

A close-up photograph of a person's hand holding a silver pen, poised over a wooden table covered with various business charts and documents. The charts include bar graphs, pie charts, and line graphs. In the background, another person's hand is visible, pointing at a document. The scene is brightly lit, suggesting an office environment.

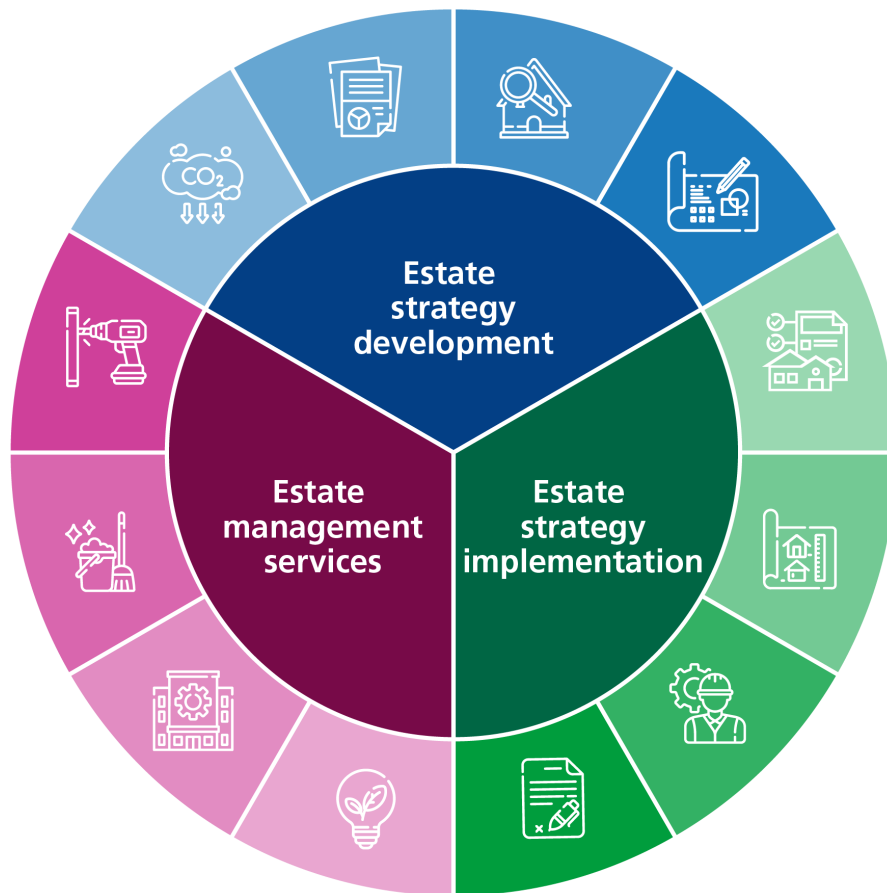
**Unlocking NHS estate  
potential:**

**Real stories of estate  
optimisation and space  
utilisation**

**Part 1: Health centres, offices and  
city centre health hubs**

# Our simplified service offer

We work hand in hand with you to deliver the services you value most – in a way that keeps you compliant, is delivered sustainably and is backed by data insights. So that you can better assess, adapt and maintain your estate at any or every stage of its life – and keep on delivering for your communities.



## Estate strategy development

- Strategic estate planning
- Options appraisals and funding solutions
- ICB business case development
- Net zero strategy



## Estate strategy implementation

- Estate optimisation and space utilisation
- Town planning
- Property development
- Lease advisory
- Property disposal and re-investment
- Capital project management



## Estates management services

- Hard facilities management
- Soft facilities management
- Property management
- PFI management
- Statutory building compliance
- Carbon reduction and energy management

# Introducing our speakers



**Simon Taylor,  
Director of Estates  
Policy, Strategy &  
Capital Projects**



**Ben Gammer,  
Estate Strategy  
Lead - North**



**Vicki Taylor, Office  
Strategy & Strategic  
Programmes Lead**



**Mark Owens, Senior  
Estates Strategy  
Manager - North**



**Mark Lloyd, Regional  
Capital Projects  
Manager - North**



# Agenda



**Introduction to estate optimisation in the NHS**



**How we've helped customers to optimise**



**Health  
Centres**



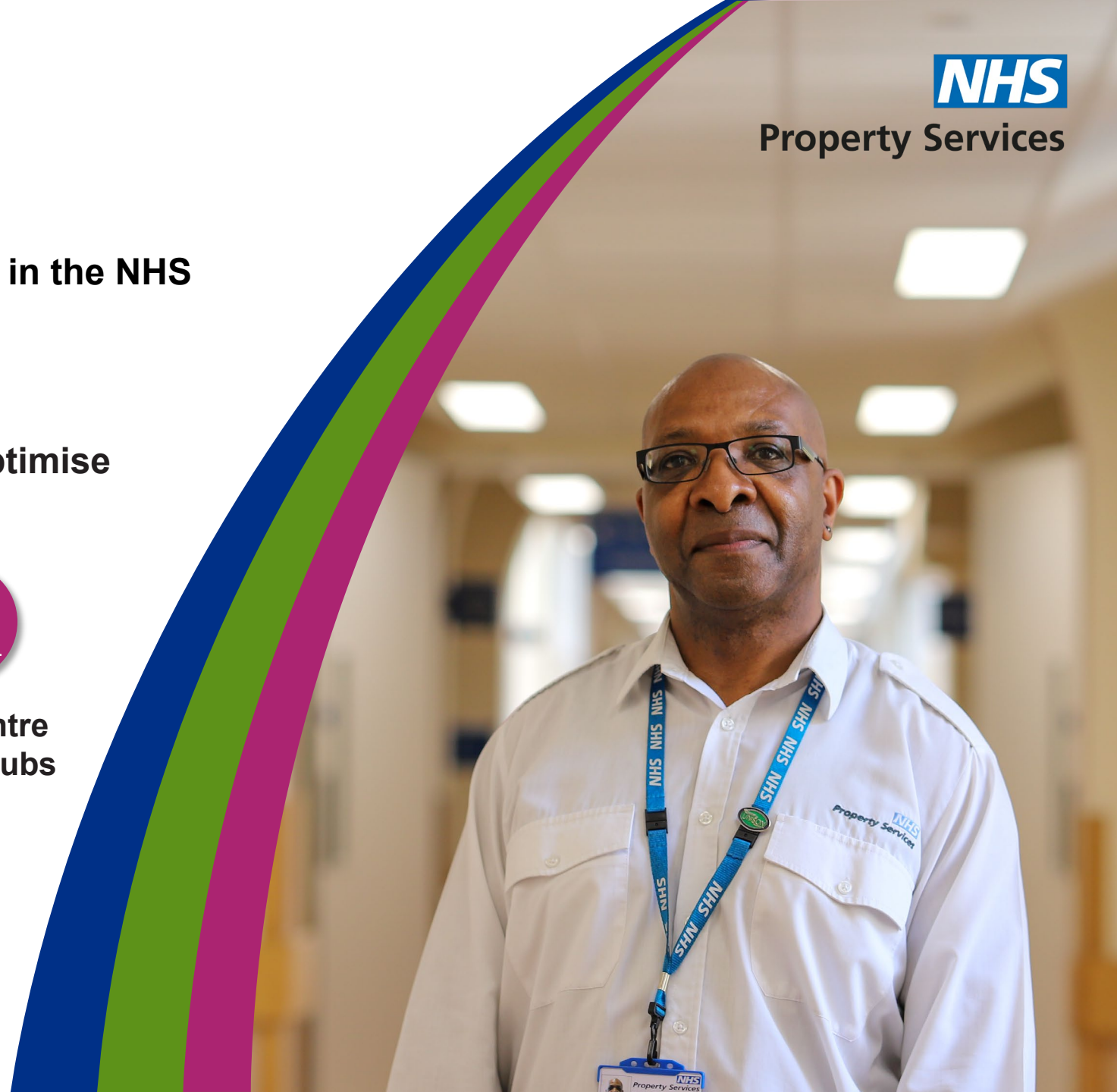
**Office  
Space**



**City Centre  
Health Hubs**



**Q&A**





# Introduction to estate optimisation



# Why is estate optimisation so important?



10-Year Plan & Estate  
infrastructure strategies



Improving efficiency and productivity



Utilising Core (and Flex) estate:  
quicker to use what we have



Capital constraints



Responsibility to taxpayer and patients



Not new, and lots of great work across the wider NHS



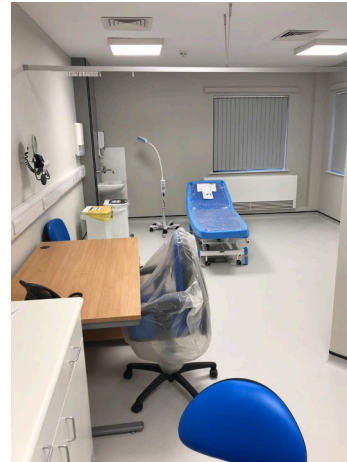
Theory and practice in a guide



Working together and learning from delivered projects

# Different challenges – same outcome

## Acomb Gables, York



**Key to success:** Using the existing layout to minimize costs (900 sqm of under-utilized space): 'Bronze' refurb and recycled capital

**Outcome:** Facilities will benefit 22,000 local patients, offering enhanced services from 3 PCNs.

## Saffron Walden Community Hospital



**Key to success:** working closely with GPs to right-size demand and make re-use an option over new build

**Outcome:** GP accommodated within hospital utilising vacant and under-utilised space co-located with community services

# Different challenges – same outcome

## Preston Healthport CDC



**Key to success:** Understanding customer specifications, communication, and collaboration across Trusts. Maximizing existing space and incorporating two other sites to relocate services from Healthport, creating a full CDC hub

**Outcome:** Community Diagnostics Hub, 104k patients in 6 months – excellent patient and service user experience.

## Mount Gould Hospital, Plymouth

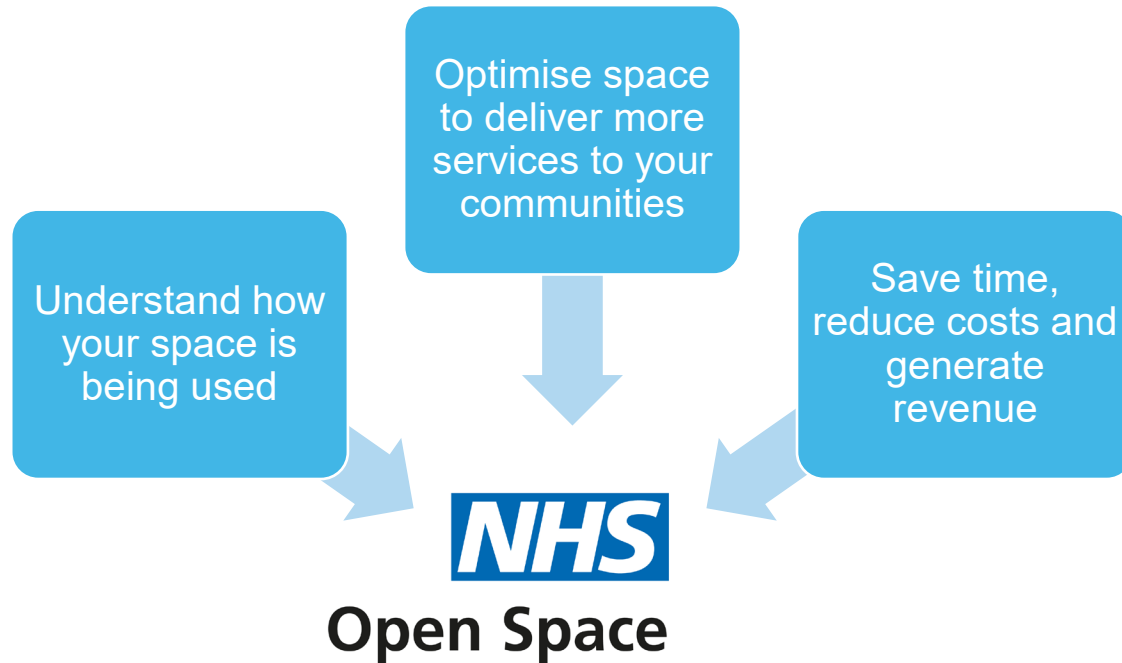


**Key to success:** commitment and collaboration of partners and capital reinvestment from rationalisation

**Outcome:** Optimised estate and significant investment from CHP and NHSPS: Podiatry and Orthotics at refurbished Beauchamp Building and enabling the LIFT Local Care Centre reconfigured to support the delivery of neurological services from a modern and fit-for-purpose environment.



# Different challenges – same outcome



**Key to success:** Adoption of NHS Open Space to manage clinical and non-clinical space and collate accurate utilisation data

**Outcome:** 21% improvement in space utilisation & 32% cost savings without any changes to physical space



# Health Centres

## Contributions from:

- Tom Britcliffe, Estates Delivery Lead – North East & Yorkshire, NHS England
- Leigh Stewart, Associate Director of Capital, Estates & Property, Lancashire & South Cumbria NHS Trust
- Dr Anjan, GP Partner, Ingol Health Centre

# Ingol Health Centre

## The Challenge



Increased patient demand in local area



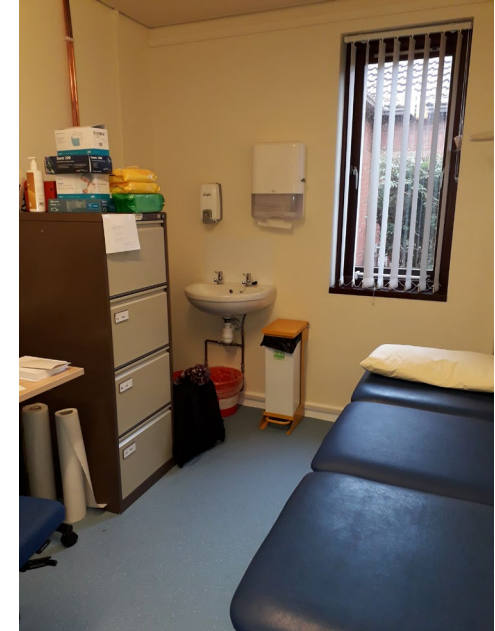
Property **did not meet** local demand & predicted energy efficiency standards



Capital was **constrained**



Property had to **remain open** whilst work was carried out



# Ingol Health Centre



## The Solution



Reconfiguring and refurbishing existing building to **increase clinical capacity**



Added **8 new consulting rooms** and a treatment room



Expansion helps to accommodate an **additional 2,500 – 3,000 patients**



Generating a **potential 80,640 additional annual appointments**



# Ingol Health Centre

## The Outcome



Great example **of multi-organisational collaboration**



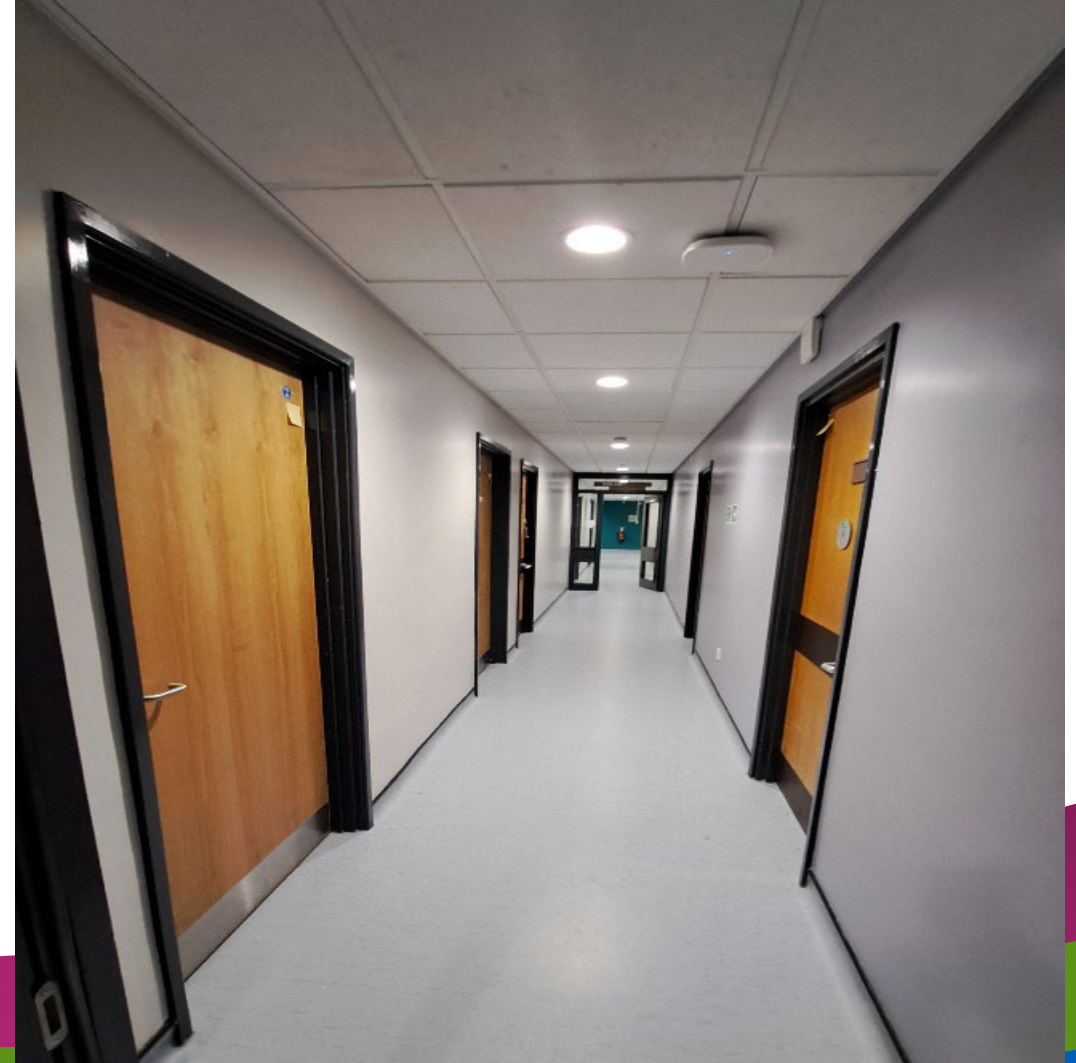
Modern, **fit-for-purpose** health centre



**Carbon neutral building**, future proofed for 2040



12-year lease **secures long-term primary care delivery**





# Office space

## Contributions from:

- Karen Wonnacott, Senior Programme Manager, Greater Manchester ICB

# The NHS Office Estate



Offices make up a significant proportion of the NHS estate with NHSPS portfolio alone covering over 200 office holdings, spanning **170,000 sqm**.



During 2024/25 the office team completed **35 projects** which impacted on **almost 6000 FTEs**.



Total floor space was **reduced by 20,500 sqm**.



Generating savings for the NHS of **£29 million**

## What We Offer

We can draw on our own expertise and that of colleagues to assist with:

- Portfolio review strategies
- Relocations and rationalisations
- Best practice and smarter working
- Lease event management
- Financial analysis

## The Challenge



Widespread office estate that **cost £3m per annum**



**Too much office space** based on post-COVID needs



**Low utilisation**



**45% of portfolio** (by cost) within commercial office space





What **challenges** did you  
encounter during this project?



## Proposed solution

- Co-location with Health partners
- Exit high-cost commercial holdings
- Releasing space back for clinical provision
- Resetting occupational agreements with LAs
- Exploring new flexible arrangements

## Outcome

- Consolidation of estate
- Workspaces that support new ways of working and collaboration
- Cost savings
- Identifying future opportunities

What **advice** would you give  
to others thinking about a similar project?





# City centre health hubs

## Contributions from:

- Tom Hinchcliffe, Primary Care Commissioning, NHS England
- Dr Simon Wilkins, GP Partner
- Dr Tony Gu, GP Partner



# New Jackson Medical Centre

## Background



**Population growth** in central Manchester



**Significant pressure** on Primary Care estate



PCN Additional roles **adding to estate demand**



**Blended funding:** S106 supplemented by ICB Grant funding







# New Jackson Medical Centre

## The Challenge



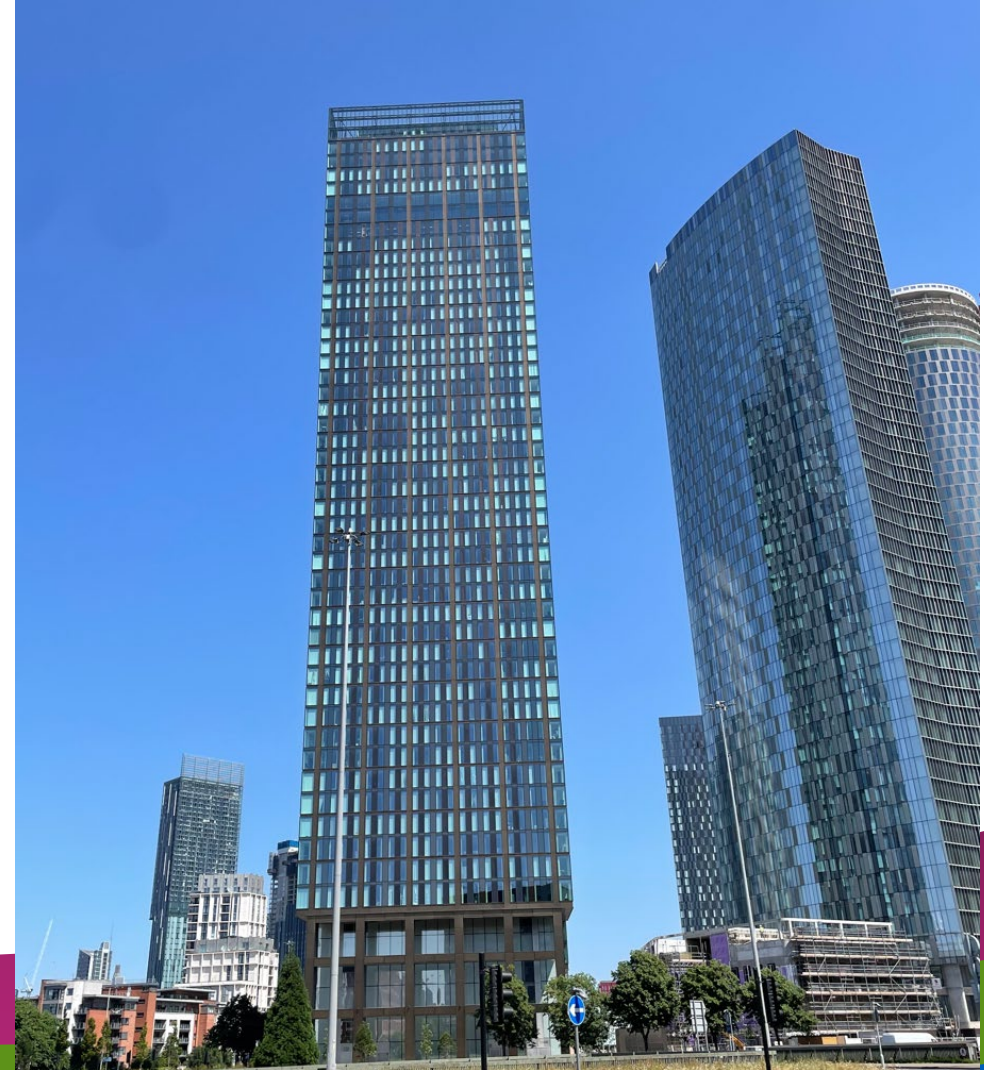
**Time pressures**



**3 different GP practices**



Existing space **not suited to Healthcare**





# New Jackson Medical Centre

## Property Expertise

- Acquisitions – Headlease and sub leases
- Procurement
- Design/Construction
- Renaker

## Outcome

- Modern, fit-for-purpose facility
- 16 clinical rooms
- 3 GP practices
- Single reception
- FM Hard and Soft services



# Summary

# Themes from across the projects shared



Commitment from senior stakeholders



Forward planning for changes: Population  
| Leases | Contracts



Blended / innovative capital funding



Collaboration to share ideas, resources and  
expertise



Partnering to share risks and rewards



Estate expertise supporting commissioners  
and clinical teams

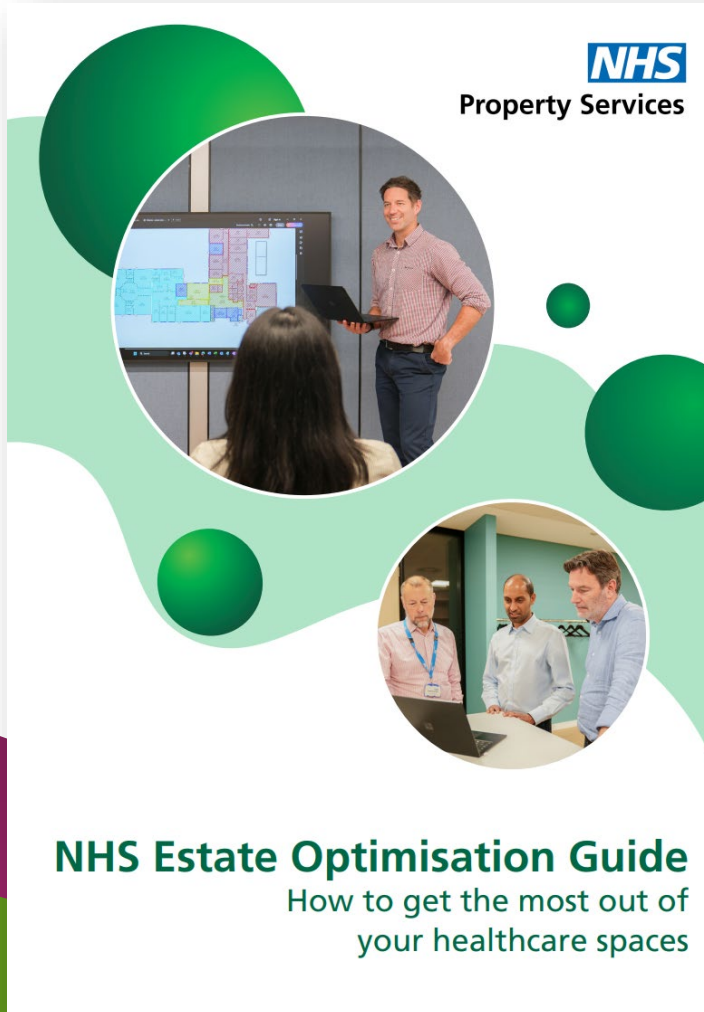


Understanding key data and current  
arrangements



**Q&A**

You might also be interested in...



# Part 2: Rationalising space across the NHS estate

## When is it?

Thursday 11<sup>th</sup> September

1:30 – 2:30pm

## Speakers

- **Simon Taylor**, Director of Estates Policy, Strategy & Capital Projects
- **Jake Roe**, Head of Estate Strategy
- **Chris King**, Head of NHS Open Space
- **James Page**, Relationship Partner – South
- Contributions from **Customer speakers**

## What will we cover?

- **Utilisation:** capturing data to support data-led decision making
- **Site rationalisation:** reducing overheads to reinvest elsewhere
- **Estate optimisation:** unlocking underused space to support new models of care
- **Managing space more effectively:** making space work harder without the need for major works



# Thank you



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