

# Newark and Sherwood District Council Ollerton Public Services Hub

## Feasibility Study Report

Version 5.0  
3<sup>rd</sup> August 2018

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## EXECUTIVE SUMMARY

Newark & Sherwood District Council (NSDC), along with Ollerton & Boughton Town Council (OBTC) and Newark & Sherwood CCG (NSCCG), is considering the potential to develop a Public Services Hub in Ollerton, serving both the town and the surrounding district.

OBTC has identified a site under its ownership which is in the centre of Ollerton that has the potential to be the location of a new Hub facility. NSDC has commissioned a Feasibility Study to assess the suitability of the proposed site, determine the maximum scale of any development on the site, taking into account planning constraints, and establish the requirements of partners who may provide services from the Hub, reflecting future health and social care needs.

This Feasibility Study report is structured on the basis of the HM Treasury Five-Case Model, which is best practice for public sector capital investment business cases and mandatory for schemes requiring NHS capital funding (for pre-project costs and/or construction). This approach enables the information provided to be transferred into a NHS first-stage business case format (i.e. Project Initiation Document, Pre-Project Option Appraisal or Strategic Outline Case) if required.

This final version of the report is presented to Newark & Sherwood District Council and Newark & Sherwood Clinical Commissioning Group to conclude the Feasibility Study.

### A) Strategic Case

The Strategic Case should set out the rationale for the proposed investment, based on identified needs and demonstrate how the project aligns with national and local strategic priorities. It should also contain details of the proposed scope of services for the project and the outline specification for the capital scheme.

The development of a Hub in Ollerton would be consistent with national and local policy for the future delivery of health, social care and other public services. In particular it would align with the NHS Five-Year Forward View, One Public Estate, the Nottinghamshire Sustainability and Transformation Plan (STP) and the Mid Nottinghamshire CCGs' Commissioning Intentions for 2018-19.

The Strategic Case chapter in the main body of this report contains details of the demographic profile of Ollerton and the surrounding district, existing public service provision and projected health and social needs. It is important to note that the Ollerton Public Services Hub would not only serve the residents of the town itself but would provide services for the population of a wider catchment area.

### Objectives

On the basis of the future health and social needs summarised in, the following draft objectives for the Ollerton Public Services Hub have been identified:

- Accommodate growth in population
- Improve health and well-being
- Reduce gap in life expectancy
- Provide equity of access to services across the locality
- Improve access to healthcare services out of hospital
- Integrate provision of health and social care
- Improve access to other public services
- Make best use of public sector estate

These draft objectives require to be agreed with the key stakeholders and adopted as the “critical success factors” for the investment.

### **Scope of Service**

On the basis of the established health and social needs of the Ollerton locality, the projected impact of regeneration and the identified objectives for the Ollerton Public Services Hub, an outline service model has been developed.

The model focuses on maintaining existing health services in Ollerton and Edwinstowe, enhancing primary care and community services for the catchment area, enabling shifts of activity from the acute hospital to the community (where viable) and achieving greater integration in health and social care.

The proposed scope of health services includes primary care, minor procedures, chronic disease management, outpatients, children’s services, podiatry, dietetics, community dentistry, mental health and well-being/prevention services.

In addition, it is expected that the Hub will include a library, cafe and facilities for services provided by NSDC, OBTC, Nottinghamshire County Council, Nottinghamshire Police, Sherwood and Newark Citizens Advice, Nottingham Community Housing Association and other voluntary sector organisations. The scope of services for the Hub will need to be agreed with key stakeholders and be reviewed and revised as the project moves to the OBC stage.

### **Accommodation Requirements**

A high-level assessment has been made of the space that would be required for the services identified as suitable for inclusion in an Ollerton Public Services Hub. On the basis of information submitted by commissioners and providers, it is estimated that a building in the region of 3,800m<sup>2</sup> would be required.

This estimate has been made at high-level and is not based on detailed accommodation schedules – it is intended to provide an indication of the potential scale and capital costs of the Hub and to inform the assessment as to whether the accommodation needs could be feasibly met on the preferred site. Once the scope of service has been confirmed, a key next step will be to review the indicative accommodation requirements of the stakeholders and to develop an initial accommodation schedule.

## **B) Economic Case**

The Economic Case should set out the options that have been considered to meet the needs, achieve the objectives and deliver the scope of service outlined in the Strategic Case. It should also identify the “preferred option” based on an assessment of benefits, risks, costs (capital, lifecycle and revenue) and value for money (a cost/benefit analysis).

The aim of the Feasibility Study was to confirm the need for a new Hub in Ollerton and to assess the suitability of the preferred site for the new facility (see below). In effect therefore, consideration has been given to a single option only. Potential alternative options have been identified but not assessed at this stage.

### **Development Opportunity**

Ollerton & Boughton Town Council has identified a potential site which it owns, as a suitable location for the development of a Public Services Hub. During the Feasibility Study, OBTC requested that their existing Town Hall/Council Offices site also be considered for use within the potential development (under this scenario the Council’s facilities would be re-provided in the Hub).

On the basis of the site assessment the potential maximum scale of a new development on the preferred site has been established, as requested by NSDC. At this stage, four scenarios have been considered, giving a potential developable area ranging from 6,030m<sup>2</sup> to 6,815m<sup>2</sup>. It should be emphasised that these scenarios are not intended to suggest that the new Ollerton Public Services Hub would need to be a facility of that order of magnitude, rather they represent the likely maximum scale of development on the site under consideration. The expected scale of the Hub based on current stakeholder aspirations is shown in the Strategic Case.

### **Options**

The premise of the Feasibility Study is that the development of a new Hub on the preferred site represents the optimum way forward for the delivery of public services in Ollerton. Clearly this conclusion needs to be tested through against other potential options through a robust appraisal process, in line with best practice for public sector capital investments. Demonstrating that this option represents the optimum solution would be one of the key objectives of an OBC.

Through the Feasibility Study the following potential options have been identified:

- 1) Do Nothing (i.e. no change)
- 2) Do Minimum (i.e. retain and refurbish existing facilities)
- 3) Develop a Hub on the preferred site
- 4) Develop a Hub on the Dukeries site
- 5) Develop a two-site Hub (i.e. the preferred site and the Dukeries)
- 6) Develop a Hub on another site in Ollerton

The Feasibility Study has focussed on a consideration of the benefits, risks and costs of the preferred site option (3) only. A full appraisal of the short-list will be undertaken for the OBC.

### **Benefits**

The stakeholder engagement process identified a range of benefits that could potentially be realised through the development of a Hub in Ollerton. These include:

- Better profile for services
- Better access, space and privacy
- Provision of “one-stop shop” services
- Increased availability of services (including out of hours)
- Improved use of technology
- Accessing services without needing to travel
- Reduce isolation for patients (e.g. with long term conditions)
- Meet needs of future generations and likely demographic from new housing
- Provision of additional capacity (especially for GP services)
- Better quality of building and environment
- Opportunities for changing working practices
- Improve communication between organisations
- Partnership working to generate service integration
- Enhanced sustainability of local services
- Shared community asset contributing to local regeneration

A more detailed assessment of the expected benefits, including development of an outline Benefits Realisation Plan will need to be undertaken at the next stage.

## **Risks**

As this stage in a project of this nature there are inevitably a number of generic risks, particularly relating to evolving national and local strategic priorities, service model/scope of service, stakeholder commitment, planning consent (where applicable), availability of funding, affordability and business case approvals.

These risks are all applicable to the Ollerton Hub project. In addition, there is a specific risk relating to the acquisition of the preferred site from OBTC, in that no commercial terms have been agreed and the cost, if any, of acquiring the site has not been confirmed.

## **Capital Costs**

A high-level estimate has been made of the capital costs of developing a Hub on the preferred site. Two scenarios have been costed; the estimated accommodation requirement and the projected maximum possible development. This approach generates an estimated range of the expected capital costs for the Hub of £11.08m to £18.01m.

The capital cost estimates include allowances for works to the site, equipment and other additional items, i.e. they include fit-out as well as construction costs. The estimates are based on standard NHS guidance, adjusted where relevant to reflect the mixed-use nature of the accommodation (e.g. healthcare construction cost rates have only been applied to the healthcare proportion of the total projected floor area). It should be noted that inflation is excluded from these capital cost estimates and no allowance has been made for purchasing the preferred site from OBTC. It should also be noted that depending on how the capital scheme is delivered, it may be possible to significantly reduce the level of VAT payments from those shown above.

It should be noted that the cost of the “estimated space requirement” does not represent a minimum level of investment needed – clearly if the scope of service and associated accommodation requirements differ from the assumptions made for the Feasibility Study, the capital costs could be reduced.

## **Preferred Way Forward**

The underlying assumption at the commencement of the Feasibility Study was that the development of a Hub on the identified site represents the “preferred way forward” for the delivery of integrated health, social and public services for Ollerton and the surrounding district, subject to deliverability and affordability. This assumption has been validated through the Feasibility Study, as outlined in the conclusions to this report, with the caveat that the proposed solution is dependent on NSDC and/or NSCCG reaching agreement with OBTC on the terms for use of the preferred site.

## C) Commercial Case

The Commercial Case should explain how the preferred way forward/option will be procured and identify any key planning, legal and commercial issues to be addressed. It should also provide details of any land acquisition required, planning approval status and the expected future use of any assets vacated as a result of the new development.

### Asset Disposal

At this stage no commitments have been made by the owning organisations as to the future use/disposal of the existing assets that may be vacated if a new Hub is established in Ollerton. Development of an asset disposal strategy will be a key action following confirmation of the services to be provided from the Hub.

### New Asset Ownership & Lease Arrangements

Taking into account the core services that are expected to be delivered from the Hub, and applying principles from similar projects being developed elsewhere, the organisations that could potentially take ownership of the facility (and potentially the land) or take the head-lease from a developer (see procurement options below) are Newark & Sherwood District Council, Ollerton & Borough Town Council (*to be confirmed*), Nottinghamshire Healthcare NHS Foundation Trust, NHS Property Services and Community Health Partnerships.

Preliminary discussions held with NSDC have indicated that the Council would in principle consider acquiring the preferred site from OBTC and owning the new Hub (or taking the head-lease from a developer). No discussions regarding future asset ownership/leasing have yet been held with OBTC or Nottinghamshire Healthcare NHSFT and neither NHS Property Services nor Community Health Partnerships have been involved in the project to date.

It is understood that there is not yet any agreement with OBTC regarding the future ownership of the site(s) or any acquisition costs that may be required and the issue has not been formally addressed in the Feasibility Study. Reaching an agreement on this issue has been identified as a key risk for the deliverability of the Hub and dialogue between the respective parties is therefore recommended as a key next step.

Given that the issue of asset ownership is closely linked to procurement strategy options, funding options and future governance arrangements, it is recommended that discussions are held with the key parties to establish which organisation(s) would be in a position to own or lease the Hub and to confirm a “short-list” for further consideration during the development of the OBC.

### Procurement Strategy

The options for procuring the new facility are linked to the expected sources of funding for the Hub, i.e. through capital and/or revenue (whereby the occupants pay an annual rent to a third-party organisation, which secures the necessary finance).



Capital could potentially be secured by NSDC, OBTC (*to be confirmed*), NH NHSFT or NHS Property Services (cf Financial Case). The options for procuring a NHS/local authority scheme funded through capital are the DH Procure 22 Framework, other contractor frameworks and traditional procurement (i.e. via OJEU). At present there are two main revenue procurement routes available for the Hub; the North Nottinghamshire LIFT Company or a private/third-party developer. A new private/public partnership model, Project Phoenix, may also be available, subject to Treasury approval.

There has not yet been any assessment with the partner organisations of the ownership and procurement options that are likely to be most suitable for the Ollerton Public Services Hub, nor any “short-listing” process – this is linked to the funding and governance issues highlighted in the Financial Case and Management Case sections of this report and is therefore recommended as a key next step.

## **D) Financial Case**

The Financial Case should explain how the proposed scheme will be funded and how it will affect the revenue position of the public-sector organisations involved. It should also confirm any requirement for additional revenue funding and demonstrate the affordability of the project.

### **Capital and Revenue Costs**

The potential range of capital costs, as set out in the Economic Case, is estimated to be from circa £11.08m to circa £18.01m, depending on the scale of the development. It should be noted that these estimates exclude any costs (if required) of acquiring the identified site from OBTC.

A detailed assessment of the expected revenue costs of operating and delivering services from the Hub is outside the scope of the Feasibility Study and will be undertaken at OBC stage, when the scope of service, building specification and total development area have been confirmed.

### **Source of Funding**

As explained in the Commercial Case, the costs of developing the Hub could be financed from one-off capital funding, recurring revenue funding or a combination of both sources.

The potential sources of capital funding for the Hub include:

- ETTF capital (for the primary care element of the Hub);
- STP capital (through the DH bidding process);
- NHS Property Services customer capital;
- NSDC capital;
- Receipts from disposal of publicly-owned assets;

- S106 contributions from future housing developments in the area.

If capital funding (partial or full) is not expected to be available for the Hub, the construction costs would need to be funded through long-term annual revenue payments (i.e. loan repayments). It is anticipated that if the Hub is to be funded through revenue, it would be delivered through the North Nottinghamshire LIFTCo or through a Regional Health Infrastructure Company (RHIC), assuming formal Treasury approval for the new model is granted.

### Revenue Cost Impact

Although this Feasibility Study report is not intended to represent a formal business case for an Ollerton Public Services Hub, the respective commissioners and service providers have been requested to provide details of baseline costs for running the existing facilities, so that an initial comparison can be made with projected future estates operational expenditure, when estimated.

*The estimated revenue cost impact of the new facility is to be confirmed.*

## E) Management Case

The Management Case should demonstrate that the preferred option is deliverable and explain how the projected will be managed and governed, how the expected benefits will be realised, how risks will be mitigated, how change will be managed and the anticipated timescales for delivery.

### Project Management Arrangements

The Feasibility Study has been led by NSDC and NSCCG, under the auspices of the Nottinghamshire STP. Whilst it is appropriate for this partnership approach to continue, it is recommended that a single “lead organisation” be identified for development of the OBC. In project/programme management terms the “lead organisation” will act as the “Investment Decision-Maker”, maintaining an overview of the project, receiving regular reports on progress and retaining accountability for delivery. The additional roles that should be assigned at this stage are the “Project Owner” and the “Project Director”.

It is understood that it is unlikely that NSDC would wish to take the lead role on the project, as it is a health-driven initiative. In practice, this would mean that NSCCG would need to be the “lead organisation”.

### Programme

The likely timescales for delivering the new Hub depend on resolution of a wide range of issues identified in the Feasibility Study. Based on similar schemes under development and/or delivered elsewhere, it can be anticipated that the overall timescales for completion of the Hub project could potentially be in the range of three and a half to four years. Typically, the variation in project timescales occurs up to the OBC stage – following OBC approval there should be greater predictability regarding the milestones for procurement, Full Business Case completion, construction and commissioning.



## Conclusions

The Ollerton Public Services Hub Feasibility Study has shown that there is a clear need to enhance local access to health, social care and wider public services for the population of Ollerton and the surrounding district and to reduce health inequalities and that the development of a Public Services Hub in Ollerton will enable the integration of health and social care services and the provision of a wider range of services targeted at meeting local needs.

The study has also shown that there is a willingness from key stakeholders, including NSDC, NSCCG, OBTC, Nottinghamshire Police and Sherwood & Newark Citizens Advice to commission and provide services from a Hub in Ollerton.

A series of recommendations regarding next steps have been made to NSDC and NSCCG – these are listed below. As shown, the recommendations are based on the assumption that the next stage of the project following completion of the Feasibility Study would be the development of an Outline Business Case, in accordance with the relevant national guidance.

It is possible that there will be a need for an interim stage, which will involve completion of a Project Initiation Document, Strategic Outline Case or a STP Capital Bid Scheme template (equivalent to a SOC), the content of which would be drawn from the Feasibility Study report. This stage could be undertaken in parallel with the development of the OBC, should the lead organisations be willing to proceed “at risk” and should the necessary funding be available.

It is acknowledged that some of the requested financial information, in relation to baseline revenue expenditure, remains outstanding. However, it has been agreed with Newark & Sherwood District Council that submission of this version of the report will constitute completion of the Feasibility Study.

## Recommended Next Steps

- a) NDSC/NSCCG to confirm intention to proceed to the development of an Outline Business Case (OBC) for the Ollerton Public Services Hub
- b) NDSC/NSCCG to confirm proposed core scope of services for the Hub
- c) Key stakeholders to confirm baseline accommodation/space assumptions
- d) Key stakeholders to confirm commitment to participate in the development of an OBC
- e) NSDC/NSCCG to obtain formal confirmation from OBTC that the preferred site will be made available for the development of the Hub
- f) Project Board/Steering Group to develop a risk register and undertake a probability/impact assessment
- g) Lead organisation to obtain terms from Ollerton & Boughton Town Council for acquisition and/or development of the preferred site
- h) Key stakeholders to confirm expected/potential future use of assets vacated through development of the Hub
- i) Lead organisation to establish a “short-list” of likely sources of funding for the Hub
- j) Key stakeholders to undertake a high-level assessment of projected recurring revenue impact
- k) Lead organisation/key stakeholders to assess the potential fundability and affordability of the Hub, prior to development of an OBC
- l) Key stakeholders to agree the lead organisation for development of the project to OBC stage
- m) Lead organisation to establish a “Project Board/Steering Group”
- n) Project Board/Steering Group to establish a project management structure and governance arrangements
- o) Project Board/Steering Group to develop an indicative project delivery programme

# 1. INTRODUCTION

- 1.1.1 Newark & Sherwood District Council (NSDC) has established a vision to create holistic customer-focused hubs to improve customer service delivery. This vision will support the One Public Estate ethos to release public assets for improved use and realise tangible financial savings. Within the context of this overarching strategy, NSDC, along with Ollerton & Boughton Town Council (OBTC) and Newark & Sherwood CCG (NSCCG), is considering the potential to develop a Public Services Hub in Ollerton, serving both the town and the surrounding district.
- 1.1.2 OBTC has identified a site under its ownership in the centre of Ollerton that has the potential to be the location of a new Hub facility. NSDC has commissioned a Feasibility Study to assess the suitability of the proposed site, determine the maximum scale of any development on the site, taking into account planning constraints, and establish the requirements of partners who may provide services from the Hub, reflecting future health and social care needs.
- 1.1.3 The Feasibility Study was undertaken through the following main activities:
- Desk-top data review/analysis;
  - Meetings with NSCCG and Mansfield & Ashfield CCG commissioners;
  - Meetings with OBTC members;
  - Engagement with other key stakeholders (e.g. Nottinghamshire Police);
  - Site reviews;
  - Meetings with NSDC planning department;
  - Development of site plans/massing studies;
  - Stakeholder engagement workshop;
  - Desk-top costing exercise; and
  - Ongoing engagement with NSDC/NSCCG.
- 1.1.4 The purpose of this report is to summarise the findings from the Feasibility Study and set out the key actions required should NSDC/NSCCG determine to proceed to the next stage in the planning process, i.e. the development of an Outline Business Case (OBC).

1.1.5 This draft report sets out

- Future needs;
- Objectives;
- Potential scope of service;
- Potential accommodation requirements;
- Options for developing site;
- Assessment of suitability of identified site;
- Potential scale of development on the site;
- Estimated capital costs (for accommodation requirements and maximum scale);
- Procurement strategy options;
- Potential funding routes;
- Indicative milestones; and
- Recommended next steps.

1.1.6 The Feasibility Study report is structured on the basis of the HM Treasury Five-Case Model, which is best practice for public sector capital investment business cases and mandatory for schemes requiring NHS capital funding (for pre-project costs and/or construction). This approach enables the information provided to be transferred into a NHS first-stage business case format (i.e. Project Initiation Document, Pre-Project Option Appraisal, Strategic Outline Case or STP Capital Scheme Bid template) if required.

1.1.7 This final version of the report is presented to Newark & Sherwood District Council and Newark & Sherwood Clinical Commissioning Group to conclude the Feasibility Study.

## 2. THE STRATEGIC CASE

The Strategic Case sets out the rationale for the proposed investment, based on identified needs and demonstrates how the project aligns with national and local strategic priorities. It also contains details of the proposed scope of services for the project and the outline specification for the capital scheme.

### 2.1 Overview

2.1.1 The Strategic Case should be well-developed in the initial stages of the business case process (i.e. in the PID/PPOS/SOC) – it would not be expected to change significantly for the Outline Business Case (OBC).

2.1.2 The Feasibility Study has confirmed the case for a new Hub in Ollerton, based on local health needs, demographic projections, the condition and capacity of the existing estate and new service models. Potential objectives have been identified and an assessment has been made of the likely scope of services to be delivered from a Hub, along with indicative space requirements. The majority of the content of a SOC-level Strategic Case has therefore been effectively developed in draft form, although there is likely to be a need for further details, particularly in relation to future commissioning intentions and models of care.

### 2.2 Strategic Context

2.2.1 The development of a Hub in Ollerton would be consistent with national and local policy for the future delivery of health, social care and other public services. The key policy drivers are summarised below.

#### NHS Five Year Forward View

2.2.2 The Five Year Forward reports that, without action, the gap between need and available resources would be £30bn in 2020/21. It sets out a clear direction for NHS organisations encompassing why change is needed and how this should be done to meet demands of the population. It summarises these scenarios as to how that gap could be refined and highlights approaches that have been incorporated into the planning of this feasibility study.

2.2.3 Of most relevance to Ollerton and Boughton is the need for more care services to be delivered locally through implementing integrated care models covering physical and mental health, health and social care and greater collaboration between primary and secondary care providers. Additionally, this Feasibility study propose how Ollerton will generate efficiency savings that are aligned to the identified need to address increasing financial pressure.



2.2.4 In addition, *The Forward View into Action: planning for 2015/16* (December 2014), asked the NHS to start to fulfil the vision of the *Five Year Forward View*, recognising the increasing demands from a growing and ageing population.

### One Public Estate

2.2.5 One Public Estate (OPE) is an established national programme delivered in partnership by the Cabinet Office Government Property Unit (GPU) and the Local Government Association (LGA). It provides practical and technical support and funding to councils to deliver ambitious property-focused programmes, in collaboration with central government and other public-sector partners.

2.2.6 OPE partnerships across the country have shown the value of working together across the public sector and taking a strategic approach to asset management. At its heart, the programme is about getting more from collective assets - whether that's catalysing major service transformation such as health and social care integration and benefits reform; unlocking land for new homes and commercial space; or creating new opportunities to save on running costs or generate income. This is encompassed in three core objectives:

- creating economic growth (new homes and jobs)
- delivering more integrated, customer-focused services
- generating efficiencies, through capital receipts and reduced running costs.

2.2.7 By 2019-20 the programme is now set to generate 44,000 jobs, releasing land for 25,000 homes, raising £615 million in capital receipts from sales, and cutting running costs by £158 million.

2.2.8 A bid for OPE funding was put forward in August 2017 by the Newark and Sherwood District Council (NSDC) to create holistic customer focused hubs to improve customer service delivery and co-delivery, which would benefit both local residents and service providers and create the potential to release other assets in the community to support further regeneration within Ollerton.

### Nottingham and Nottinghamshire Sustainability and Transformation Plan

2.2.9 The Nottingham and Nottinghamshire Sustainability and Transformation Plan (STP) was submitted in 2016. The planning footprint locally covers Nottingham and Nottinghamshire under 'Greater and South Nottinghamshire' and 'Mid Nottinghamshire' with Bassetlaw as an associate. This serves a population of just over a million. The district of Bassetlaw is covered by the South Yorkshire and Bassetlaw STP but is an 'associate' to this plan to ensure that all the services are consistent. The STP's commitment was to close the financial gap of £628m by 2021.

#### 2.2.10 The STP aims to:

- Close the gaps identified in the Five Year Forward View (relating to health & wellbeing, care & quality, finance and efficiency).
- Tackle high impact issues such as collective approaches to workforce and organisational development.
- See organisations working together on changing cultures and behaviours, thus maximising the benefits and promoting independence.

#### 2.2.11 The following “high impact areas” have been identified

- Promote Wellbeing, Prevention, Independence and Self-Care
- Strengthen primary, community, social care and carer services
- Simplify urgent & emergency care
- Deliver technology-enabled care
- Ensure consistent and evidenced based pathways in planned care

#### 2.2.12 The supporting workstreams are:

- Improve Housing & Environment
- Strengthen Acute Services
- Drive System Efficiency & Effectiveness

#### 2.2.13 Priority areas to address include:

- The acute reconfiguration work, which will reduce outpatients departments in the acute and bed space to align with the shift of activity into the community;
- Further opportunities to reduce the footprint of estate through system wide disposals;
- Integrated primary, community, social care and mental health multidisciplinary teams (MDTs) working in formal network arrangements within local clusters of practices to facilitate estate utilisation and 7-day working;
- Maximisation of technological enablers and remote work to enable a reduction in non-priority estate through co-location;

- Working with the Health and Wellbeing Boards to help Local Authority Planners familiarise themselves with each Local Estates Forum to ensure that housing/business growth is captured through capital monies to support ongoing health infrastructure development.

2.2.14 The development of the Ollerton Public Services Hub would be consistent with the aims and objectives of the STP and has been identified as a priority project.

### Health and Wellbeing Strategy

2.2.15 The Health and Wellbeing Strategy is a plan to improve health and wellbeing in Nottinghamshire, written by its Health and Wellbeing Board. This plan is based on the Joint Strategic Needs Assessment (JSNA) which identifies current and future needs for adults and children. The four key objectives are to:

- Give everyone a good start.
- Encourage living well.
- Enable coping well.
- Encouraging and allowing working together.

2.2.16 Some key annual strategic actions include:

- Improving the uptake of breastfeeding
- Improving children and young people's mental health and wellbeing across Nottinghamshire through a partnership agreement to tackle child sexual exploitation and the implementation of the Nottinghamshire Children's Mental Health and Wellbeing Transformation Plan.
- Reducing smoking in Nottinghamshire.
- Developing healthier environments to live and work in Nottinghamshire.
- Ensuring crisis support (including housing) is available for people with mental health problems living in the community.
- Ensuring that vulnerable people living in the community can access the housing support they need.

2.2.17 Within the Joint Health and Wellbeing Strategy there is an agreement to develop a local place-based approach to deliver the "healthy and sustainable" ambition which supports the prevention agenda. Governance for this is currently in development but will see NSDC relaunch its Health and Wellbeing Partnership in Autumn 2018.

2.2.18 The Health and Wellbeing Strategy will respond to the specific needs of local communities such as Ollerton and the surrounding district – the local health needs are outlined below.

### **Mid Nottinghamshire CCGs Commissioning Intentions 2018-19**

2.2.19 NHS Mansfield and Ashfield and NHS Newark and Sherwood (Mid Nottinghamshire CCGs) are responsible for commissioning healthcare on behalf of the people of Mansfield, Ashfield, Newark and Sherwood. The total population we serve is currently circa 350,000.

2.2.20 Building on their Better Together Transformation Programme through their Alliance working within Mid Nottinghamshire the CCGs have established a range of key programmes to improve care delivered to patients, with a “shift left” approach to out of hospital care being the default care setting wherever feasible. These interventions have been co-designed with clinicians and citizens representatives (wherever possible) and delivered through co-ordinated and inter-dependent projects/programmes of work. In this way, they have sought to re-set the care system in Mid Nottinghamshire with new care models and pathways being co-produced by health and social care professionals. Therefore, the CCGs commissioning intentions build on the evaluation of successful delivery and the learning gained where barriers to change have been encountered.

2.2.21 The ongoing evolution and development of the Better Together Programme, which forms the platform from which the CCG’s commissioning intentions are built, has consistently been clinically led, based on need and jointly developed with partners. All programmes and plans arising have been further refined based on the feedback received as part of the patient and public engagement conducted.

2.2.22 Building on the Better Together transformation “blueprint”, the Mid Nottinghamshire Alliance partnership has agreed four specific programmes to take forward transformation and delivery of system efficiencies. These are:

- Urgent & Emergency Care
- Planned Care including Cancer, Maternity & Children,
- Mental Health,
- Community Services

2.2.23 The Mid Nottinghamshire CCGs have two further key delivery programmes; Primary Care, including prescribing and Continuing Health Care.

## Primary Care

- 2.2.24 General Practice capacity and capability underpins the transformational change of services. As Mid Nottinghamshire CCGs are co-commissioners of primary care their commitment is to enable the delivery of primary care at scale, increase opportunities for practices to work together to deliver resilient sustainable primary care, increase access to seven-day services and same-day urgent care.
- 2.2.25 This will be achieved through; a) Engaging primary care to work within a network of 'hubs'; b) combined populations of 30,000 – 50,00; c) Enabling practices to share and pool resources and responsibilities; d) Supporting GP practices to develop a sustainable workforce; and e) Explore opportunities for practices to work together to increase flexible access to seven-day services.
- 2.2.26 The CCGs will focus prevention on making every contact count and developing the role of General Practice in pro-actively identifying people at risk within their Practice population. The key strength of General Practice is that GPs provide a personal response to a dedicated patient list.
- 2.2.27 GPs can shape the care for each individual, so that it is personal to that individual's needs. They are in a unique position to shape the path of care each person takes and influence the level of demand placed on other elements of the health and care system.
- 2.2.28 They also become the default source of help if other services are unable to meet people's needs. Practices are under intense pressure due to increasing demand and limited capacity exacerbated by recruitment issues.
- 2.2.29 It is the CCGs intention to work with the NHS England commissioners, the Local Medical Council, collaboration across STP with Greater Nottinghamshire partners and others to implement the General Practice Forward View. The CCGs will work with partners to collectively support practices to implement the ten high impact changes that build resilience and release GP capacity from nonclinical tasks.
- 2.2.30 In their role to support the development of General Practice they will work with practices to extend and improve access in line with requirements for new national funding by March 2019. They will continue to encourage practices to cluster together to meet the requirements for extended access and to provide services at scale that individual practices would not be able to do alone. They will continue to promote and explore opportunities in the provision of a clinical pharmacist and a mental health worker supporting a cluster of practices. Locally enhanced services in Primary Care will be reviewed and developed as COREPlus services to maximise the impact, the budget must enhance General Practice services and to avoid elective and non-elective referral activity.

## Continuing Health Care (CHC)

- 2.2.31 The CCGs will look to develop and commission a local service that fits into the local system and support the CCG strategic aim of partnership working to achieve the safest and most effective services within available resources, working through the Mid-Nottinghamshire Alliance where possible.
- 2.2.32 The CCGs will commission a CHC assessment only model with all other elements of the CHC contract being undertaken by the CCG. This will give greater oversight within the CCG and allow alignment to service transformation. It will ensure that the CHC plans are aligned with community, discharge and re-ablement services and maximise integration with Alliance partners.

## 2.3 Profile of the Ollerton District

### Demographics

- 2.3.1 Ollerton is a small town in Nottinghamshire on the edge of Sherwood Forest in the area known as the Dukeries. It forms part of the civil parish of Ollerton and Boughton and is in the Newark and Sherwood District. The population in Ollerton and Boughton as of 2011 was 9,840. The town has a strong community spirit and has potential due to the improved vitality and regeneration of the town centre. There is currently an evolving masterplan for Ollerton and the surrounding area, which includes infrastructure developments such as the extension of the Robin Hood Railway line and a new bus station. The recently closed Thoresby coal mine has also recently been regenerated.
- 2.3.2 The surrounding district includes Edwinstowe, a large village in Sherwood Forest, Nottinghamshire, with a population of 5,188 (2011 census) and Bilsthorpe a village with a population of 3,375 (2011 census).
- 2.3.3 In general terms, the quality of life within the District (assessed against crime, employment, education, environmental, health, housing and accessibility factors) is good. Ollerton is a former mining settlement where crime, education and health indicators appear to be those most affecting quality of life.
- 2.3.4 Local housing development is driving a potential 40% up-lift in the local population over the next 5-10 years – details are provided in the following extract from the Development Plan 2013:

#### **Adopted Allocations and Development Management Development Plan Document 2013**

##### **Ollerton & Boughton**

1,133 new dwellings between 2006 and 2026

##### **Edwinstowe**

283 new dwellings between 2006 and 2026

**Bilsthorpe**

354 new dwellings between 2006 and 2026

**Thoresby Colliery**

800 new dwellings between 2006 and 2026

**Total**

2,500 new dwellings between 2006 and 2026

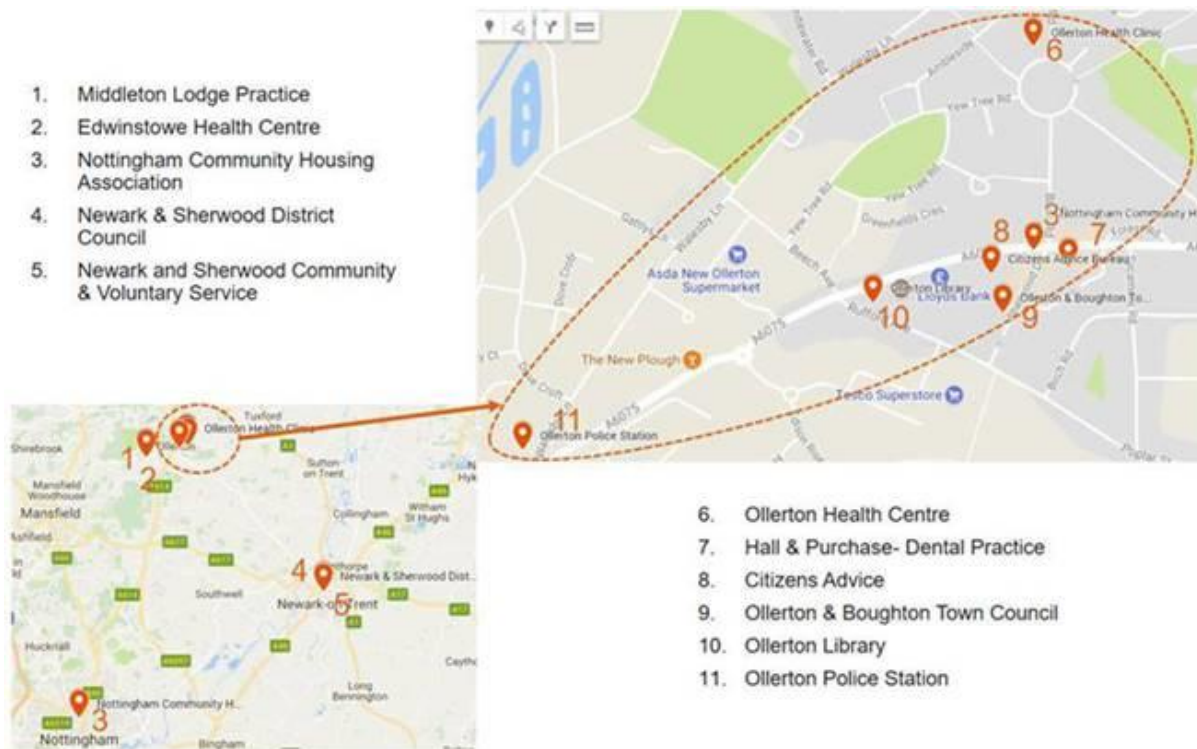
**Population growth**

2,500 new dwellings x average 2.35 occupants per dwelling (based on 2011 Census average household size in Newark and Sherwood) = 5,875 population increase

**Public Services**

2.3.5 The map below shows the location of the main organisations providing public services within and around Ollerton:

*Figure x: Ollerton and Surrounding Area Local Public Services*

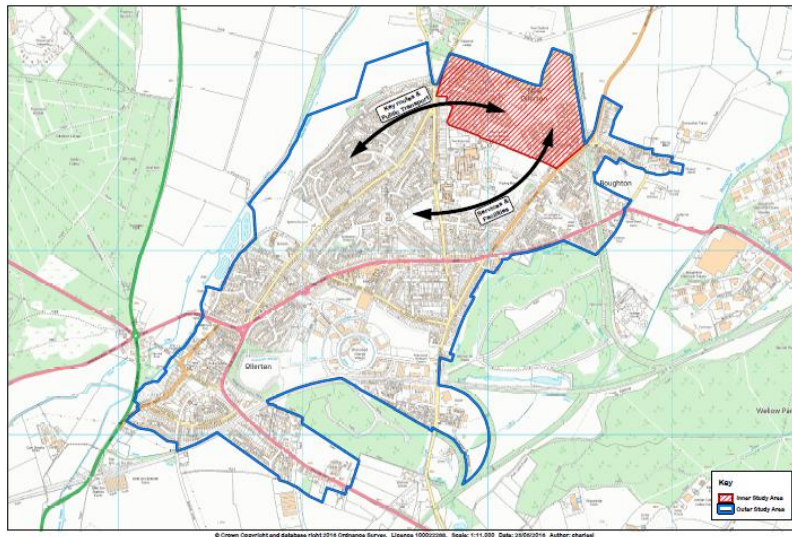


**Ollerton and Boughton Neighbourhood Study**

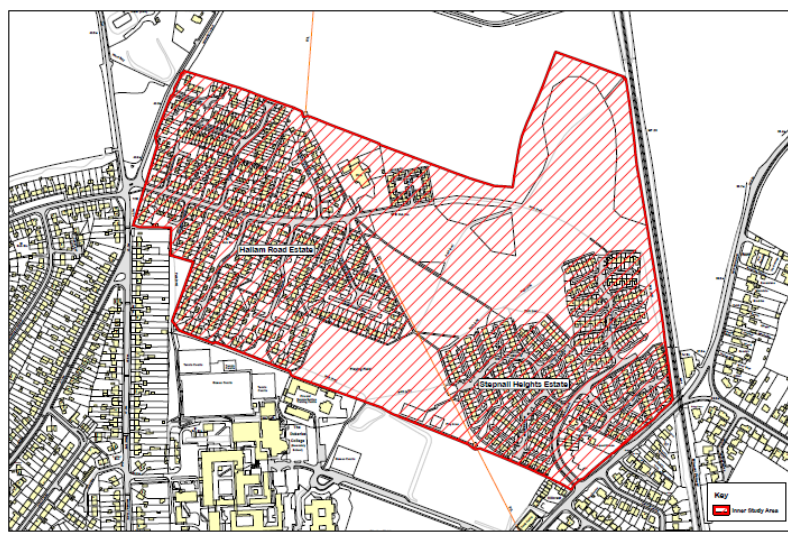
2.3.6 During August 2017, Newark and Sherwood District Council commissioned an Ollerton and Boughton Neighbourhood Study. The role of the Neighbourhood Study is to provide a comprehensive assessment of an area focussing on both the socio-economic (“People”) and physical attributes (“Place”) with meaningful community engagement at its heart.

- 2.3.7 By engaging with local residents, a Neighbourhood Study presents opportunities not only to gain a qualitative insight into local issues but to also capture the voices of residents by including them at the start of the planning and development process. This, in turn, allows the Study to engage residents in capacity building programmes and for the process to make a tangible difference to residents in the Study area.
- 2.3.8 The Neighbourhood Study also presents an opportunity for the District Council and stakeholders to focus attention on an area of need, respond to concerns, and identify positive opportunities through a co-ordinated effort, based on locally driven solutions.
- 2.3.9 The draft Baseline Study relates to two areas: an Outer Study Area being the whole of Ollerton and Boughton and an Inner Study Area represented by the Hallam Road and Stepnall Heights estates and the allocated development site between them.

### Outer Study Area



### Inner Study Area





- 2.3.10 A total of 190 residents took part, of which 87 were male and 103 female, with good representation from all age groups except those in the 17-20 year old category and from males aged 21-25 years.
- 2.3.11 Most frequently mentioned was the need for the existing Middleton Lodge Surgery to be enlarged with improved car parking as well as for new GP surgeries to cope with the growing demand. Residents told us how difficult they found it to get an appointment at the doctors and the same appeared to be the case with regard to dentists. Residents wished to see a GP Surgery / Health Centre provided as part of the new development.
- 2.3.12 Anecdotally, there appears to be a lot of joblessness. Residents requested a Job Centre; a local Job Information Point; and most importantly a local “signing on” point stating that at present they had to travel to Mansfield to sign on and that this was expensive by public transport (over £6 return).

## 2.4 Health and Social Needs

- 2.4.1 The key challenges currently affecting the locality include:

### High levels of deprivation

- Ollerton and Boughton are the second and fourth most deprived wards in Newark and Sherwood respectively.
- 35.7% of children in Boughton and 17.3% of children in Ollerton are at risk of living in poverty.
- 210 crimes were reported in Ollerton in August 2017

### Legacy impact of the mining industry, resulting in sustained health issues and lower than average life expectancy

- Life expectancy in Nottingham is significantly **lower** than the England average, with three years less for men and two years less for women.
- Ollerton has a higher proportion of females (51.1%) whereas Boughton has a higher proportion of males (50.6%)
- Nottingham’s life expectancy for men is ranked 9<sup>th</sup> worst in England and 18<sup>th</sup> for women.
- If the current pattern of death rates continues, men living in the 10% of wards in the region with the lowest life expectancy can expect to live at least **six years** less than men living in the 10% of wards in the region with the highest life expectancy. For women the difference is **seven years** or more.

### Employment issues due to lack of basic skills

- In Ollerton, 20% of workers were employed in elementary occupations whilst 47% were employed in manual occupations.
- In Boughton, 16% of workers were employed in elementary occupations whilst 39% were employed in manual occupations.
- Ollerton has 1.1% more people of working age (16-64 year olds) whereas Boughton has 0.3% more children (0-15 year olds) and 0.5% older people (65 years +) than the District (Source: 2011 census).
- 36.1% of people in Ollerton and 33.5% of people in Boughton have no formal qualifications.

### Epidemiological changes

- In the 2011 census, 5.9% of the population in Newark and Sherwood reported their health as **poor or very poor**, which is higher than in England (5.5%). (Source: Census 2011). Similar trends across males and females in Newark and Sherwood area.
  - Males tend to die more from **Circulatory diseases** (24.3%) (including coronary heart disease and stroke).
  - Females tend to die more from **Cancer**.
  - Respiratory diseases are of slightly higher prevalence in females (21.0%).
  - Digestive (including alcohol-related conditions such as chronic liver disease and cirrhosis) are prevalent across both sexes.
- The incidence and prevalence of certain diseases (particular cancers, ischaemic heart disease, COPD, stroke, dementia and rheumatoid arthritis) are forecast to change in Ollerton over the next 10-20 years. It is likely that demand for services such as diagnostics, and especially cancer treatment and stroke rehabilitation will increase significantly, and more of those patients will be older. Due to increased cancer incidence and improving treatments, prevalence will increase significantly so that many more people will be living with cancer.

### Impact of Regeneration

2.4.2 Ollerton & Boughton acts as a service centre to a large local population, both in the town and the surrounding Sherwood Area. Over the plan period it is anticipated that the town will see the provision of new housing, employment and associated facilities that will help regenerate the area and reinforce its role as the main centre within the Sherwood Area.

2.4.3 It is anticipated that the new housing developments will attract young commuter families, which will increase the need for women's and children's services.

2.4.4 The impact of regeneration in the area has been assessed as follows:

- Additional residential or commercial development will see an increase in the GP's patient lists and will add strain if collaborative alignment is not planned now.
- Local issue in recruiting GPs
- Need for better utilisation of existing healthcare estate to deliver the right healthcare within existing estate.
- Priority to reconfigure existing healthcare sites to enable more flexible delivery.

2.4.5 The development of a Public Services Hub in Ollerton would contribute to addressing the impact of regeneration and meeting the future needs of the locality.

## 2.5 Prevention and Wellbeing Services

2.5.1 The importance of addressing the wider determinants of health and meeting social and wellbeing needs is well recognised by NSDC and its partner organisations. One of the Council's strategic priorities as detailed in its Corporate Plan for 2016 – 2020 is "Healthiness" – aims include increasing participation in leisure and wellbeing activities in the district and supporting health promotion and illness prevention activities in Newark and Sherwood.

2.5.2 The Council's plans in this period include:

- Developing the district's leisure centres managed through Active4Today to encourage sustainable activity and increase leisure activity across the district;
- Working to deliver the Playing Pitch Strategy across the District and develop a strategy to ensure there is adequate provision in all areas, including alternative activity provisions where necessary.
- Ensuring that Sports Hub proposals for the Newark area are linked to and complementary to all other sports and leisure provision.
- Engaging with and scrutinising the effectiveness of the Clinical Commissioning Groups and NHS Trusts which serve the District.
- Supporting and participating in policy development to address improved public health and ensure that health promotion and illness prevention activities are supported through the activities of the Council, Active4Today and Newark & Sherwood Homes.

2.5.3 This demonstrates NSDC’s commitment to “healthiness” and supporting health promotion and illness prevention initiatives and increasing the number of people participating in leisure and wellbeing activities throughout the district.

## Integration

2.5.4 The new NSDC facilities in Castle House, Newark provide a positive example of how integration of different services/organisations and new ways of working in purpose-built accommodation can improve access to services aimed at health promotion and illness prevention. Castle House accommodates DWP, YMCA (supporting the sports hub work), Citizens Advice, CVS – Community and Voluntary Services, Probation, Home-Start and “Change, Grow Live”, which provides drug and alcohol support to adults.

2.5.5 Having these organisations in one location assists the customer in obtaining a joined up and effective service without being passed from one location to another. NSDC plans to build on this approach in partnership with NSCCG and other healthcare organisations to develop a truly integrated health, care and well-being facility in Ollerton that will transform health promotion and pro-active care.

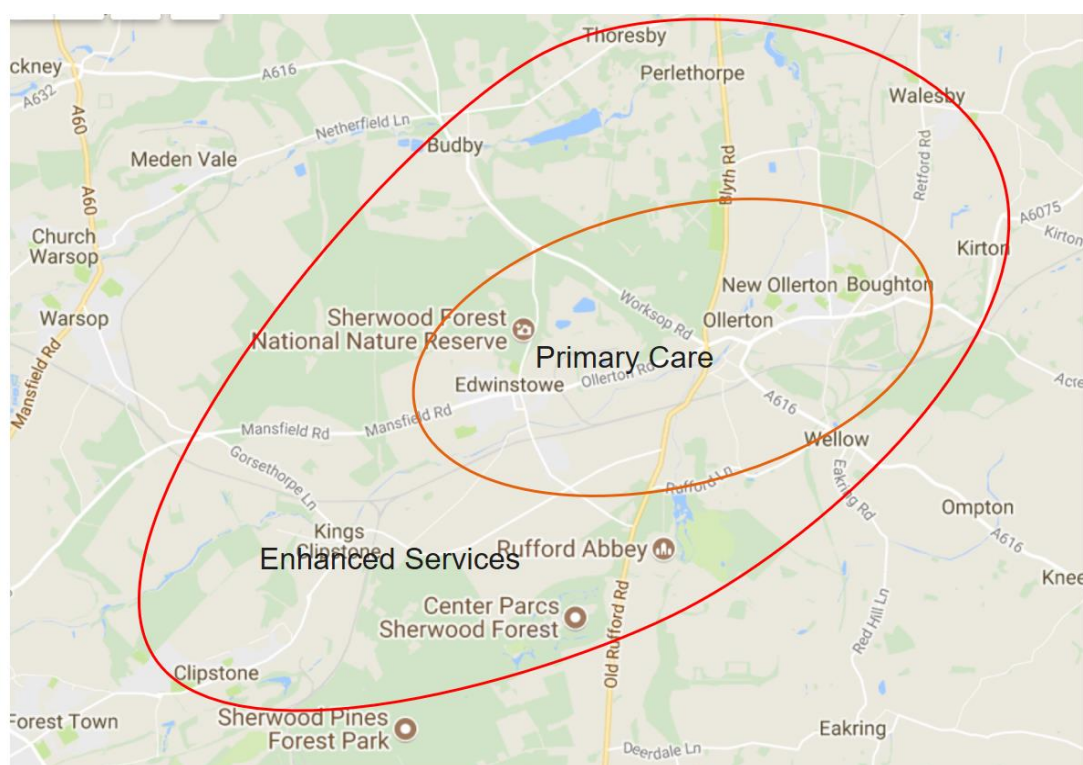
## 2.6 Healthcare Services

### Primary Care

2.6.1 There are a number of General Practices (GP) which serve Ollerton and the surrounding areas:

- Middleton Lodge Practice, Ollerton;
- Major Oak Medical Practice, Edwinstowe;
- Clipstone Health Centre; and
- The Surgery, Newark.

2.6.2 The catchment area of the GP in the borough are show in the figure below. For the purposes of this analysis, catchment areas covered by the Middleton Lodge Practice and the Major Oak Medical Practice are considered the **Primary Care Area** and all four catchment areas as the **Enhanced Services Area**.

**Figure x: Catchment Area of the General Practices in the Borough**

## Hospital Services

2.6.3 The majority of hospital care for the residents of Ollerton and the surrounding area is provided by the Sherwood Forest Hospitals NHS Foundation Trust – patients typically access the King’s Mill Hospital in Mansfield (the Trust also runs Newark Hospital).

2.6.4 The annual A & E and outpatient attendances for patients registered with the GP practices in Ollerton and Edwinstowe are shown in the table below:

	2017 Activity	2017 Activity Per 1,000 wp	2016 Activity	2016 Activity Per 1,000 wp	Change in Period
<b>ED Attendances</b>					
Middleton Lodge (Ollerton)	1,913	282.1	2,094	307.0	-8.1%
Major Oak (Edwinstowe)	4,179	272.6	4,422	289.8	-5.9%
<b>Total</b>	<b>6,092</b>	<b>554.7</b>	<b>6,516</b>	<b>596.8</b>	<b>-7.1%</b>
<b>Outpatient Attendances</b>					
Middleton Lodge (Ollerton)	7,870	513.4	7,134	467.5	+10.3%
Major Oak (Edwinstowe)	3,101	457.2	2,852	418.1	+8.7%
<b>Total</b>	<b>10,971</b>	<b>970.6</b>	<b>9,986</b>	<b>885.6</b>	<b>+9.9%</b>

## 2.7 Objectives for a Public Services Hub

2.7.1 On the basis of the future needs summarised above, the following draft objectives for the Ollerton Public Services Hub have been identified

- Accommodate growth in population
- Improve health and well-being
- Reduce gap in life expectancy
- Provide equity of access to services across the locality
- Improve access to healthcare services out of hospital
- Integrate provision of health and social care
- Improve access to other public services
- Make best use of public sector estate

2.7.2 These draft objectives require to be agreed with the key stakeholders and adopted as the “critical success factors” for the investment.

## 2.8 Scope of Service

2.8.1 On the basis of the established health and social needs of the Ollerton locality, the projected impact of regeneration and the identified objectives for the Ollerton Public Services Hub, an outline service model has been developed.

2.8.2 The model focuses on:

- Maintaining existing health services in Ollerton and Edwinstowe
- Enhancing primary care and community services for the catchment area
- Enabling shifts of activity from the acute hospital to the community (where viable)
- Achieving greater integration in health and social care

2.8.3 The proposed scope of health services will include:

- Primary Care
- Minor Procedures
- Chronic Disease Management
- Outpatients
- Children's Services
- Podiatry
- Dietetics
- Community Dentistry
- Mental Health
- Well-Being/Prevention Services

2.8.4 In addition, it is expected that the Hub will include the following public services

- Library
- Newark and Sherwood District Council
- Ollerton and Boughton Town Council
- Nottinghamshire County Council
- Newark and Sherwood Homes
- Nottinghamshire Police
- Sherwood and Newark Citizens Advice
- Nottingham Community Housing Association
- Department of Works and Pensions
- Newark Community and Voluntary Services

- 2.8.5 The scope of services for the Hub will need to be agreed with key stakeholders and be reviewed and revised as the project moves to the OBC stage.

## 2.9 Accommodation Requirements

- 2.9.1 The estimated space that would be required for the services identified as suitable for inclusion in an Ollerton Public Services Hub is shown in the table below (further details are set out in Appendix A). These are high-level assessments only and are not based on detailed accommodation schedules – the figures are intended to provide an indication of the potential scale of the Hub and to inform the assessment as to whether the accommodation needs could be feasibly met on the preferred site.

Service	Potential Area (m <sup>2</sup> )
Primary Care Services	1,000
Out of Hospital Services	500
Community & Voluntary Services	400
Library	800
Police Station	500
Ollerton & Boughton Town Council Facilities	200
Communications Space Allowance	400
<b>Total</b>	<b>3,800</b>

- 2.9.2 Once the scope of service has been confirmed, a key next step will be to review the indicative accommodation requirements of the stakeholders and to develop an initial accommodation schedule.

## 2.10 Recommended Next Steps

- a) NDSC/NSCCG to confirm intention to proceed to the development of an Outline Business Case for the Hub
- b) NDSC/NSCCG to confirm proposed core scope of services for the Hub
- c) Key stakeholders to confirm baseline accommodation/space assumptions
- d) Key stakeholders to confirm commitment to participate in the development of an Outline Business Case



## 3. THE ECONOMIC CASE

The Economic Case sets out the options that have been considered to meet the needs, achieve the objectives and deliver the scope of service outlined in the Strategic Case. It should also identify the “preferred way forward/option” based on an assessment of benefits, risks, costs and value for money (a cost/benefit analysis is undertaken for the OBC).

### 3.1 Overview

- 3.1.1 At the OBC stage the Economic Case should be based on detailed analysis, including benefits and risk scoring, and completion of the “Generic Economic Model” (due to be replaced by the “Capital Investment Appraisal” tool. This appraisal process results in the selection of a “preferred option” for delivery of the project.
- 3.1.2 In a PID/PPOA there should be a description of the advantages/disadvantages of the options considered and a preliminary consideration of the benefits, risks and capital costs of a “preferred option”. In a SOC it is not essential to identify a single “preferred option”, although this can be done if there is one option that clearly represents more value for money than the others – the guidance suggests that a “preferred way forward” should be articulated. It should be sufficient to summarise the anticipated benefits and risks associated with the project and to present, at high-level, the estimated capital costs of the identified options.
- 3.1.3 The aim of the Feasibility Study was to confirm the need for a new Hub in Ollerton and to assess the suitability of the preferred site for the new facility (see below). In effect therefore, consideration has been given to a single option only. Details of this option and the associated benefits, risks and costs are provided in this section of the report. Potential alternative options have been identified but not assessed at this stage.

### 3.2 Development Opportunity

- 3.2.1 Ollerton & Boughton Town Council has identified a site, which it owns, as a suitable location for the development of a Public Services Hub.
- 3.2.2 Ollerton and Boughton acts as a service centre to a large local population, both in the town and the surrounding Sherwood area. It is anticipated that the town will soon see provision of new housing, employment and associated facilities that will help regenerate the area and reinforce Ollerton’s role as the main centre within the Sherwood area. In line with the ‘master plan’ for the Ollerton town centre, the Council is seeking to develop the preferred site for community use, as a key driver of the regeneration of the area.

- 3.2.3 During the Feasibility Study, OBTC requested that their existing Town Hall/Council Offices site also be considered for use within the potential development (under this scenario the Council’s facilities would be re-provided in the Hub).
- 3.2.4 The site is located on the southern and western edges of Ollerton’s local services centre; the site’s context is a mix of retail, servicing and residential with office accommodation further to the south. The site area is 0.31 hectares and has been cleared of buildings. The cleared factory building had a large footprint covering a substantial proportion of the site and was built close up to the eastern and southern site boundaries.
- 3.2.5 Vehicular access to the preferred site is from Rufford Avenue. The A6075 (Forest Road) runs approximately east to west through Ollerton and Boughton, linking the site to Edwinstowe, Mansfield; and thereafter, the M1 in the west and with Tuxford and the A1 in the east. There is an abundance of public car parking in the area, Tesco, Asda and off Forest Road. A pedestrian link exists to and from the site through to Forest Road alongside the Bank.
- 3.2.6 A series of discussions have been held with the NSDC Planning Department to determine how the preferred site could be developed in the future and establish any constraints. An architect practice has produced indicative site plans that reflect the guidance received from the planning authorities (see Appendix B).
- 3.2.7 On the basis of the site assessment the potential maximum scale of a new development on the preferred site has been established, as requested by NSDC. At this stage, four scenarios have been considered, as follows:

<b>Scenario 1</b>	<ul style="list-style-type: none"> <li>• Hub on preferred site - car park on site</li> <li>• OBTC Town Hall building retained for existing use</li> </ul>	6,030m <sup>2</sup>
<b>Scenario 2A</b>	<ul style="list-style-type: none"> <li>• Hub on preferred site - use of public car parks</li> <li>• OBTC Town Hall site used for car parking</li> </ul>	6,075m <sup>2</sup>
<b>Scenario 2B</b>	<ul style="list-style-type: none"> <li>• Hub on preferred site - use of public car parks</li> <li>• OBTC Town Hall site released for development</li> </ul>	6,075m <sup>2</sup>
<b>Scenario 3</b>	<ul style="list-style-type: none"> <li>• Hub on preferred site - use of public car parks</li> <li>• OBTC Town Hall site used for Hub “satellite”</li> </ul>	6,815m <sup>2</sup>

3.2.8 Details of these scenarios are provided in Appendix B.

3.2.9 It should be emphasised that these scenarios are not intended to suggest that the new Ollerton Public Services Hub would need to be a facility of that order of magnitude, rather they represent the likely maximum scale of development on the site under consideration. The expected scale of the Hub based on current stakeholder aspirations is shown in the Strategic Case above.

### **3.3 Options**

3.3.1 The premise of the Feasibility Study is that the development of a new Hub on the preferred site represents the optimum way forward for the delivery of public services in Ollerton. Clearly this conclusion needs to be tested through against other potential options through a robust appraisal process, in line with best practice for public sector capital investments. Demonstrating that this option represents the optimum solution would be one of the key objectives of an Outline Business Case.

3.3.2 Through the Feasibility Study the following potential options have been identified:

- 1) Do Nothing (i.e. no change)
- 2) Do Minimum (i.e. retain and refurbish existing facilities)
- 3) Develop a Hub on the preferred site
- 4) Develop a Hub on the Dukeries site
- 5) Develop a two-site Hub (i.e. the preferred and Dukeries)
- 6) Develop a Hub on another site in Ollerton

3.3.3 These options focus on sites/facilities - through engagement with a range of stakeholders, it is clear that there are also a number of potential permutations for the scope of service for the Hub, which effectively constitute “sub-options”. Similarly, as shown above, there are several options for the redevelopment of the potential site. At this stage it is sufficient to list the potential options at high-level; an assessment of any sub-options would be undertaken at the OBC stage.

3.3.4 The Feasibility Study has focussed on a consideration of the benefits, risks and costs of the preferred site Hub option (3) only. A PID/PPOA/SOC would be expected to provide commentary on the other identified options – a full appraisal of the short-list will be undertaken for the OBC.

## 3.4 Benefits

3.4.1 The stakeholder engagement process identified a range of benefits that could potentially be realised through the development of a Hub in Ollerton. These include:

- Better profile for services
- Better access, space and privacy
- Provision of “one-stop shop” services
- Increased availability of services (including out of hours)
- Improved use of technology
- Accessing services without needing to travel
- Reduce isolation for patients (e.g. with long term conditions)
- Meet needs of future generations and likely demographic from new housing

- Provision of additional capacity (especially for GP services)
- Better quality of building and environment
- Opportunities for changing working practices
- Improve communication between organisations
- Partnership working to generate service integration
- Enhanced sustainability of local services
- Shared community asset contributing to local regeneration

3.4.2 A more detailed assessment of the expected benefits, including development of an outline Benefits Realisation Plan (c.f. the Management Case) will need to be undertaken at the next stage.

## 3.5 Risks

3.5.1 As this stage in a project of this nature there are inevitably a number of generic risks, particularly relating to:

- Evolving national and local strategic priorities
- Service model/scope of service
- Stakeholder commitment
- Planning consent (where applicable)
- Availability of funding
- Affordability
- Business case approvals

3.5.2 These risks are all applicable to the Ollerton Hub project. In addition, there is a specific risk relating to the acquisition of the identified site from OBTC, in that no commercial terms have been agreed and the cost, if any, of acquiring the site has not been confirmed.

3.5.3 It is recommended that a risk register is compiled by the “Project Board/Steering Group” (c.f. Management Case) as an immediate next step following conclusion of the Feasibility Study and that a risk probability/impact assessment is undertaken.

## 3.6 Capital Costs

3.6.1 A high-level estimate has been made of the capital costs of developing a Hub on the preferred site. Two scenarios have been costed; the estimated accommodation requirement and the projected maximum possible development. This approach generates an estimated range of the expected capital costs for the Hub based on the information received from stakeholders and planning authorities to date. It should be noted that the cost of the “estimated space requirement” does not represent a minimum level of investment needed – clearly if the scope of service and associated accommodation requirements differ from the assumptions made for the Feasibility Study, the capital costs could be reduced.

3.6.2 The estimated capital costs of the two scenarios are as follows:

	Estimated Space Requirement (£000)	Maximum Site Development (£000)
<b>Development Area</b>	<b>3,800m<sup>2</sup></b>	<b>6,815m<sup>2</sup></b>
Building Costs	8,188	13,250
Client Fees & Costs (@ 3%)	246	397
Contingency (@ 10%)	843	1,365
<b>Sub Total</b>	<b>9,277</b>	<b>15,012</b>
VAT	1,806	3,002
<b>Total</b>	<b>11,083</b>	<b>18,014</b>

3.6.3 These capital cost estimates include allowances for works to the site, equipment and other additional items, i.e. they include fit-out as well as construction costs. The estimates are based on standard NHS guidance, adjusted where relevant to reflect the mixed-use nature of the accommodation (e.g. healthcare construction cost rates have only been applied to the healthcare proportion of the total projected floor area).

3.6.4 It should be noted that inflation is excluded from these capital cost estimates and no allowance has been made for purchasing the preferred site from OBTC. It should also be noted that depending on how the capital scheme is delivered, it may be possible to significantly reduce the level of VAT payments from those shown above.

- 3.6.5 Further details of the assumptions applied to the costing exercise are provided in Appendix C. The level of cost information provided in this report is anticipated to be sufficient for a PID/PPOA/SOC – a more detailed estimate will be required at OBC stage and consideration will also need to be given to lifecycle costs.

### 3.7 Preferred Way Forward

- 3.7.1 The underlying assumption at the commencement of the Feasibility Study was that the development of a Hub on the preferred site represents the “preferred way forward” for the delivery of integrated health, social and public services for Ollerton and the surrounding district, subject to deliverability and affordability. This assumption has been validated through the Feasibility Study, as outlined in the conclusions to this report, with the caveat that the proposed solution is dependent on NSDC and/or NSCCG reaching agreement with OBTC on the terms for use of the preferred site.

### 3.8 Recommended Next Steps

- e) NSDC/NSCCG to obtain formal confirmation from OBTC that the preferred site will be made available for the development of the Hub
- f) Project Board/Steering Group to develop a risk register and undertake a probability/impact assessment

## 4. THE COMMERCIAL CASE

The Commercial Case explains how the preferred way forward/option will be procured and identifies any key planning, legal and commercial issues to be addressed. It also provides details of any land acquisition required, planning approval status and the expected future use of any assets vacated as a result of the new development.

### 4.1 Overview

- 4.1.1 At the PID/PPOA/SOC stage, the relevant guidance indicates that the Commercial Case is expected to include an outline consideration of the options for procuring the facility, including the lead organisation (for multi-stakeholder projects). It is sufficient to outline the procurement strategy options and establish a “short-list” for further consideration, with a preferred procurement route being agreed at the next stage (i.e. development of the OBC).
- 4.1.2 Given the national focus on the use of surplus NHS land, the NHS England PID template produced in 2017 also includes questions relating to the potential for disposal of assets and reinvestment of receipts.
- 4.1.3 Through the Feasibility Study consideration has been given to:
- Options for ownership of the new Hub and potential arrangements for leasing space;
  - Options for procuring the new facility;
  - Potential for disposing of assets that would be vacated through transfer of services to the new Hub.
- 4.1.4 There has not yet been any assessment with the partner organisations of the ownership and procurement options that are likely to be most suitable for the Ollerton Public Services Hub, nor any “short-listing” process – this is linked to the funding and governance issues highlighted in the Financial Case and Management Case sections of this report and is therefore recommended as a key next step.
- 4.1.5 An additional key commercial issue that has been identified through the Feasibility Study is the potential arrangement to be made with the Ollerton and Boughton Town Council for use of the preferred site (and potentially the existing Town Hall site) for the Ollerton Public Services Hub.



- 4.1.6 It is understood that there is not yet any agreement with OBTC regarding the future ownership of the site(s) or any acquisition costs that may be required and the issue has not been formally addressed in the Feasibility Study. Reaching an agreement on this issue has been identified as a key risk for the deliverability of the Hub and dialogue between the respective parties is therefore recommended as a key next step.

## 4.2 Existing Asset Disposal

- 4.2.1 Although the scope of service for the Hub is not expected to be confirmed until OBC stage, the Feasibility Study has identified the existing buildings that are most likely to be vacated as a result of the development of the new facility, as follows:
- Middleton Lodge;
  - Ollerton Health Centre;
  - Ollerton Library;
  - Ollerton Police Station;
  - Ollerton Town Hall (depending on the agreed scope of service).
- 4.2.2 With the exception of Middleton Lodge, the buildings listed above are in public ownership and it is therefore possible that any capital receipts from disposing of these assets (should they be deemed surplus to requirements) could be reinvested in the Hub, subject to approval by the respective owning organisations.
- 4.2.3 At this stage no commitments have been made by the owning organisations as to the future use/disposal of the assets listed above. Development of an asset disposal strategy will be a key action following confirmation of the services to be provided from the Hub.

## 4.3 New Asset Ownership & Lease Arrangements

- 4.3.1 Taking into account the core services that are expected to be delivered from the Hub, and applying principles from similar projects being developed elsewhere, the organisations that could potentially take ownership of the facility/land or take the head-lease from a developer (see procurement options below) are as follows:
- Newark & Sherwood District Council;
  - Ollerton & Borough Town Council (*to be confirmed*);
  - Nottinghamshire Healthcare NHS Foundation Trust;
  - NHS Property Services;

- Community Health Partnerships (through North Nottinghamshire LIFTCo or potentially Project Phoenix – see below).

4.3.2 Although it is possible that other stakeholder organisations, such as the Middleton Lodge GP Practice or Nottinghamshire Police, could take ownership of the Hub or take the head-lease, this is deemed to be unlikely at this stage and the options to be considered further are therefore limited to those listed above.

4.3.3 Preliminary discussions held with NSDC have indicated that the Council would in principle consider acquiring the preferred site from OBTC and owning the new Hub (or taking the head-lease from a developer). No discussions regarding future asset ownership/leasing have yet been held with OBTC or Nottinghamshire Healthcare NHSFT and neither NHS Property Services nor Community Health Partnerships have been involved in the project to date.

4.3.4 Given that the issue of asset ownership is closely linked to procurement strategy options, funding options and future governance arrangements, it is recommended that discussions are held with the key parties to establish which organisation(s) would be in a position to own or lease the Hub and to confirm a “short-list” for further consideration during the development of the Outline Business Case.

## 4.4 Procurement Strategy

4.4.1 The strategy for procuring the Hub will depend on number of factors, including:

- Lead organisation;
- Expected ownership/leasing arrangements;
- Expected sources of funding;
- Availability and applicability of potential options;
- Level of interest from key stakeholders;
- Value for money.

4.4.2 The main procurement options for the Ollerton Hub are listed below – further details are provided in Appendix D.

### Capital Funding

4.4.3 The costs of the Ollerton Public Services Hub could potentially be funded through capital, which could be secured by the Newark & Sherwood District Council, the Ollerton & Boughton Town Council (*to be confirmed*), Nottinghamshire Healthcare NHS Foundation Trust or NHS Property Services (cf Financial Case).

4.4.4 The options for procuring a NHS/local authority scheme funded through capital are as follows:

- DH Procure 22 Framework;
- Other Contractor Frameworks (e.g. Scape Group Framework);
- Traditional Procurement (via OJEU).

4.4.5 The use of a contractor framework would reduce the procurement costs and timescales for the Hub; given the potential scale, configuration and capital cost of the facility, it is likely that this would be the most value for money solution and the recommended approach if the Hub is to be funded through capital.

### Revenue Funding

4.4.6 If capital investment is not expected to be available for the Ollerton Public Services Hub, the new facility could be funded through revenue, whereby the occupants pay an annual rent to a third-party organisation, which secures the necessary finance. At present there are two main revenue procurement routes available for the Hub; the North Nottinghamshire LIFT Company or a private/third-party developer.

4.4.7 It is possible that Project Phoenix, a new Public/Private Partnership model under development by Community Health Partnerships, the Department of Health and the Treasury, will also be available as a procurement route for the Hub, although this model is likely to be targeted at areas not covered by an existing LIFT.

4.4.8 If the procurement of the Hub is to be led by NSDC, they would need to be listed as a participating authority in Project Phoenix in order for this route to be available – should this model be of interest to NSDC (and the other partner organisations) it is recommended that discussions are held with Community Health Partnerships to assess the extent to which it may be applicable/appropriate.

4.4.9 Should a revenue-funded procurement strategy be required for the Hub, the most suitable vehicle can be tested through the OBC stage.

## 4.5 Recommended Next Steps

- g) Lead organisation to obtain terms from OBTC for acquisition and/or development of the preferred site
- h) Key stakeholders to confirm expected/potential future use of assets vacated through development of the Hub

## 5. THE FINANCIAL CASE

The Financial Case confirms how the proposed scheme will be funded and how it will affect the revenue position of the public-sector organisations involved. It also outlines any requirement for additional revenue funding and demonstrates the affordability of the project.

### 5.1 Overview

- 5.1.1 NHS England guidance indicates that at the pre-OBC stage (i.e. in the PID/PPOA/SOC), the Financial Case should include a high-level assessment of the capital and recurring revenue costs of the project.
- 5.1.2 The revenue costs should, according to the guidance, be offset by any identifiable savings to demonstrate the “net recurrent revenue impact”. Where there are multiple commissioners and providers involved in the project, the revenue impact is likely to be shown across the local system/health economy, rather than at organisational level (this will be considered at the OBC stage). If there is any adverse net revenue impact forecast, the expected source of funding should be identified and support in principle from key stakeholders should be confirmed.
- 5.1.3 The guidance for a SOC states that it should include an “outline consideration of the financial case”. This is broadly the same as the information required for the NHS England PID template, although the Financial Case in a SOC is also expected to include a “statement of the organisation’s financial situation” and an assessment of the capital and revenue constraints.
- 5.1.4 The financial arrangements for the Ollerton Public Services Hub are anticipated to be complex, given the range of stakeholders involved in the project and their specific requirements. An assessment of the potential affordability of the Hub is outside the scope of the Feasibility Study and is therefore not addressed in this draft version of the report. However, it is understood that the STP is seeking to establish at high-level the likely revenue impact of the project; this may be included in the final version of the report if available. Placeholders for the relevant information that has not yet been obtained have therefore been included in this section of the draft Feasibility Study report.

### 5.2 Capital and Revenue Costs

- 5.2.1 The potential range of capital costs, a set out in the Economic Case, is estimated to be from circa £11.08m to circa £18.01m, depending on the scale of the development. It should be noted that these estimates exclude any costs (if required) of acquiring the preferred site from OBTC.

- 5.2.2 A detailed assessment of the expected revenue costs of operating and delivering services from the Hub is outside the scope of the Feasibility Study and will be undertaken at OBC stage. However, a consideration of comparable schemes suggests that the operational estates costs are likely to be in the region of £700k - £850k per annum (for a 3,800m<sup>2</sup> facility – c.f. section 2.9), depending on the specification of the building, the scope of service (e.g. clinical accommodation will generally incur higher facilities management costs than non-clinical space) and the procurement/ownership model.
- 5.2.3 The recurring revenue costs of the Hub will be estimated in detail for the OBC, when the scope of service, building specification and total development area have been confirmed.

### 5.3 Source of Funding

- 5.3.1 As explained in the Commercial Case, the costs of developing the Hub could be financed from one-off capital funding, recurring revenue funding or a combination of both sources.
- 5.3.2 The potential sources of capital funding for the Hub include:
- ETTF capital (for the primary care element of the Hub);
  - STP capital (through the DH bidding process);
  - NHS Property Services customer capital;
  - NSDC capital (likely to be delivered through the new Newark & Sherwood Property Company);
  - Receipts from disposal of publicly-owned assets;
  - S106 contributions from future housing developments in the area.
- 5.3.3 It is recommended that NSDC, NSCCG and the STP give some initial consideration of the likelihood of securing capital funding from any of these sources and that bidding opportunities are tracked (especially in relation to ETTF and STP capital).
- 5.3.4 If capital funding (partial or full) is not expected to be available for the Hub, the construction costs would need to be funded through long-term annual revenue payments (i.e. loan repayments). As outlined in the Commercial Case, it is anticipated that if the Hub is to be funded through revenue, it would be delivered through the North Nottinghamshire LIFTCo or through Project Phoenix (assuming formal Treasury approval for the new model is granted).
- 5.3.5 It is recommended that the options for a revenue-funded scheme are examined in detail at the OBC stage.

## 5.4 Revenue Cost Impact

5.4.1 At OBC stage there is a requirement to demonstrate that a capital investment is affordable to all key stakeholders (i.e. service commissioners and providers). A PID/PPOA/SOC requires a high-level projection of future revenue costs compared with baseline costs and an indication as to how any revenue gap would be funded.

5.4.2 Although this Feasibility Study report is not intended to represent a formal business case for an Ollerton Public Services Hub, the respective commissioners and service providers have been requested to provide details of baseline costs for running the existing facilities, so that an initial comparison can be made with projected future estates operational expenditure. The baseline financial information provided to date is summarised in the table below:

Provider Organisation	Existing Rent (£ pa)	Existing Utilities etc (£ pa)	Total Existing Costs (£ pa)
Middleton Lodge GP Practice	53,800	23,133	<b>76,933</b>
Nottinghamshire Police	-	23,175	<b>23,175</b>
Nottingham Housing Association	-	5,632	<b>5,632</b>

5.4.3 *Information for other properties from which services would be transferred to the Ollerton Public Services Hub remains outstanding. The estimated revenue cost impact of the new Hub is therefore to be confirmed.*

## 5.5 Recommended Next Steps

- i) Lead organisation to establish a “short-list” of likely sources of funding (capital and/or revenue)
- j) Key stakeholders to undertake a high-level assessment of projected recurring revenue impact
- k) Lead organisation/key stakeholders to assess the potential fundability and affordability of the Hub, prior to development of an Outline Business Case

## 6. THE MANAGEMENT CASE

The Management Case demonstrates that the preferred way forward/option is deliverable and explains how the project will be managed and governed, how the expected benefits will be realised, how risks will be mitigated, how change will be managed and the anticipated timescales for delivery.

### 6.1 Overview

- 6.1.1 The Management Case at OBC stage will provide significant detail on the processes the sponsoring organisation and its partners have put in place to ensure successful management and delivery of the project.
- 6.1.2 The information that is required for a PID/PPOA is generally limited to an indication of the stakeholders involved, details of the lead organisation and an outline programme/milestones plan. The guidance for a SOC suggests that the Management Case should also include details of how the project is to be managed and confirmation that it is deliverable in the context of the partner organisations' capability and resources.
- 6.1.3 A SOC can include an outline of the proposed approach to issues such as benefits realisation, risk management and post-project evaluation, but this is not considered to be essential.
- 6.1.4 There is not yet an agreed formal project management structure in place for taking forward the Ollerton Public Services Hub and an implementation programme has not been developed at this stage. However, in the context of setting out the next steps for the project, some consideration has been given to these issues, as explained below.

### 6.2 Project Governance Arrangements

- 6.2.1 Where a project involves multiple stakeholders, as with the Hub, it is important to identify a "lead organisation" to manage the planning and implementation processes. It is not unusual for the "lead organisation" to change as the project progresses, e.g. a CCG may lead the development of the OBC, but a different organisation may manage the project through the procurement stage.

- 6.2.2 The Feasibility Study has been led by NSDC and NSCCG, under the auspices of the Nottinghamshire STP. Whilst it is appropriate for this partnership approach to continue, it is recommended that a single “lead organisation” be identified for development of the OBC. If NHS capital is to be sought for the project it is likely that NSCCG would need to be the sponsoring body for the OBC, although this could be a different role from that of “lead organisation”. Whichever organisation takes the lead, the involvement of and alignment with the STP will reinforce the integrated approach that has been adopted to date.
- 6.2.3 The project management roles that should be assigned at this stage are the “Project Owner” and the “Project Director”. The “Project Owner” will be a nominated officer of the “lead organisation and have personal accountability for project delivery. The “Project Director” will provide leadership and direction of the scheme for internal and external stakeholders; although it is typical for the “Project Director” to come from the “lead organisation”, this does not necessarily have to be the case if the project is being managed on a partnership basis.
- 6.2.4 It is recommended that once the “lead organisation” for the development of the OBC for the Hub has been agreed, a “Project Owner” and “Project Director” are identified and a “Project Board/Steering Group” is set up.
- 6.2.5 The key responsibilities/tasks of a “Project Board/Steering Group” typically include:
- Establishing project management processes and governance arrangements;
  - Ensuring regular work stream (delivery team) meetings set at a frequency that promotes effective delivery.
  - Creating and maintaining an action log for all workstreams to feed into;
  - Holding regular risk workshops and maintain a working risk register;
  - Creating a feasible and robust project plan;
  - Undertaking a resource gap analysis and procuring relevant skills/support where required;
  - Managing project budgets and monitoring costs;
  - Facilitating timely decision making by organising discussions between key individuals, including a stakeholder analysis;
  - Monitoring progress of the project planning activities;
  - Escalating issues to the stakeholder organisations if required.



- 6.2.6 This list of responsibilities is indicative – detailed terms of reference should be agreed when the “Project Board/Steering Group” is established and governance arrangements/requirements are confirmed.

### 6.3 Programme

- 6.3.1 The likely timescales for delivering the new Hub depend on resolution of a wide range of issues identified in the Feasibility Study including, but not limited to:

- Scope of service;
- Commitment of key stakeholder organisations;
- Scale of development required;
- Extent of enabling and construction works required;
- Acquisition of the site;
- Planning approval for developing the site;
- Procurement strategy;
- Sources of funding;
- Achieving affordability;
- Business case approvals.

- 6.3.2 At this stage in the process, the extent of the variables in relation to the above points is such that it is very difficult to set out a firm programme for delivering the new Hub. However, based on similar schemes elsewhere, the following indicative durations for the key stages in the planning and delivery process can be estimated:

NHS PID/PPOA/SOC Development and Approval	6 months
NHS OBC Development and Approval	9 months
Contractor/Development Procurement	6 months
NHS FBC Development and Approval	6 months
Construction	18 months
Commissioning	3 months

- 6.3.3 It should be noted that the requirement to produce a business case or equivalent document in advance of producing the OBC is based on the assumption that NSCCG/NSDC will be seeking external funding to develop the OBC and Full Business Case (FBC). If this stage is not required, the programme can be reduced accordingly.
- 6.3.4 The overall timescales for completion of the Hub project could therefore potentially be in the range of three and a half to four years, depending on the factors identified above and the extent to which each stage is undertaken “at risk”, e.g. the development of the OBC is commenced before approval of the PID/PPOA/SOC.
- 6.3.5 It should be noted that whilst it may be possible to reduce these estimated timescales for delivering the Hub (e.g. if a PID/PPOA/SOC is not required), many similar schemes are experiencing significant slippage, due to a range of issues, including funding, procurement and the impact of external policy changes.
- 6.3.6 It is recommended that the “Project Board/Steering Group” (when established) initially develops a draft programme to take the project from its current status to approval of an OBC, based on the current assumptions relating to the key issues listed above. Typically, the variation in project timescales occurs up to the OBC stage – following OBC approval there should be greater predictability regarding the milestones for procurement, FBC completion, construction and commissioning.

## 6.4 Recommended Next Steps

- l) Key stakeholders to agree the lead organisation for development of the project to OBC stage
- m) Lead organisation to establish a “Project Board/Steering Group”
- n) Project Board/Steering Group to establish a project management structure and governance arrangements
- o) Project Board/Steering Group to develop an indicative project delivery programme

## 7. CONCLUSIONS

7.1.1 The key findings from the Ollerton Public Services Hub Feasibility Study are as follows:

- There is a clear need to enhance local access to health, social care and wider public services for the population of Ollerton and the surrounding district and to reduce health inequalities
- The development of a Public Services Hub in Ollerton will enable the integration of health and social care services and the provision of a wider range of services targeted at meeting local needs
- There is a willingness from key stakeholders, including NSDC, NSCCG, OBTC, Nottinghamshire Police and Sherwood & Newark Citizens Advice to commission and provide services from a Hub
- The space requirement for delivery of the core scope of service is estimated to be in the region of 3,800m<sup>2</sup>
- The OBTC-owned identified site in Ollerton will support the development of facilities on a significant scale, in the region of 6,000m<sup>2</sup>
- The capital cost of developing the Hub is estimated to range from circa £11m to circa £18m, depending on the scale of the development.

7.1.2 The proposed next steps have been identified in each section of this report – in summary, the priorities are to:

- Secure commitment in principle from key partner organisations to proceeding with the development of a Public Services Hub in Ollerton;
- Confirm the core scope of services and estimated accommodation/space requirements;
- Obtain confirmation that the identified site will be made available for the development of the Hub;
- Establish formal governance and management arrangements for the next stage of the project;
- Proceed to Outline Business Case stage analysis and evaluation of benefits, risks, value for money and affordability; and
- Continue to engage with stakeholders and maintain momentum.

7.1.3 This final version of the Feasibility Study report is formally submitted to NSDC and NSCCG with the acknowledgement that some financial information is outstanding.

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