

Briefing Note for Leicester City Health Oversight Scrutiny Committee (HOSC) - 10 October 2019

Two requests for update were received from the chair of City HOSC:

Hospital Close residences

Hospital Close is a residential Close adjoining the Leicester General Hospital. Built mainly in the 1970's and originally providing 175 lettable staff residential units including 33 semi-detached houses and a variety of self-contained and shared flats.

In addition to the residential units, The Trust's Administrative Cancer Team and a National Charity for Brain Injuries are also located in Hospital Close.

Whilst NHS Trusts have no legal responsibility to provide staff accommodation, either directly on-site or via third party tenancy agreements, a greater percentage (74%) of Acute hospitals (113 of 152 reporting in 2017/18) provide some form of staff accommodation either internally, via third parties or on a mixed basis. This figure reduces slightly to 66% (21 of 32 reporting in 2017/18) for Large Acute Teaching Hospitals, like UHL Trust. More often than not relatively large numbers of units of staff accommodation are provided by third party organisations with Trusts having either exclusivity or nominations arrangements in place. Until recently, UHL Trust provided accommodation for some (less than 3.5%) of our staff via our own buildings at the General and Glenfield Hospitals and via a third party at the Royal Infirmary.

Unfortunately the residential accommodation at the Leicester General Hospital, like many parts of our hospital estate is below what we would consider an acceptable standard and crucially, that applies to clinical space as well. As such the Trust constantly has to balance the need to carry out maintenance and improvements to essential clinical space, like wards and operating theatres, versus the important but not clinically essential parts of our estate.

This balance between clinical and non-clinical need is always made against the background of scarce capital resource and inevitably clinical need will be prioritised. In the case of the residential accommodation at Hospital Close, the properties have deteriorated over the years and sufficient investment has not been possible to ensure that they remain fully compliant with the increased requirements for Health and Safety and in particular fire safety standards. For many years this has been managed with interim, short term remedies, but this reached a stage where this was no longer possible and a more comprehensive scheme was required to bring them up to acceptable and safety compliant standards. Surveys of the properties indicated that in order to address all of these issues a comprehensive plan would require investment of circa £5m. This figure is simply unaffordable when assessed against the many requirements within clinical areas for expenditure to rectify backlog problems. In January 2019, of the 175 units of accommodation available for let, only 86 units were occupied.

The decision to implement a phased closure programme relating to Hospital Close was not taken lightly. In February 2019, following comprehensive discussions and debate within the Trust and at the Trust Board, it was agreed that a phased closure programme of Hospital Close would be implemented with a view to completely vacating all occupied properties before the end of 2019.

As part of this phased closure, UHL have offered as much support as possible to assist affected staff in identifying alternative accommodation, including offering priority relocation to any available

properties on our Glenfield site, liaison with Sovereign Housing who operate the premises adjacent to the LRI, together with face to face briefing sessions and road shows at which Local Authority Housing representatives and Local Letting Agents were in attendance.

As of the 25/09/2019, we have 9 occupied properties left all of which, in line with the processes of the phased closure programme, have been issued with Section 21 Notices advising the occupants of the Trust's intention to end their tenancy and take possession of the property. Of these 9 properties, the occupants of 4 of them have already informed us of their intention to leave their accommodation ahead of their Section 21 Notice expiry date and we expect the remaining residents to follow suit with the continued support of the Trust in finding suitable alternative accommodation.

The future of the residences once all tenants have moved out has been discussed at our Annual Public Meeting and it has been subsequently determined that we would constitute any future disposal as part of Phase 1 of the Development Control Plan for the Leicester General Hospital Site.

The land has been declared surplus as part of our required annual return to the Department of Health and has also been identified with Leicester City Council as part of their 'call for sites' in accordance with Leicester's Strategic Housing and Economic Land Availability Assessment (SHELAA).

The release of the land is aligned with the Government's Spending Review originally issued in 2015 and updated in November 2017, which committed the NHS to finding £3.3bn from NHS land sales by 2020-21 and releasing land for 26,000 houses. As part of any disposal of NHS land, typically 25% of the development would comprise Affordable Housing in accordance with S106 requirements. A commitment is given that NHS key worker staff have 'first refusal' on this affordable accommodation.

The timing for offering the site for disposal has not yet been finalised, however the Trust hopes to be in a position to commence marketing early in 2020.

Jarrom Street – proposed development.

When fully staffed, UHL employ 6,500 nurses across the three acute sites. Vacancies are consistently running at about 10% so there are approximately 650 vacancies at any particular time.

Recruitment of Nurses has been challenging with a heavy reliance on recruitment of overseas Nurses, who need accommodation relatively close to each of the acute sites to attract them to UHL.

The LRI has the most significant recruitment issues and since 01/04/2000 the Trust has had in place a nominations agreement with Sovereign Housing Group (SHG) which is agreed annually for the provision of residential accommodation for its staff members, patient relatives and other visitors to the Trust situated at the Walnut Street residencies.

Over the last 19 years a mixture of staff expectations in relation to their accommodation needs and the need to minimise risk in relation to void rent loss costs to the Trust, has seen the minimum occupancy guarantee reduce to 112 units of the available 592 units of accommodation. The space offered is shared whilst demand is now clearly for studio type accommodation. This level of occupancy guarantee does not take into account International Nurse cohorts- usually 40 nurses per cohort and currently a minimum of 5 cohorts per annum.

As a consequence of this requirement and having become aware of a proposed private development aimed at providing 'key worker' accommodation, in close proximity to the LRI in Jarrom Street, the Trust have been working with a developer for 18 months or so to agree a form of design that it believes would provide accommodation that would attract key NHS workers, including Nurses and Junior Doctors to the LRI.

Initial designs caused some concern to our local Councillor over the small size of the rooms, which were typically 25m² per unit. Having met the Councillor to understand his concerns, UHL staff made representations to the developer to increase the size of 50% of the units. This was accommodated by the developer so that of the 159 units now within the scheme, 71 of the units are 38m² and 8 are 31m². The figure of 50% was derived from the UHL experience that typically 50% of the key workers generally move on to their own accommodation after approximately the first 3 months.

In addition, with the development of the East Midlands Congenital Heart Centre facility at the adjacent Kensington Building, there will also be a requirement for patient relatives to be offered overnight stays and for which the smaller studios would be suitable.

The Trust have been involved in the evolution of the scheme design and have now reached a position where it feels that the balance of studio sizes will both meet the requirement of the Trust and take into account the previously expressed concerns of our local Councillor.

Next steps for the Trust will be to take a fully developed business case to the Trust Board which will include options for the occupancy arrangements including securing a lease for the whole development and for full management of the accommodation.