Waverley Gate 2-4 Waterloo Place Edinburgh EH1 3EG



Telephone: 0131 536 9000 www.nhslothian.scot.nhs.uk www.nhslothian.scot.nhs.uk

Date: 05/04/2024 Your Ref: Our Ref: 8406

Enquiries to : Richard Mutch Extension: 35687 Direct Line: 0131 465 5687 loth.freedomofinformation@nhs.scot richard.mutch@nhs.scot

Dear

FREEDOM OF INFORMATION – LINKS MEDICAL CENTRE

I write in response to your request for information in relation to Links Medical Centre

Question:

- 1. Provide a copy of the methodology or methodologies used by the NHS Lothian to calculate capacity in existing and proposed GP practices.
- 2. Confirm the methodology used by NHS Lothian to calculate the costs of new medical practices. This should include the methodology used to calculate the costs of delivering additional capacity at existing practices.

Answer:

We have enclosed the National calculation used to determine the costs required to provided GP premises for new housing proposals. This includes construction cost per sq metre and size requirements per GP. I have also attached a National note which includes the calculation of required GP space.

Question:

3. Provide a breakdown (by profession) of the number of GPs and other healthcare professionals and the whole-time equivalent for each roll employed at and/or working from the following medical practices:

a. Links Medical Centre.

Answer:

Links has the following staffing

8 GPs (5.32 FTE) 4 Nursing staff (2.4 FTE) 1 HCA (0.67 FTE) 2 Managers (2 FTE) 11 Admin Staff (9.53 FTE) 2 other AHPs (2.0 FTE)









Headquarters Waverley Gate 2-4 Waterloo Place Edinburgh EH1 3EG

Chair Professor John Connaghan CBE Chief Executive Calum Campbell Lothian NHS Board is the common name of Lothian Health Board Other NHS staff

DNs have an office Midwives use a clinical room once a week ROAM use a clinical room once a week

Question:

- 4. Provide a copy of the GP practice catchment area map or, if not available, written descriptions of the boundaries of each catchment for the following medical practices:
 - a. Links Medical Centre.

Answer:

See enclosed.

Question:

5. Provide floorplans, including the dimensions and function of each room, for the following medical practices:

a. Links Medical Centre.

Answer:

See enclosed.

Question:

6. Provide an accommodation schedule demonstrating how the floorspace is currently used for the following medical practices:

a. Links Medical Centre.

Answer:

the latest information that Capital Planning holds for Leith Links, this is dated 2016.

Question:

7. Provide a breakdown of the latest capacity calculation undertaken for the following medical practices:

a. Links Medical Centre.

Answer:

We do not have a capacity calculation for this practice. As per Section 17 of the Freedom of Information (Scotland) Act 2002 formally I must advise that we do not hold this information.

Question:

8. Provide a copy of the impact assessment(s) that NHS Lothian has undertaken to assess the impact of patients from new housing development in North East Edinburgh and Leith.

Answer:

We do not have impact assessments. As per Section 17 of the Freedom of Information (Scotland) Act 2002 formally I must advise that we do not hold this information.

Question:

9. Confirm the proposed additional floorspace at that NHS Lothian considers necessary to mitigate any perceived direct or cumulative impact of patients from new development in North East Edinburgh and Leith.

Answer:

Edinburgh HSCP anticipate that four new GP Practices will be required in the area. The size and number of actual new premises is to be determined.

I hope the information provided helps with your request

If you are unhappy with our response to your request, you do have the right to request us to review it. Your request should be made within 40 working days of receipt of this letter, and we will reply within 20 working days of receipt. If our decision is unchanged following a review and you remain dissatisfied with this, you then have the right to make a formal complaint to the Scottish Information Commissioner within 6 months of receipt of our review response. You can do this by using the Scottish Information Commissioner's Office online appeals service at www.itspublicknowledge.info/Appeal. If you remain dissatisfied with the Commissioner's response you then have the option to appeal to the Court of Session on a point of law.

If you require a review of our decision to be carried out, please write to the FOI Reviewer at the email address at the head of this letter. The review will be undertaken by a Reviewer who was not involved in the original decision-making process.

FOI responses (subject to redaction of personal information) may appear on NHS Lothian's Freedom of Information website at: <u>https://org.nhslothian.scot/FOI/Pages/default.aspx</u>

Yours sincerely

ALISON MACDONALD Executive Director, Nursing, Midwifery and AHPs Cc: Chief Executive Enc.

Method for Calculating Developer Contributions

1. Purpose

1.1. To encourage all Health Boards to adopt a similar method for calculating developer contributions by explaining the method used by NHS Grampian below.

2. Background

- 2.1. This guidance should help Health Boards calculate developer contributions for primary care premises where the projected population from new housing developments will place pressure on local primary care services. The intention is that one method, or at least very similar methods, will be used by all Health Boards in the future.
- 2.2. The issue is not what method is used, it is whether the chosen method clearly demonstrates (to Housing Developers, Local Authorities and Scottish Government Reporters) why the contribution is being sought and how it has been calculated. The method explained below should assist Health Boards demonstrate that the tests regarding planning obligations in Circular 3/2012 are met. Planning Circular 3/2012: planning obligations and good neighbour agreements (revised 2020) gov.scot (www.gov.scot)
- 2.3. Calculating a developer contribution is a small part of the overall process for securing developer contributions. Health Boards are required to be involved in all stages of the Local Development Plan (LDP) process from the call for sites stage through to the adoption of the Local Authority LDP. The LDP should make potential Housing Developers aware of the likelihood of a contribution being sought and what the contribution might be.

3. Recommended Floor Space Allowance per GP

- 3.1. Annex 1 of the GP Premises Guidance Note 1 for the GP Premises Directions sets out the guidance which Health Boards should use in determining floor area allowances for which GPs can be reimbursed under the GP Premises Directions. The Guidance Note provides recommended space schedules for premises accommodating different numbers of practitioners. This method for securing developer contributions is based on the recommended floor area allowances for GP practices as contained in the Guidance Note. https://www.sehd.scot.nhs.uk/gpweb/7/index7_dir.html
- 3.2. The Guidance Note provides floor space allowances in relation to GPs only, but the floor space allowances are applicable to other Healthcare Professionals (such as Advanced Nurse Practitioners) as they generally have the same floor space requirements as GPs. The method adopted in NHS

Grampian does not take into account timetabling for room usage within primary care premises, as there are a number of factors which affect the use of premises, such as staff vacancies, sick leave and annual leave.

4. NHS Grampian Methodology:

4.1. Potential Additional Patients

- 4.1.1.Identify <u>all housing developments</u> within the current LDP. Some Health Boards may have a number of Local Authorities within their Board area and therefore will have more than one LDP to review.
- 4.1.2. Identify the projected average household numbers for each Local Authority.

Each housing unit identified within the LDP will be classed as standard 3 bed housing. This is referred to within the LDP as a SHUE (Standard Housing Unit Equivalent). The projected average household numbers per SHUE can be obtained from The Household Projections for Scotland document produced by National records for Scotland which identifies the projected average household size per Local Authority Area. <u>https://www.nrscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/households/household-projections/2018-based-household-projections</u>

4.1.3. Calculate the number of proposed additional patients from each development: <u>Proposed Additional Houses x Average Household = Number of additional</u> <u>patients</u>

4.2. Existing Primary Care Premises

- 4.2.1. Identify the existing patient numbers for each primary care premises.
- 4.2.2. Identify the existing floor area within each primary care premises.
- 4.2.3. Identify which housing developments would be served by which primary care premises (patient boundary information will be required for this step).

4.3. Projected Premises Floor Area Requirements

4.3.1.Identify the primary care projected premises entitlement by calculating the existing patient numbers and the projected additional patients from the proposed housing developments. To do this you need to identify the total projected patient list and divide by 1500 (Patients per Healthcare Professional) to confirm the number of Healthcare Professionals required to serve the total projected patient list: (Existing patient numbers + projected additional patients) / 1500 = Number of Healthcare professionals required

4.3.2. Determine the floor space required for the number of GPs using the GP Premises Directions 2004, Guidance Note 1: Annexe 1, Schedule 1A (table extract below). <u>https://www.sehd.scot.nhs.uk/gpweb/7/index7_dir.html</u>

PARAGRAPH 51 (EFFECTIVE FROM 1 APRIL 2000 UNTI	L31 MAR	CH 2001																		
SCHEDULE 1A - PREMISES FOR 1 - 5 Practitioners																				
Gross Internal Areas (GIA) and National Building Cost A	llowance																			
Number of Practitioners	1 GP	2 GP	3 GP	4 GP	5 GP	6 GP	7 GP	8 GP	9 GP	10 GP	11 GP	12 GP	13 GP	14 GP	15 GP	16 GP	17 GP	18 GP	19 GP	20 GP
					3 6 P	6 GP	7.6P	0.0P	0 GP	10.95	11.0P	12 GP	13 GP	14 GP	13 GP	16 GP	17 GP	10 GP	10.0P	20.0P
Gross Internal Area (GIA) Allowance July 2002 - (sq m)		294	406	580	5 GP 644	730	797	885	967	1,049	1,126	1,201	1,304	1,383	1,542	1,609	1,703	10 GP 1,785	1,849	1,940
Gross Internal Area (GIA) Allowance July 2002 - (sq m)	199		406			730	797	885	967	1,049		1,201	1,304	1,383	1,542	1,609				
Gross Internal Area (GIA) Allowance July 2002 - (s.q.m) Practice Unit - (sq.m)	199 199.0		406			730 730.0	797 797.0	885 885.0	967 967.0	1,049 1049.0		1,201 1201.0 148.0	1,304 1304.0	1,383 1383.0 164.0	1,542 1542.0 179.0	1,609	1,703 1703.0 193.0		1,849 1849.0	

- Note:
 From 0.50 above the GP unit size would be rounded upwards i.e. a GP unit size of 2.50
- GPs would be rounded up to a 3GP size, a unit size of 2.49 would remain as a 2GP size.
- NHS Grampian includes the additional facilities floor areas included within Schedule 1A when calculating floor area allowances

4.4. Identifying the Requirement for Developer Contributions

- 4.4.1.A projected shortfall/excess in primary care floor space can be calculated by subtracting the existing floor area from the projected floor area. If the existing floor area is equal to or larger than the projected floor area allowance, then the premises has enough space to accommodate the additional patients from the developments and developer contributions are not required.
- 4.4.2. If the existing floor area is smaller than the projected floor space then this shows that there will not be enough space to accommodate the total number of existing and future patients. Therefore developer contributions will be required to fund the increase in floor space required to accommodate additional patients from a new housing development.
- 4.4.3. It might be the case that the primary care premises has insufficient floor space for its patient list even before any housing is built. In that case, developer contributions can still be sought to mitigate the impact of the additional patients from any new housing development.
- 4.4.4. It should be borne in mind that the Housing Developer is only required to pay for the impact of the development. The Housing Developer is not required to pay to resolve existing shortfalls in floor space. Accordingly, they should only be expected to contribute to the floor space requirements generated by the development, even if that means there would still be a shortfall in floor space after the additional floor space has been created. The Health Board will need to identify a separate funding source to cover the existing floor area shortfall.

5. Type of Mitigation Measures Required

5.1. Confirmation on whether the extension/new build rate or internal reconfiguration rate is required. As part of the LDP Supplementary Guidance or Planning Note on Developer Obligations an extension/new build rate and

an internal reconfiguration rate should be agreed with the Local Authority. Evidence on how these figures have been derived will be required.

- 5.2. The type of mitigation measure required e.g. internal reconfiguration, extension or new building would need to be agreed through engagement with your Health and Social Care Partnerships. It is advisable to establish early on in the process what specific infrastructure will be required. Having a clear facilities plan will demonstrate to Housing Developers and others why a contribution is required.
- 5.3. In the situation where some primary care premises will have a floor area shortfall but no room to extend and there are no plans to replace the facility then an internal reconfiguration rate should be used.
- 5.4. NHS Grampian have created an infrastructure requirements spreadsheet which is shared with each Local Authority as the evidence base. NHS Grampian will engage with relevant HSCPs on a regular basis to ensure the infrastructure requirements identified are up to date. A link to a typical spreadsheet is attached below.



Allan Robertson - Property Planning Manager, NHS Grampian David Murdoch - Head of Local Care Infrastructure, Scottish Government

Location	Build Cost per sqm		Floor Area (sqm) per GP sqm (3)		Patients per GP (4)		Average household Size (5)		Obligation per SHUE
Permanent Accommodation (1)	£4,434.61	x	271	/	1500	x	2.30	=	£1,842.7
nternal Reconfiguration (2)	£2,484.38	x	271	',	1500	x	2.00	=	£0.0

Notes

1 Total project cost based on information taken from Quality and Efficiency document produced by Scottish futures Trust & updated to 4Q 2022 increased by 5% inflation.

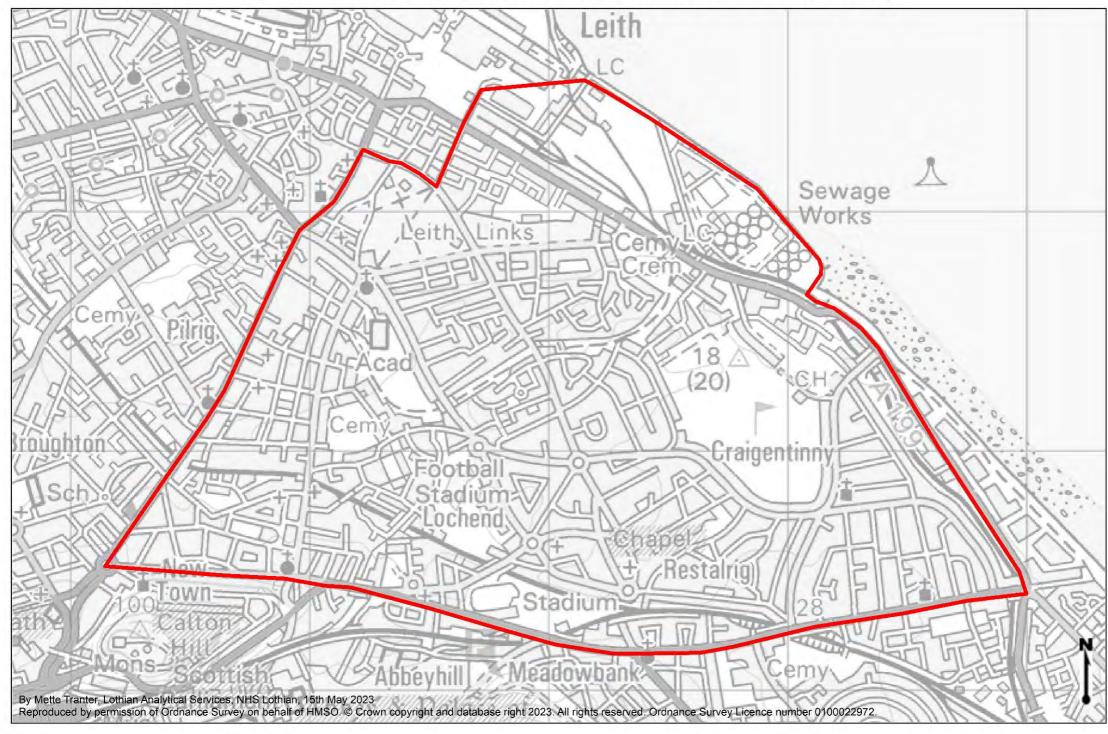
2 Total project cost (excl. external works) based on information taken from Quality and Efficiency document produced by Scottish futures Trust & updated to 4Q 2022 increased by 5% inflation

3 271sqm floor area allowance for 1GP. Figure taken from Scottish Health Planning Notes. Please note that although Guidance refers to a GP, this can also include other Healthcare Professional.

4 1500 patients per GP

5 Household size based on Local Authority Area for 2022 taken from household projections for Scotland, National records for Scotland

Approved boundary fro Links Medical Centre (71398)



PREM 1A

List of Rooms

Print Form

State rooms used, nature of use and number of sessions

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			am	md	eve	am	md	eve	am pm	eve	am	md	eve	am	mq	eve	am	md
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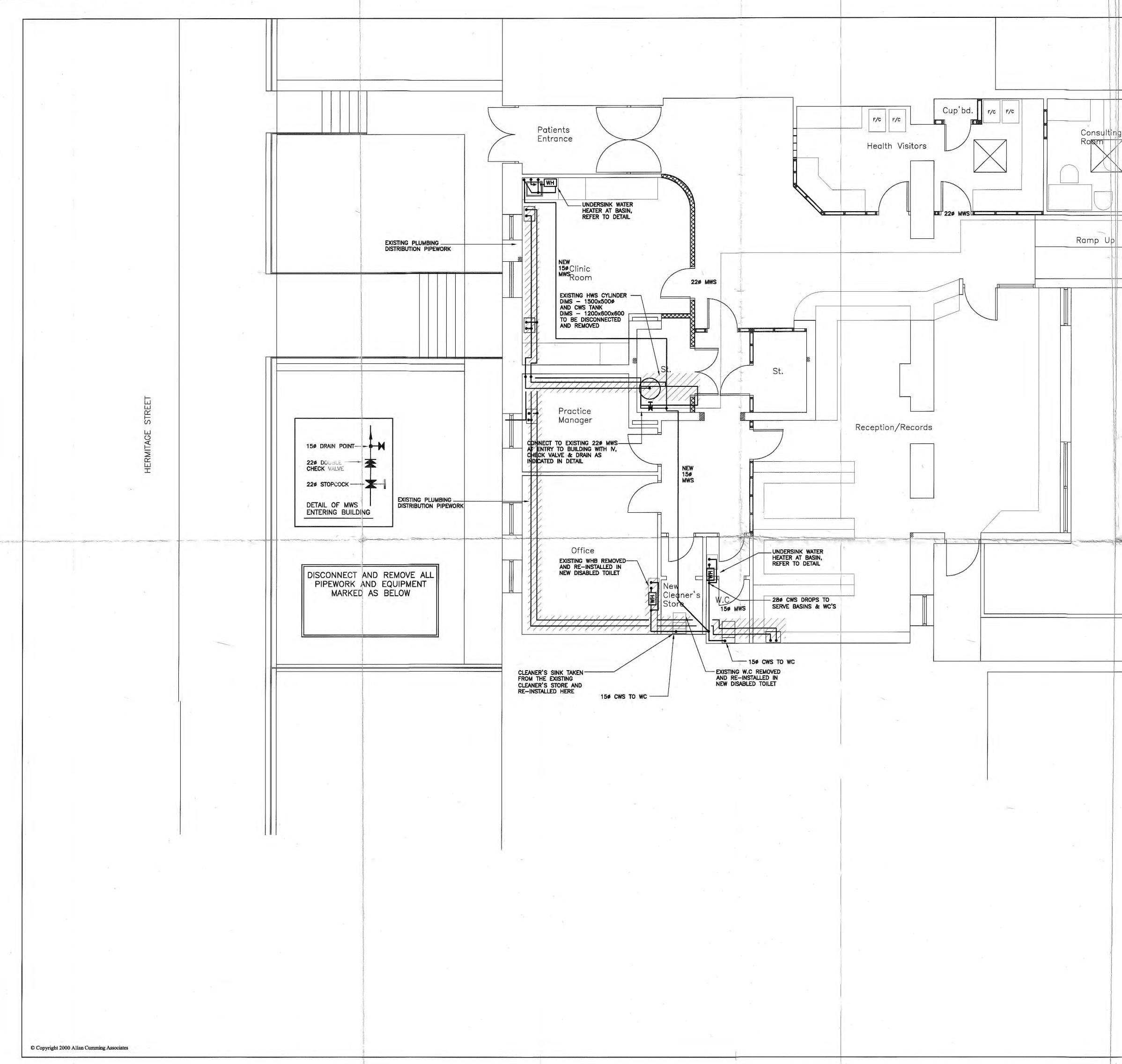
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Prem 1A - list of rooms (v1)

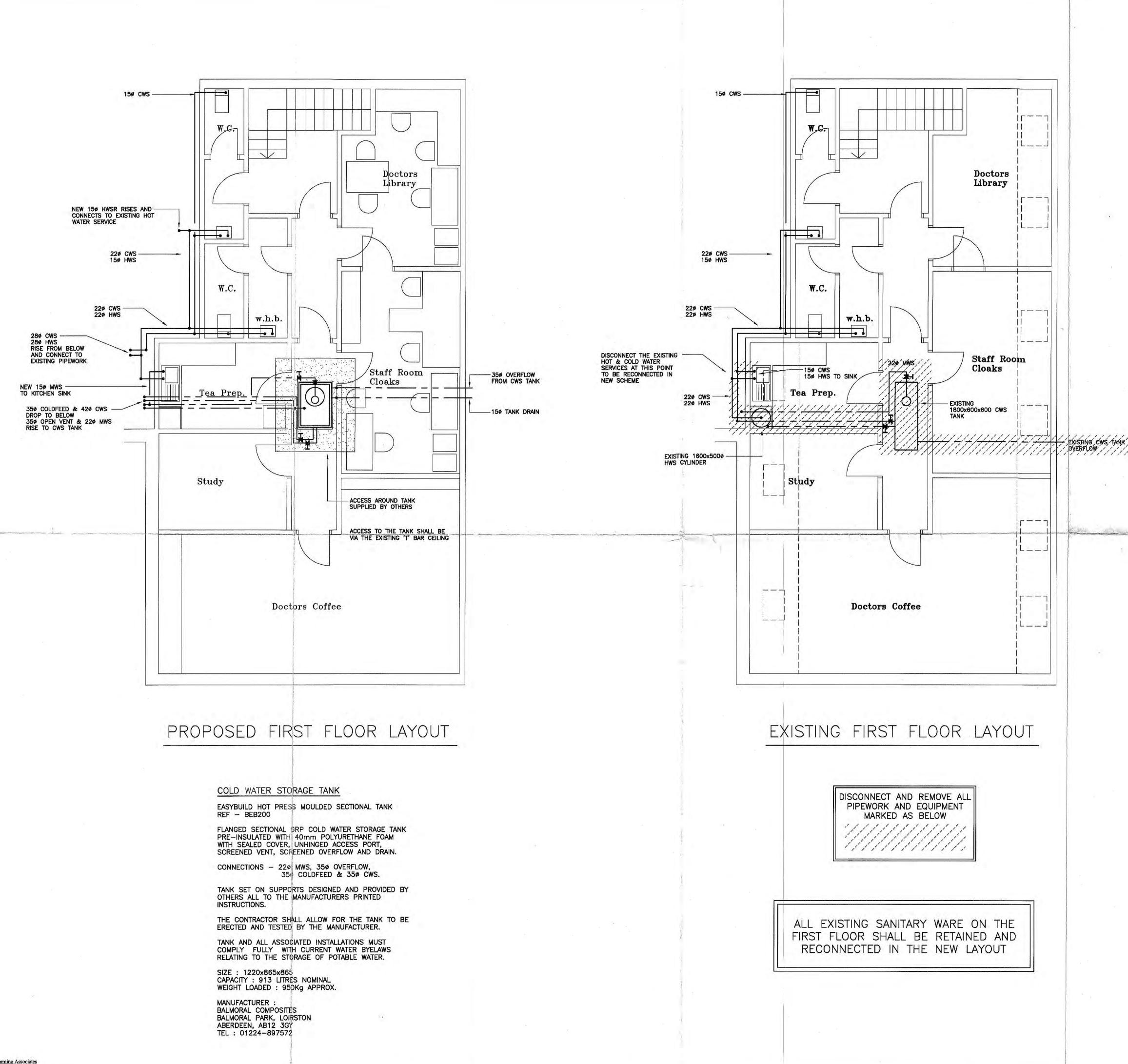
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Prem 1A - list of rooms (v2)

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Notes 1. THIS DRAWING SHALL BE READ IN CONJUNCTION WITH THE CONTRACT SPECIFICATION. 2. ALL INSTALLATIONS SHALL COMPLY FULLY WITH CURRENT WATER BYELAWS, REQUIREMENTS OF BS 6700 AND LOCAL WATER AUTHORITIES. 3. ALL FITTINGS, PLANT AND EQUIPMENT SHALL BE INSTALLED, REGULATED AND TESTED IN ACCORDANCE WITH THE MANUFACTURERS PRINTED INSTRUCTIONS. ALL PIPEWORK, FITTINGS AND EQUIPMENT SHALL BE SO INSTALLED TO PROVIDE SYSTEMS FREE OF AIR LOCKS, WATER HAMMER OR LEAKS. ALL INSTALLATIONS SHALL BE UNDERTAKEN BY Store REGISTERED/QUALIFIED PLUMBERS. ALL SERVICES IN COPPER PIPEWORK TO BS2871 PART 1: TABLE X ALL FITTINGS TO BE NON-DEZINCIFIABLE AND COMPLY WITH BS 864 ALL CAPILLARY FITTINGS SHALL HAVE LEAD FREE SOLDER RINGS AS YORKSHIRE POTABLE RANGE N N XX STOPCOCKS TO BS 1010 GATEVALVES TO BS 5154 CHECK VALVES TO BS 6282 : PART 1 WITH TEST COCK TO BS 2879, DRAIN VALVES TO BS 2879 ALL APPLIANCES SHALL HAVE INDEPENDANT ISOLATING BALLOFIX VALVES ALL VALVES SHALL BE FULLY ACCESSABLE AND BE PROVIDED WITH IDENTIFICATION LABELS DRAIN VALVES SHALL BE PROVIDED AT ALL LOW POINTS IN ALL SYSTEMS Main Waiting ^{9.} 10. ALL PIPEWORK IN FLOOR/CEILING VOIDS DUCTS AND ENCLOSURES SHALL BE FULLY INSULATED and a second WITH 25mm THICK SECTIONAL MINERAL FIBRE MATERIAL FINISHED WITH REINFORCED ALUMINIUM FOIL FACE FINISH AND MATCHING TAPED JOINTS. IDENTIFICATION LABELS IN COMPLIANCE WITH BS 1710 SHALL BE FIXED TO INSULATION ON ALL SERVICES. 11. ALL PIPEWORK SHALL BE FULLY ACCESSABLE. 12. HOT WATER RETURN CONNECTIONS TO BE A MAXIMUM OF 300mm FROM APPLIANCES 13. ALL ITEMS OF SANITARY WARE SHALL BE CHECKED WITH ARCHITECT PRIOR TO ORDERING. a second and a s - Contraction - -----6 27/6/00 MP WHB MOVED FROM NEW DISABLED TOILET TO NEW CLEANERS STORE. WHB AND WC MOVED FROM NEW CLEANERS STORE TO NEW DISABLED TOILET CONNECTING BIDE WORK ADDED PIPE WORK ADDED. Init Amendment Rev Date ALLAN CUMMING **ASSOCIATES** Building Services Consulting Engineers Dunedin House, Newhailes Road, Musselburgh EH21 6SJ, Tel: 0131 665 1655 Fax: 0131 665 1656 E-mail: Reciptient@acace.demon.co.uk Project LINKS MEDICAL CENTRE 4-5 HERMITAGE PLACE EDINBURGH Title BUILDING SERVICES GROUND FLOOR NORTH WATER SERVICES EXISTING, PROPOSED LAYOUTS AND DOWNTAKINGS Client LINKS MEDICAL GROUP 4-5 HERMITAGE PLACE EDINBURGH Status CONSTRUCTION Drawn MP Approved Scale 1:50 27 JUNE 2000 Drawing Number Revision ED469/41



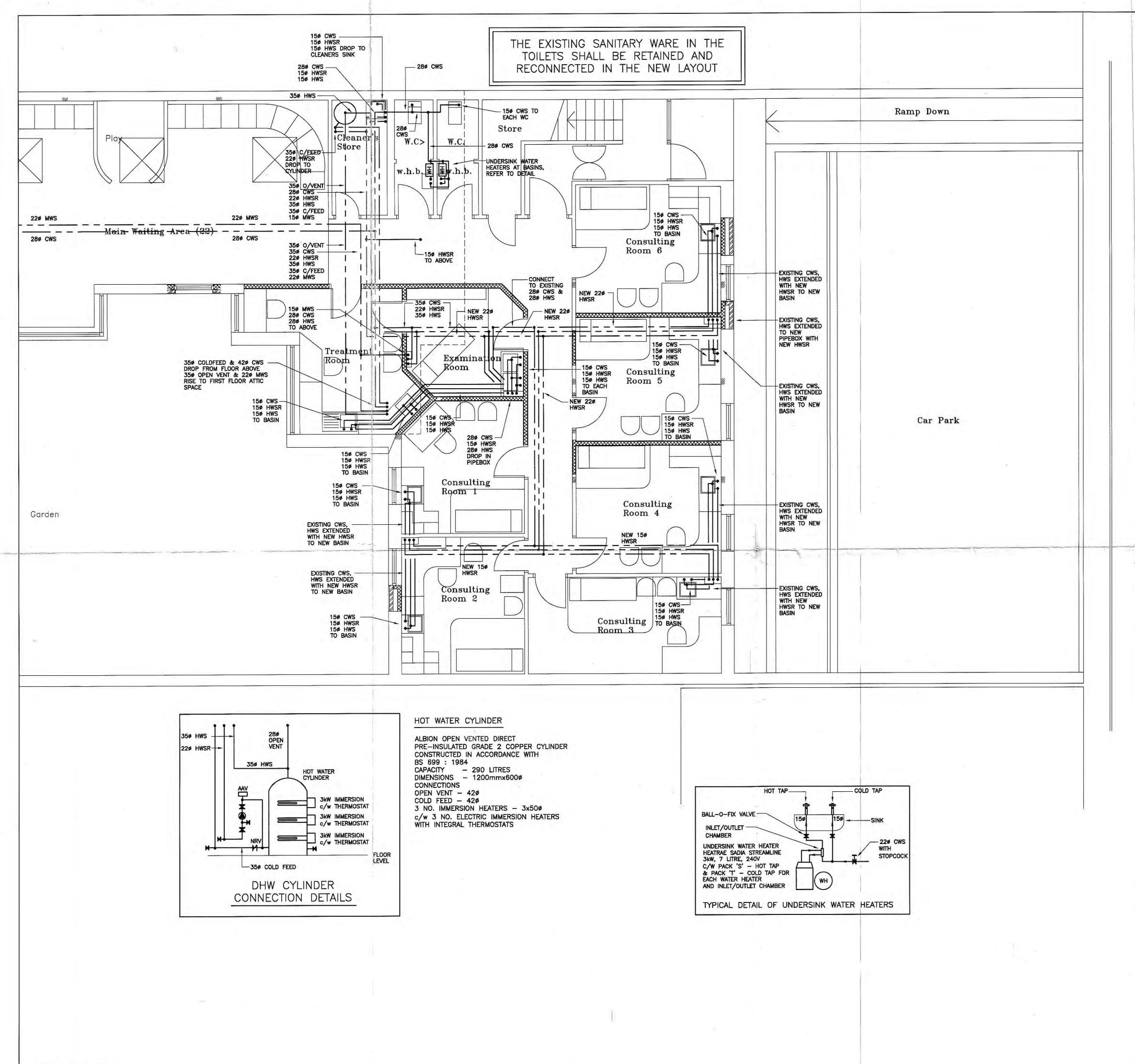
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Date Init Amendment ALLAN C CUMMING ASSOCIATES Building Services Consulting Engineers Dunedin House, Newhailes Road, Musselburgh EH21 6SJ, Tel: 0131 665 1655 Fax: 0131 665 1656 E-mail: Reciptient@acace.demon.co.uk Project LINKS MEDICAL CENTRE 4-5 HERMITAGE PLACE EDINBURGH Title BUILDING SERVICES FIRST FLOOR WATER SERVICES EXISTING LAYOUT & DOWNTAKINGS AND PROPOSED LAYOUT Client LINKS MEDICAL GROUP 4-5 HERMITAGE PLACE EDINBURGH Status APPROVAL/TENDER Approved AC Drawn IJR 1:50 2 FEBRUARY 2000 Drawing Number ED469/404



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Notes

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