief Officer)
 Inverclyde Health & Social Care Partnership **Report No:** IJB/54/2018/HW

Contact Officer: Helen Watson
 Head of Strategy and Support Services **Contact No:** 01475 715285

Subject: GREENOCK HEALTH AND CARE CENTRE PROGRESS

1.0 PURPOSE

1.1 The purpose of this report is to advise the Integration Joint Board on the progress of the new Greenock Health and Care Centre.

2.0 SUMMARY

2.1 Funding has been agreed by the Scottish Government to provide a new health and care centre. A Full Business Case (FBC) has been developed which was agreed by the members of the NHSGGC Capital Planning Group on 6th September 2018 and NHSGGC Corporate Management Team on 13th September 2018. The FBC has been submitted to the Finance and Planning Committee for 2nd October 2018, the NHSGGC Board Meeting for 16th October 2018 and finally the Scottish Government Capital Investment Meeting on 13th November 2018. Once agreed by the Scottish Government Capital Investment Group, the project can proceed to financial close, and construction can begin shortly thereafter.

2.2 The new facility is planned to open in 2020 replacing the current, ageing Greenock Health Centre in Duncan Street. The new centre will aim to provide modern health and social care premises and will expand the range of services available from the current health centre.

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

FBC	Financial Close	Construction	Completion
13 November 2018	29 November 2018	December 2018	August 2020

2.4 A Travel Plan has been developed which outlines the various methods of travel, including walking, cycling, the use of public transport and highlighting the health benefits around active travel.

3.0 RECOMMENDATIONS

3.1 The Integration Joint Board is asked to note the progress to date.

4.0 FULL BUSINESS CASE

4.1 The Full Business Case (FBC) describes the background, the status quo, the proposals for improvement, the service changes required to deliver these and the benefits that will be realised in doing so. The proposals for the Health and Care Centre focus on service provision in Greenock and its surrounding areas which are recovering from significant post-industrial change. That will seek to find ways to improve services to meet current and future demands. It will also support regeneration of the physical and economic environment to help bring about significant health improvements in the longer term. Expected benefits are summarised as:

- Making services more accessible to the patient population.
- Increase capacity to meet future projections.
- Improving service integration.
- Delivering services from accommodation that is safe, welcoming, efficient and fit for purpose.
- Contribute to physical and economic regeneration.

4.2 TRANSFORMING CARE IN GREENOCK

Greenock is the largest town within Inverclyde, and like much of the West of Scotland, is characterised by persistent socio-economic deprivation and poor health outcomes. The development of the Inverclyde Health and Social Care Partnership (HSCP) builds on established joint working that was fostered under the previous CHCP arrangements, but the new HSCP also affords an opportunity for us to take stock of progress to date and our priorities for the future. The FBC details our thinking in terms of the most important issues that shape our strategic priorities. Health inequalities are central. We know that many of the people who need health or social care support are often disinclined to approach or engage with our services, and only accept support when their condition(s) are quite advanced. This means that opportunities for supported self-management or health improvement at an earlier stage of disease progression can often be missed. By bringing health and social care services together in the new centre, we hope to enable people to access the right help at an earlier stage.

There has already been significant rationalisation of public sector buildings in Inverclyde to modernise delivery options and streamline the citizen's journey. The next logical step is to modernise health and social care premises and create opportunities to further improve access to services, integrating the wider Community Planning Partnership aspirations of improved outcomes, won through social and economic regeneration that increases the life opportunities and health outcomes of those most vulnerable to experiencing inequalities. The FBC sets out a proposal and outline costs for the development of a health and social care facility for Greenock and the wider community of Inverclyde. The development will be led by the Health and Social Care Partnership, which is responsible for the provision of all health and social care services in Inverclyde.

4.3 PROJECT PROGRAMME

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

FBC	Financial Close	Construction	Completion
13 November 2018	29 November 2018	December 2018	August 2020

4.4 TRAVEL PLAN

The Travel Plan will inform staff and service users of the many ways to travel to

the new site ensuring there are viable alternatives for travelling. The plan promotes the use of public transport and active travel, ie walking and cycling. The focus of the plan is on commuting and business travel elements within an organisation. A Travel Plan can also have a number of benefits including the environmental benefits to reducing car use leading to reduced congestion, pollution and noise as well as improved air quality. With active travel, the health benefits can help to reduce stress, obesity, weight problems and improve wellbeing. The plan also outlines the cycle to work scheme, car sharing scheme and opportunities to purchase annual zonecards with repayments through NHS staff salaries.

5.0 IMPLICATIONS

5.1 FINANCE

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

Annually Recurring Costs / (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From	Other Comments
N/A					

LEGAL

5.2 There are no legal implications arising from this report.

HUMAN RESOURCES

5.3 There are no specific human resources implications arising from 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?

	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.
--	---

5.4.1 How does this report address our Equality Outcomes?

Equalities Outcome	Implications
People, including individuals from the above protected characteristic groups, can access HSCP services.	Yes
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	Yes
People with protected characteristics feel safe within their communities.	Yes
People with protected characteristics feel included in the planning and developing of services.	Yes
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	Yes
Opportunities to support Learning Disability service users experiencing gender based violence are maximised.	Yes
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	Yes

CLINICAL OR CARE GOVERNANCE IMPLICATIONS

5.5 There are no clinical or care governance implications arising from this report.

5.6 NATIONAL WELLBEING OUTCOMES

How does this report support delivery of the National Wellbeing Outcomes?

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	Yes
People, including those with disabilities or long term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community	Yes
People who use health and social care services have positive experiences of those services, and have their dignity respected.	Yes
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	Yes
Health and social care services contribute to reducing health inequalities.	Yes
People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.	Yes
People using health and social care services are safe from harm.	Yes
People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	Yes
Resources are used effectively in the provision of health and social care services.	Yes

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 BACKGROUND PAPERS

- 7.1 Architect, Artist Sketches and Drawings.

APPENDIX 1

Inverclyde Health and Social Care Partnership Greenock Health and Care Centre





