

<b>Title of Meeting:</b>	NY CCG Primary Care Commissioning Committee	<b>Agenda Item: 6.5a</b>	
<b>Date of Meeting:</b>	27 May 2021		
<b>Paper Title:</b>	Mowbray Square GP Practices Rent Reimbursement	<b>Session (Tick)</b>	
		<b>Public</b>	X
		<b>Private</b>	
		<b>Development Session</b>	
<b>Responsible PCCC Member Lead</b> Lisa Pope Deputy Director Strategy and Integration		<b>Report Author and Job Title</b> Andrew Dangerfield Head of Primary Care Transformation	
<b>Purpose – this paper is for:</b>	<b>Decision</b>	<b>Discussion</b>	<b>Assurance</b>
	X		
<b>Has the report (or variation of it) been presented to another Committee / Meeting?</b> If yes, state the Committee / Meeting: No.			
<b>Executive Summary</b> Mowbray Square houses 3 GP practices (previously 4 – The St Lukes and Spa practices previously merged).  The District Valuer reviewed the rent in 2018. Prior to the review the GP practices and landlord had negotiated a requested rent for the values below. This was prior to the DV report. The CCG is obliged to reimburse rent in line with the DV report.  The DV review was carried out in 2018 however there was a delay in this being received and the request for the rent reimbursement was made in March 2021. A further DV review will be due later in 2021.  Rent Reimbursement Values.			
Practice	2015 Reimbursement	2018 Practice Requested Value	District Valuer Approved reimbursement
B82016	123 018	134 750	129 00
B82027 (St Lukes)	169 909	185 600	178 200
B82027 (Spa)	100 200	118 675	105 100
B82091	108 324	115 450	113 600
<b>Totals</b>	<b>501 451</b>	<b>554 475 (10.6%)</b>	<b>525 900 (4.9%)</b>
<b>Recommendations</b>  <b>The Primary Care Commissioning Committee is being asking to:</b>  Approve the increased rent reimbursement in line with the District Valuer report. This is a total increase of <b>£24 449</b> .			
<b>Monitoring</b>  The delivery of primary care operational and strategic plans is monitored through relevant CCG committees, the CCG Transformation and Recovery Executive Group and in discussion with key delivery partners.			

**CCGs Strategic Objectives supported by this paper**

	CCG Strategic Objective	X
1	<b>Strategic Commissioning:</b> <ul style="list-style-type: none"> <li>To take the lead in planning and commissioning care for the population of North Yorkshire by providing a whole system approach and to support the development of general practice.</li> <li>To make the best use of resources by bringing together other NHS organisations, local authorities and the third sector to work in partnership on improving health and care.</li> <li>To develop alliances of NHS providers that work together to deliver care through collaboration rather than competition.</li> </ul>	
2	<b>Acute Commissioning:</b> We will ensure access to high quality hospital-based care when needed.	
3	<b>Engagement with Patients and Stakeholders:</b> We will build strong and effective relationships with all our communities and partners.	
4	<b>Financial Sustainability:</b> We will work with partners to transform models of care to deliver affordable, quality and sustainable services.	
5	<b>Integrated / Community Care:</b> With our partners and people living in North Yorkshire we will enable healthy communities through integrated models of care.	
6	<b>Vulnerable People:</b> <ul style="list-style-type: none"> <li>We will support everyone to thrive [in the community].</li> <li>We will promote the safety and welfare of vulnerable individuals.</li> </ul>	
7	<b>Well-Governed and Adaptable Organisation:</b> In supporting our objectives we will be a well-governed and transparent organisation that promotes a supportive learning environment.	

**CCG Values underpinned in this paper**

	CCG Values	X
1	Collaboration	
2	Compassion	
3	Empowerment	
4	Inclusivity	
5	Quality	
6	Respect	

**Does this paper provide evidence of assurance against the Governing Body Assurance Framework?**

YES		NO	X
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**If yes, please indicate which principle risk and outline**

Principle Risk No	Principle Risk Outline

<b>Any statutory / regulatory / legal / NHS Constitution implications</b>	No
<b>Management of Conflicts of Interest</b>	No conflicts of interest identified prior to the meeting.
<b>Communication / Public &amp; Patient Engagement</b>	N/A
<b>Financial / resource implications</b>	Cost pressure to the CCG equating to per annum to be covered within recurrent allocation.

	This could rise over time in line with inflation, should the cost per metre square reimbursement be increased following future DV reviews
<b>Outcome of Impact Assessments completed</b>	N/A