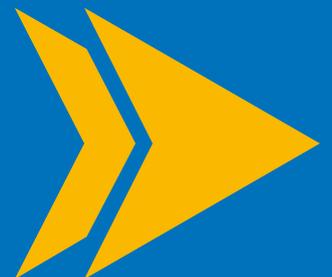


**THE LIFT  
COUNCIL**

Enabling  
in-community  
care for  
20 years

# FIVE-YEAR FORWARD VIEW

**NHS Local Improvement Finance Trust (LIFT)**



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# FOREWORD

This year, the NHS Local Improvement Finance Trust (LIFT) programme celebrates its twentieth anniversary. It is the most successful public infrastructure project that most have never heard of, but its achievements are there for all to see: over 350 high-quality, flexible primary and community care facilities delivered, with nine out of ten of these being in areas of above average health needs. One of the founding promises of the NHS was a health centre in every community. 73 years later, the NHS LIFT programme has helped carry us towards that goal.

However, there is still much more to do. The last year has shown the extraordinary capacity, ingenuity, and resilience of our Health Service. Everyone from clinicians to support staff have risen to the occasion in the face of events that few of us could have foreseen. In this, buildings delivered through the NHS LIFT programme have played a part in enabling in-community care to continue, serving as vaccination centres and overflow wards.

Any anniversary presents the opportunity to look to the future, as well as marking the past and NHS LIFT has a bright future. The success of the integration and flexibility of the NHS LIFT estate is being built upon in the Cavell Centre pioneer schemes, intended to service between 25,000 to 150,000 patients. With the NHS Long-term Plan in place, the LIFT estate can continue to support its core goals, including creating extra capacity for critical care in hospitals. NHS LIFT buildings serve as exemplars for community integration, marrying the co-location of services with accessibility and connectivity.

But LIFT is more than just a delivery model. The locally embedded expertise of the 49 LIFT companies, including Citycare, across the country, provides a reservoir of support that the NHS can draw upon to meet its biggest challenges. Alongside tackling the £10bn maintenance backlog identified by Naylor, LIFTCos are working with the public sector to support our Health Service in moving towards net zero and helping create a greener future of us all.

This document drawn up by The LIFT Council provides examples of how the NHS LIFT programme can be adapted as a tool to service the needs of our NHS for another twenty years. This truly unique partnership between the public and private sectors has so much still to offer and I hope there will be another hundreds more LIFT buildings and projects in the years to come.

It is my pleasure to be Chair of the Citycare LIFT company (LIFTCo) and witness the work this LIFT initiative has done in transforming the lives of local communities in Hull.



**The Rt. Hon. Alan Johnson**  
**Chair**  
**Citycare LIFTCo**



# STRATEGIC PRIORITIES FOR THE NHS LIFT PROGRAMME 2021-26

Our NHS is emerging from a period in which it has faced unprecedented demands but must still confront the same long-term challenges as before. Some issues like the estate maintenance backlog identified by the Naylor Review will have only worsened over the pandemic; whilst unfolding climate change underpins the necessity of the NHS estate moving to net zero in the long-term. Meanwhile, the longer-term impacts of the pandemic are still relatively unknown, and we are entering a period where any number of fresh healthcare challenges will emerge that demand careful thought and the right tools to address.

In tandem with this, the next five years are also critical for the NHS LIFT Programme as we see the current 25-year term coming to an end in many areas where LIFT has been vital in helping meet the health needs of local communities across England.

The NHS LIFT Programme and LIFTCos have a 20-year track record of delivering the best possible outcomes for the NHS and local communities - from helping to better-integrate health and social care services at a local level; creating extra care capacity and supporting the post-pandemic recovery; building much needed flexibility in care provision; through to supporting the NHS' move towards net zero, for 20 years LIFT has demonstrated the vital role it can play in meeting the country's healthcare priorities.

Looking ahead to a critical period for the health sector, we believe it is time for stability and continuity, with proven partnership models such as LIFT able to build on a 20-year track record by continuing to support the NHS and local communities in meeting the challenges ahead. The LIFT Council therefore has five strategic priorities for the NHS LIFT programme over the next 5 years.



# 1

## **A clear expression of support for the future of LIFT**

Our main message to policymakers and our valued partners in the public sector is that we see the last twenty years as being the end of the beginning, not the beginning of the end for our partnership. The LIFT Council believes it is essential for the future of our NHS estate that the Government continues to support the proven public-private partnership model that LIFT offers.

# 2

## **A role for third-party providers from the LIFT estate in developing Cavell Centre pilots**

The successes of LIFT in providing flexible facilities for primary and community care is reflected in the Department for Health and Social Care's plans for the Cavell Centre pioneers. The LIFT Council hopes that the locally embedded expertise of the 49 LIFTCos will be considered for delivering these projects.

# 3

## **Use of the NHS LIFT model to support activities in health care infrastructure, such as the 40 new hospitals programme**

One of the most immediate priorities for policymakers and Health Service leaders is utilising the upcoming refresh of the Health Infrastructure Plan (HIP) to express a clear viable vision for the future of the LIFT model as a one that can continue to enable in-community care in the NHS.

# 4

## **Use of the NHS LIFT model as a key tool to create Integrated Care Systems (ICS) through the Health and Social Care Bill**

The Government is also embarking on major reforms of the NHS structure by embracing a move to integrated care that have always been at the heart of LIFT - we believe that the NHS LIFT model, and LIFTCo representatives, should be used as a key tool in the development of statutory Integrated Care Systems (ICSs). This would help facilitate closer coordination of other local services to continue the success story of co-location and integration that has always been integral to LIFT.

# 5

## **Effective local public sector partnerships with the creation of Integrated Care Systems**

Most importantly, we hope that the creation of ICSs will provide the opportunity to develop the effective local public sector partnerships seen in LIFT further. The role of ICSs in meeting NHS estate needs in their areas are unclear and we wish to see the Government set out more detail of these ahead of the Bill becoming law.

The LIFT Council believe that these asks of Government and health leaders, combined with the work set out in the themes we have touched upon above, will have set NHS LIFT on the path to another twenty years of successfully supporting in-community care.



# EFFECTIVE LOCAL PARTNERSHIPS INFRASTRUCTURE PLANNING FOR NORTH CENTRAL LONDON CCG AND ICS

The move towards integrated care systems depends on infrastructure planning to enable high-quality patient care. This covers a range of issues, from well-designed facilities to installing the right equipment, all elements of effective infrastructure planning are needed to support the health system in finding new ways of working and delivering key services.

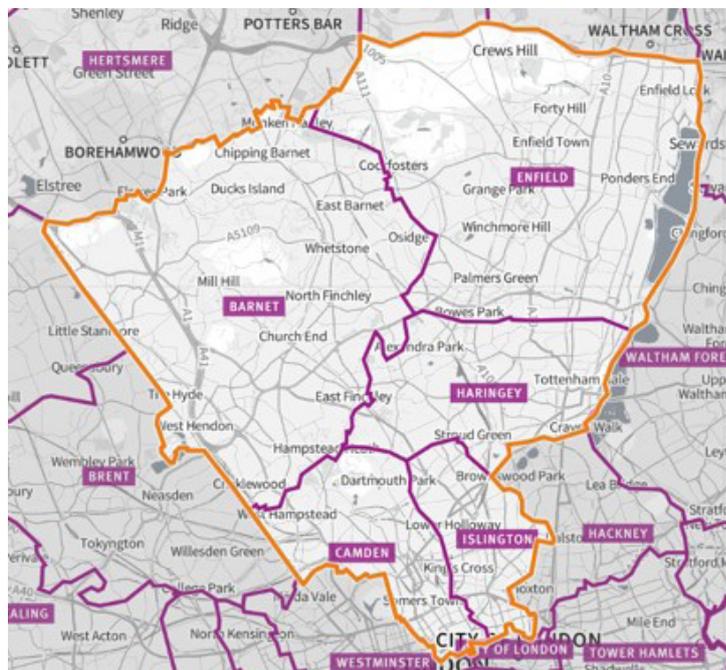
Camden & Islington Estates Partnership (CIEP) and North London Estate Partnerships (NLEP) were engaged by North Central London (NCL) ICS to work with the central estates team to create localised infrastructure plans based on the view of infrastructure as the key enabler of the healthcare system. Infrastructure data in NCL had been held by locally-led directorates prior to this, so the aim was to use the expertise of the LIFTCos to embed a systematic approach to estates planning by gathering and analysing the data, and engaging to inform the project pipeline.

Drawing on the embedded expertise of the LIFTCo, bespoke plans for each individual borough and primary care network (PCN) within NCL were created. These acted as a catalyst for developing clinical strategies, informing the priority investment pipeline and providing each locality with data to support its development ambitions.

This was achieved through the detailed mapping of healthcare and community assets, alongside analysis of both local demographics and the primary care workforce to help PCNs plan for broader estates requirements. With capacity modelling undertaken to assess the future growth, priority and opportunity areas were identified for the ICSs.

The process put a renewed emphasis on the role of Local Estates Forums in developing a clinical vision across NCL and facilitated engagement with 30 PCNs and 150 individuals. It also provided an opportunity to assess the impact of COVID-19 on NCL's estates whilst seeking to improve quality, control costs and make the most of existing opportunities.

LIFT is so much more than just a development model, and in the work with NCL we see how the valuable partnership with LIFTCos is helping to inform NHS estates needs for the future.



# INTEGRATION OF SERVICES THE JEAN BISHOP INTEGRATED CARE CENTRE, HULL



Creation of integrated care systems will be at the heart of the next wave of NHS reforms, but the NHS LIFT programme has been delivering integrated care for twenty years. With 70% of total health and care expenditure focused on the 30% of the population with one or more long-term conditions, the number of people in this category is projected to increase from 15m to around 18m by 2025. This is the on-going challenge that integrated care and the NHS LIFT programme must meet.

Building on the aims of LIFT to tackle health inequalities, LIFT Council member Citycare teamed with NHS Hull Clinical Commissioning Group to help tackle the high prevalence of long-term health conditions among the city's population, especially respiratory and circulatory disease. With a third of older patients admitted to hospital having no clinical need to be in a hospital bed and high readmission rates, the need to facilitate more care out of hospital settings was clear. The answer was simple: The Jean Bishop Integrated Care Centre (ICC).

The £10m building delivered on the site of an old school was the first scheme of its kind to open nationally. Adopting a commissioner-led approach and situated adjacent to extra care housing, The Jean Bishop ICC provides anticipatory planning for the local frail population. In aiming to reduce unplanning admission rates among the over-65s by 20% the CCG would be able to save between £1.6m to £5.8m per year for reinvesting in new services.

Since it welcomed its first patient in May 2018, the Jean Bishop ICC has: had more than 2000 patients and care home residents receive an Integrated Geriatric Care Assessment; helped drive a 29% reduction in emergency admissions for patients living in their own homes; seen a 24.3% reduction in emergency admissions in targeted care homes; and saved an average of £110.17 per patient, per year on drug costs.

# POST-PANDEMIC RECOVERY

## RICHARDSON COMMUNITY HOSPITAL

### BARNARD CASTLE

2020 was year that tested our National Health Service. Clinicians and healthcare facilities were expected to cope with a pandemic, whilst also maintaining vital treatments and overseeing the rapid roll-out of a vaccination programme. Twelve months on, they have risen to meet this gargantuan task, supported by a resilient and flexible NHS LIFT estate.

Nowhere epitomises this better than the Richardson Community Hospital in County Durham, run by the Durham & Tees Community Ventures LIFTCo, a member of The LIFT Council. Operational from March 2007, this facility offers a variety of NHS services, including:

- Out-patient clinics, including dental surgery
- District nursing and health visiting
- Antenatal, prenatal support services and community
- Midwifery
- Community paediatrics
- Podiatry
- Community dental services
- Audiology/hearing screening
- Palliative care service
- Day hospice: 14 beds
- In-patient respite: 46 beds



As the severity of the pandemic became apparent, the Community Hospital was called to help. The previously mothballed 24-bed Lawson Ward was recommissioned and brought back into action to support NHS with the anticipated bed pressures. Additional assistance and support were also made available by increasing bed capacity in the Starling Ward from 16 to 24 beds to help relieve pressure on local hospitals.

Further variation works on the premises also helped Richardson remain COVID-secure, including the timely installation of hand sanitising dispensers, floor and lift and stickers as well as posters and the removal and relocation of chairs and equipment for social distancing.

As the focus of the wider NHS moved from ensuring capacity to COVID-19 prevention via vaccination, NHS England identified the Richardson Community Hospital as a Priority 1 Vaccination Site. Facilitation of the vaccine programme saw jabs being administered from the Day Hospital Area on 18-20 December. Liaising with a network of local GPs, led by the Barnard Castle Surgery, nearly 1,000 vulnerable residents were able to receive their Pfizer vaccine in three days. This rapid start helped the Teesdale Primary Care Network reach 20,000 COVID vaccinations by the end of April this year.

The resilience and flexibility of projects delivered under the NHS LIFT programme has helped support our NHS during one of its most difficult years. We hope there will be more assets like the Richardson Community Hospital from LIFT partners to come over the next 20 years.



# FLEXIBILITY IN CARE PROVISION

## TESSA JOWELL HEALTH CENTRE

### SOUTH LONDON



The newest NHS LIFT building, the Tessa Jowell Health Centre in Dulwich, south east London celebrated its first anniversary in May 2021, with new figures highlighting the important role the building is already playing to support local residents and the NHS at such a critical time. The health centre opened at the height of the first lockdown, and has been vital to the local NHS response to COVID-19, treating patients closer to home so hospitals could focus on critical care.

The new two-storey healthcare building was designed to integrate a range of health and wellbeing services all under one roof to help meet the needs of the growing local population. Services range from a GP surgery, mental health provision and adult and children's community services, through to state-of-the-art medical facilities such as a renal dialysis unit, cardiology and respiratory diagnostics.

The Tessa Jowell Health Centre was delivered via the NHS Local Improvement Finance Trust (LIFT) Programme, a public private partnership with Community Health Partnerships, working in collaboration with NHS South East London Clinical Commissioning Group, South London Health Partnership (LIFT company) and LIFT Council member Fulcrum, to deliver the £22.5m project. Despite the huge challenges created by COVID-19, the new building was completed and opened to patients in May 2020 - a great example of the public and private sectors working in partnership to support the NHS at such a challenging time.

After a year of being open, new figures have highlighted the key role the Tessa Jowell Health Centre is already playing to support local residents and the NHS including:

- Over 50,000 COVID-19 vaccinations administered to local residents (as of May 2021)
- The Renal unit, now serving over 60 dialysis patients from the local area daily
- Blood tests for more than 40,000 patients at the centre, reducing waiting times for results
- 3,500 physiotherapy patients supported
- Hundreds of mothers and children supported through maternity and health visiting services

The new building was named after the late Baroness Tessa Jowell in recognition of the huge contribution she made to the Dulwich constituency as its MP and to wider healthcare services across London.

Partners in the NHS LIFT programme helped delivered better local care for patients, whilst also supporting the long-term aims of the NHS to move certain services out of hospitals and into the community. Integrated care delivered through the work of South London Health Partnership and LIFT has helped improve both patient outcomes and conserve valuable resources in the local health system.

**Baroness Jowell's daughter Jess Mills said:**

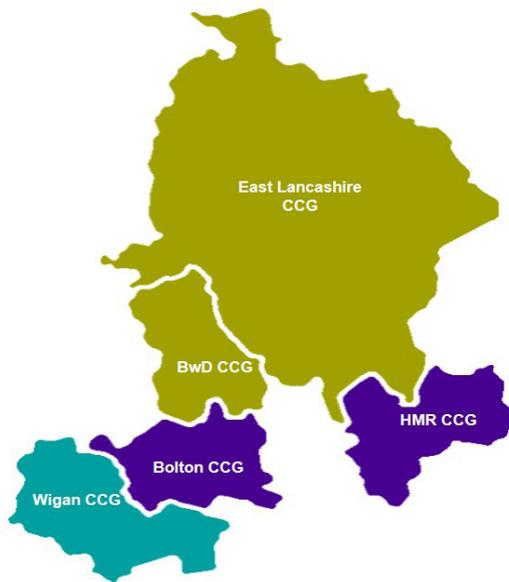
*"Mum was endlessly passionate about helping her constituents and doing everything she could to ensure accessible healthcare for all, so it's the perfect tribute to see this new health centre already making such a huge contribution to local people. It has been such a challenging year for all of us but this first anniversary is a chance to celebrate what can be achieved by everyone working together to support the NHS and local communities, just as she would have wanted."*



# MOVING TOWARDS NET ZERO

## ONE PARTNERSHIP CARBON REDUCTION STRATEGY

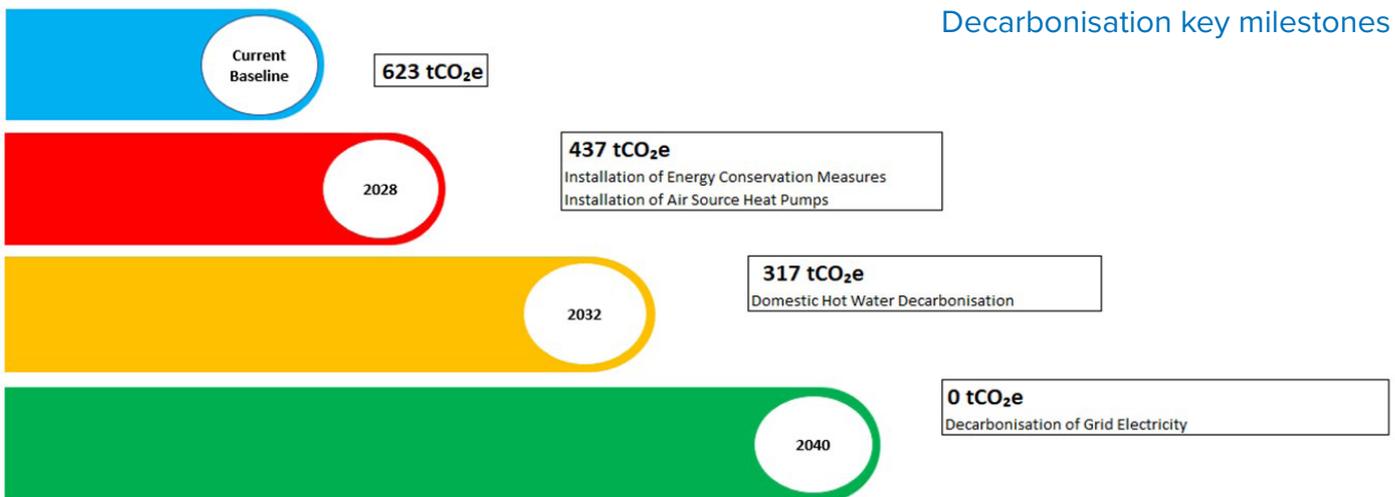
Every part of our society is on the road to net zero and the primary and community care estate has a vital role to play in reaching that goal. In the North West, One Partnership has been working across its NHS LIFT areas in East Lancashire, BRAHM and Foundation for Life to deliver a carbon reduction strategy for its 23 LPA/LRA buildings.



So far One Partnership have: sourced electricity from certified renewable sources; put in place good data on energy and carbon usage through digital dashboards; funded 23 investment audit upgrades at a cost of £60,000; linked lifecycle investment to its decarbonisation aims; and identified and funded a pilot project in of its LIFTCos.

Audit findings conducted as part of the process concluded that, by changing behaviours and building operations, there were some quick wins, for example by aligning building management services operational hours with building systems. Investment could be quickly put into air source heat pumps, LED lighting and solar PV, with the adaptability of NHS LIFT buildings meaning air source heat pumps could be used for underfloor heating. Moreover, integrating decarbonisation aims into lifecycle planning would mean expanding the use of LED lighting and replacing boilers. The proof of these measures was reflected in the typical weekly electricity profile for the St Peter's Health Centre in Burnley, which saw a 34.7% reduction in emissions.

### Decarbonisation key milestones



One Partnership has an ambitious decarbonisation plan with the installation of energy conservation measures and air source heat pumps across its building by 2028, decarbonisation of the hot water systems by 2032 and decarbonisation of grid electricity by 2040. With these plans and more, LIFT has an important role to play in helping the NHS estate realise its net zero ambitions.

As the severity of the pandemic became apparent, the Community Hospital was called to help. The previously mothballed 24-bed Lawson Ward was recommissioned and brought back into action to support NHS with the anticipated bed pressures. Additional assistance and support were also made available by increasing bed capacity in the Starling Ward from 16 to 24 beds to help relieve pressure on local hospitals.

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The resilience and flexibility of projects delivered under the NHS LIFT programme has helped support our NHS during one of its most difficult years. We hope there will be more assets like the Richardson Community Hospital from LIFT partners to come over the next 20 years.



St Peter's Health Centre in Burnley

# UTILISATION AND TRANSFORMATION CLAY LANE RENAL PROJECT, COVENTRY

Ten years ago, renal patients in Coventry City were faced with a lack of access to services and a journey over to Warwickshire to receive their treatment. At the same time, a site at Clay Lane in the city offered an area of under-utilised accommodation that could be used to relocate additional services into the building.

Step forward the local NHS LIFT company (LIFTCo), Arden Estates Partnership, backed by LIFT Council member gbpartnerships alongside Community Health Partnerships (CHP) for 14 years. They introduced a renal dialysis unit that would support the delivery of hospital services within the local community.

The completion of the building in 2013 saw the provision of three local GP practices, a modern pharmacy and more space for University Hospital Coventry and Warwickshire, who run the renal service. Whilst equity investment was provided by the public sector, the remaining equity and senior debt of the £2.6m cost came from the third-party provider.

The involvement of the LIFTCo did not end there. In 2015, Arden Estates Partnership was asked by the CCG to undertake a utilisation and occupancy report that identified that only an average of 16 out of 53 rooms were used in operational hours, resulting in void costs of £100,000 per annum for the CCG.

Arden's local estates team's embedded role within the system meant that they were plugged into the needs of the Local Estates Forum and STP estates group. These connections meant they were aware of the need for additional renal dialysis capacity to support local patients. The LIFTCo worked with NHS estates and local partners on getting stakeholder engagement and buy-in for reconfiguration works and supporting implementation of the findings of the strategic review recommendations. The result was a state-of-the-art centre to provide treatment for 47 renal patients per week and better use of NHS building space and resources when it opened in 2018.

Getting the most out of the valuable, flexible spaces provided by NHS LIFT buildings is one of the key challenges facing the Health Service. As the Clay Lane case proves, the LIFTCos are the perfect partners to work with the NHS on this issue given their in-depth understanding of the facilities and how these can be adapted to suit the evolving care needs of the local population.



The Clay Lane Renal Unit

When I was elected as Chair of The LIFT Council earlier this year, celebrating the 20th anniversary of the NHS LIFT programme was at the forefront of my mind. We want to use this milestone to celebrate the achievements of LIFT and the LIFTCos. That means not just highlighting the hundreds of LIFT buildings all over England or the £2.5bn in investment delivered through the programme or 1,400 clinicians and local public services personnel supported, but also what I call the 'Faces of LIFT'.

The last two decades has seen the LIFT programme develop a collective expertise and memory through the hundreds of people who have been involved in it. I see this experience, founded on the close partnerships with the public sector that LIFT is built on, as the biggest asset that we can offer our NHS over the next twenty years.

The LIFT Council brings together voices from all sides of the NHS LIFT community, but the common thread connecting us all is our commitment to the -L part of the LIFT, local. Each of the 49 LIFTCos across the country has served as more than just a development vehicle, but also as valuable support for our NHS estates partners and local communities. One of the most important issues facing our Health Service is ensuring there will be quality health infrastructure for the coming generations and NHS LIFT partners want to play a part in supporting the NHS to deliver this.

In this document, The LIFT Council has set out our view of how and where the LIFT programme and LIFTCos can continue to enable in-community care, whether that is continuing the vital work of integrating care that sits at the heart of LIFT to supporting the shift to net zero across the NHS estate. The main lesson of the last 12 months has been the role that high-quality, flexible health infrastructure must play in helping our NHS carry on in the face of overwhelming challenges.

But for an open discussion to happen, the tone of the debate around public-private partnerships in the health space must shift. After two successful decades of supporting the NHS and local communities, the end of LIFT's 25-year team is approaching in a number of areas, but we see this as a beginning not an end - The LIFT Council members are clear in our commitment to continue working with our public sector partners, in contrary to the cut and run charge that is all too often laid at the door of third-party providers. We are excited by the opportunities presented by the Cavell Centre pioneers, which will build on the successes of the LIFT estate and hope to play a role in the next wave of delivering primary and community care.

Alan Johnson wrote about the truly unique partnership in his foreword, and I believe this has been the recipe for the successes of NHS LIFT over its first twenty years - as we now look ahead to the next 20 years, it is a partnership that I hope will evolve and grow to continue supporting in-community care.



**Sarah Beaumont-Smith**  
**Chair of The LIFT Council and**  
**CEO of Fulcrum Infrastructure**



If you would like to discuss more about The LIFT Council's work, please contact the Secretariat, Connect: [theliftcouncil@connectpa.co.uk](mailto:theliftcouncil@connectpa.co.uk)

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