

CABINET

2 AUGUST 2011

PROPOSAL TO MOVE THE CDC TO TEMPLE SITE

Portfolio Holder:	Councillor Les Wicks, Children's Services
Report from:	Rose Collinson, Director of Children and Adults
Author:	Sally Morris, Assistant Director, Commissioning and Strategy

Summary

The following report sets out the proposal to locate the Child Development Service (CDC) for disabled children on part of the Temple site in Strood.

1. Budget and Policy Framework

1.1 The proposal to move the CDC onto the Temple site is within the existing budget and policy framework of the council and as such is a matter for cabinet to agree.

2. Background

- 2.1 Following the emergency relocation of the Child Development Services (CDC) to a variety of community locations across Medway, in January 2009, the NHS board considered the future of the service. At that time they agreed a proposal for the future that included a hub and spoke service model with the hub potentially based at Canada House. Funding of £1.2 million was agreed by the SHA for capital costs associated with the change. The proposal was then subject to informal consultation with users, carers and staff, NHS Medway employed a consultant to lead the consultation work. The consultation lead to serious concerns about the feasibility of the hub and spoke model and the Canada House site and a second property search was initiated.
- 2.2 Following a second review of NHS and Medway Council property portfolios three possible sites were identified for an initial evaluation:

- Temple a former school site (no longer active as a school)
- Canada House a property owned by the mental health provider (currently partially used by mental health services).
- Lordswood HLC a community healthy living centre that is currently underused.
- 2.3 Each of these locations was independently evaluated by Medway Community Estates (MCE). At its meeting in November 2010 the PCT Board agreed with the unanimous views of service users that the Temple site was the most realistic site to develop an integrated centre for disabled children and also asked for a detailed feasibility study on the site.
- 2.4 To cover the risk of Temple not being suitable or affordable, the Board also asked that a feasibility study of the Lordswood Healthy Living Centre was conducted at the same time (CDC Feasibility study (MCE) is set out in the Exempt Appendix).
- 2.5 The proposal to move the CDC to the Temple site involves active use of approx 25% of the retained portion of Temple. The uses for the remaining portion of the site are being fully investigated and will be presented to Cabinet in October 2011.
- 2.6 The following sets out the findings of the feasibility study and informs members of the full investment costs to the PCT of making good the site for use by the CDC and identifies ongoing benefits and risks to the council.

3. Key Findings from the Feasibility Study – Temple site

- 3.1 Overall suitability
- 3.1.1 The feasibility study for both sites concluded that the Temple site was both a feasible and preferable site in building and clinical terms to meet the needs of users, staff and the wider strategic aims of the commissioning approach to services for disabled children.
- 3.2 Summary of adjustments required
- 3.2.1 Specifically the Temple site requires some building and site refurbishment to make it fit for purpose including: roof repairs, creating a parking and outdoor assessment area and access road to the site.
- 3.2.2 The council's Property, Building and Design team have provided budget costings for the essential repairs required to the roof, a contingency sum for potential asbestos removal costs and the cost of providing a ramped access to the car parking area. This initial estimate is set out in the detailed financial implications in the Exempt Appendix. MCE and their design team will now need to do a more detailed study to evaluate the cost of creating a dedicated access onto Cliffe Road.

- 3.2.3 MCE have undertaken a detailed study of the internal changes required to the part of the Temple site designated for the CDC and the changes they propose in consultation with staff from the service include: alterations to provide the clinical spaces for the service, installing new suspended ceilings and floor coverings, alterations to significantly upgrade the heating system from the rest of the site and complete upgrading of the electrical installation.
- 3.2.4 The PCT's design team will deal with planning consent that will be required for the new access road and the area to be designated for parking.
- 3.3 Cost of building adaptations
- 3.3.1 It has been agreed with the PCT that all costs of access, external repairs and disability adaptations to enter the building itself, car park, outdoor assessment space and the internal design, fabric changes would fall to the PCT.
- 3.4 Staff Feedback
- 3.4.1 The feedback from staff who will use the site is very positive about the Temple site which offers the space and flexibility to design a centre that meets the specific needs of service users while being mindful of the requirements of staff who are delivering the service. The space can be designed to give excellent user access and support while in the centre; enhancing the clinical experience of receiving the service. Staff support the additional benefits of the site being able to be used for additional user services outside the CDC operating hours e.g. parent/carer and sibling meetings, disabled children's clubs and after school activities.
- 3.4.2 The Foundation Trust, whose paediatricians work closely with the CDC services, have sent a letter of support to the board to underline how positively they view this potential move (see Appendix 2).
- 3.5 User feedback
- 3.5.1 122 parents of users have been consulted on all aspects of the feasibility study and Temple School remains the preferred option, as it is the closest match to their key requirements for a Child Development Centre. All the key services can be located at the site, on the ground floor (including the assessment nursery and the special needs nursery), there is ample outdoor space, parking space and the facility would be specifically designed for their children's needs.
- 3.5.2 Additional perceived benefits noted by parents/carers with this option included a general increase in well-being as a result of being close to 'green' playing fields, the feeling of space and the opportunity this option provided for parents/carers to have "their own,' *tailor made*', child friendly environment".

- 3.5.3 A persistent concern with the Temple School site however is access via bus, which they understand is limited and infrequent, although many parents report that they use their own car to access services. Nevertheless accessibility of the site by public transport must be included in the considerations of its suitability for those who do not have a car.
- 3.5.4 Overall, the positive benefits of the Temple School site far outweighed any concerns parents/carers had about public transport; it is therefore recommended by parents and carers that the Temple School site is chosen as the new location for Medway CDC.
- 3.6 <u>Risks</u>
- 3.6.1 Risks identified in the feasibility study include:
 - a) The investigation and resolution of any asbestos that may emerge on the site as a result of changing the fabric and internal layout. Although there are no indications that these substances exist from the latest asbestos survey – the estimated external costs include a contingency amount to cover this eventuality.
 - b) Parents and carers have raised concerns about the accessibility of the Temple site by public transport although most use their own car to access services. The bus services that support the site have been investigated and there are 7 buses serving the immediate area around the site including: the 133, 140,141,171, 172,173,192 buses, these services provide on average a bus to the site every 15 minutes and service the whole of Medway via Chatham bus station. Of course some families may find using public transport very difficult and or expensive in those cases being overseen by social care expenses for using a taxi instead would be seriously considered.

4. Implications for Looked After Children

4.1 17% of looked after children are disabled (or have a Special Educational Need) and these children will benefit from the service improvements locating the CDC on the Temple site will offer.

5 Financial Implications

5.1 The detailed financial implications are set out in the Exempt Appendix.

6. Legal Implications

6.1 The Council is required to obtain best consideration when disposing of any asset by way of a lease exceeding 7 years, unless the consent of the Secretary of State is obtained. The Secretary of State has given a general consent for disposals at an undervalue of up to £2 million where the disposal will, in the opinion of the Council help promote or improve the

economic, social or environmental welfare of its area or the inhabitants of its area.

6.2 When considering making changes to any service provision, the Council must have due regard to its equalities duties set out in s149 of the Equality Act 2010. The general duty on the Council is to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act, to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it and to foster good relations between persons who share a relevant protected characteristic and persons who do not share it. The relevant protected characteristics are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation. In order to make decisions having regard to these duties it is necessary for the Council to engage with service users about any potential changes to the services and to consider any representations made by service users in reaching a decision. Consultation responses from staff and users are summarised above.

7. Risk Management Implications

TEMPLE SITE			
Risk	Mitigated Rating (likelihood 5 high and impact 5 high)	Mitigating action	
1. Asbestos could be discovered in the fabric of the building during internal works	2 x 2 = 4 (low)	The council have updated the asbestos assessment and PCT have allocated a contingency fund to support any works that may emerge	
2. Lack of public transport to the site	2 x 3 = 6 (low)	Ensure users are aware of the full range of bus services close to the site	
3. Delays in implementation of the CDC development could result in potential loss of income and additional upkeep costs.	2 x 3 = 5 (low)	The timescale for implementation has been worked out in detail through the feasibility process.	

7.1 The risks relating to the move onto the Temple site are summarised below:

4. If the CDC use of the hard core area at the back of the site for parking could limit use of this for other purposes when the rest of the site is allocated	2 x 2 = 4 (low)	The lease will include a lift and shift clause for the hardcore area currently allocated to CDC parking and the entrance to the CDC to ensure no future uses are compromised.
5. If the CDC use of two rooms close to the entrance could limit the use of the rest of the SW part of the site when allocated.	2 x 2 = 4 (low)	The lease will include a lift and shift clause for the two rooms identified as potential barriers for separate use by other tenants.
6. If the CDC use of shared services could compromise the future use of the rest of the site	2 x 2 = 4 (low)	The lease will include a lift and shift clause to cover any services provided to the CDC.

8. Recommendations

- 8.1 Cabinet is asked to consider and note the PCT's feasibility study for the CDC and the supporting information from users, carers and Medway Foundation Trust.
- 8.2 Cabinet is asked to authorise the Assistant Director of Housing and Corporate Services, in consultation with the Portfolio Holder for Finance, to enter into negotiations with Medway NHS for a lease of part of the Temple School Block 3 and ancillary buildings for the provision of the Child Development Service, and to grant such lease subject to suitable terms being agreed.

9. Suggested reasons for decision

- 9.1 The reasons for the decision are:
 - a) there are considerable long-term benefits to disabled children in Medway in having an integrated CDC service on one site
 - b) there is no initial capital investment required by the council to release the property to Medway PCT

- c) leasing part of the site to the CDC does not limit the other options to use the rest of the site
- d) Leasing part of the site to the CDC will provide an annual rental income to the council, which can be used to offset some of the current costs of maintaining the retained element of the site.

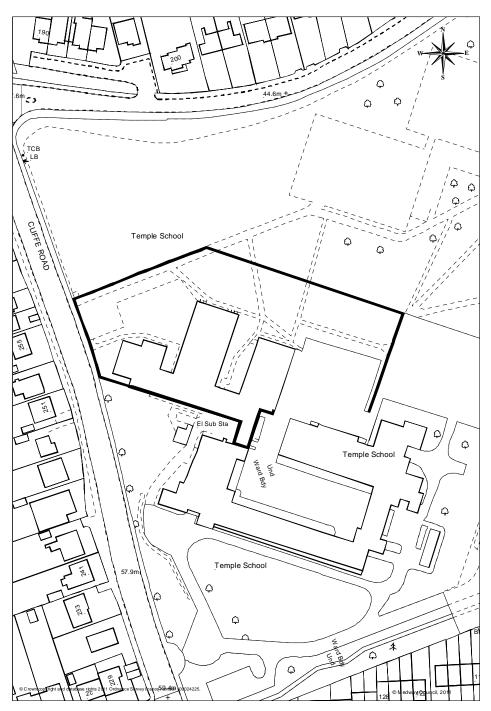
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Background papers

None

APPENDIX 1 - INDICATIVE PLAN OF THE CDC FOOTPRINT ON TEMPLE SITE



APPENDIX 2 - LETTER OF SUPPORT FROM MEDWAY MARITIME HOSPITAL

9th March 2011

Denise Harker Chair of Board NHS Medway 50 Pembroke Court Chatham Maritime Chatham Kent ME4 4EL

RE: Location of Multi Agency Child Development Centre, Medway

Dear Ms Harker,

I am writing on behalf of the members of the Medway Child Development Steering Group to express our views in relation to the future location of the centre.

We believe this is due to be discussed by the Board on 30th March 2011, and a decision made as to whether Temple School site in Strood will be pursued as the option.

We wish to express our strong and unanimous support for the Temple site for a number of reasons:

- The facility offers sufficient space to meet the specification to create a fit for purpose multi agency centre to meet the needs of disabled local children and young people.
- The location offers better access, both by private and public transport means.
- Thirdly, the Temple option offers scope for development of wider services for children and young people in the future, with potential to create some overnight accommodation for Respite Care.

Medway NHS FT, as current providers of Respite Care at Preston Skreens in Sheppey are particularly focused on the third of these points as this current location both in terms of fitness for purpose and accessibility to Medway Children is not sustainable in the medium to long term future.

We are highly aware of the financial challenges within Public Sector and are anxious that the decision may be influenced by this, and Lordswood Healthy Living Centre chosen as an option as a result.

It is the view of the group that this alternative option will bring significant challenge to care providers and children/families alike.

Yours sincerely,

Kate Taylor (General Manager, Children and Women's Directorate, Medway Foundation Trust)