

GP premises – a new landscape

Sam Hopkins of Capsticks LLP offers a short guide to the role of new NHS organisations in practice premises in England

THE reforms introduced by the Health and Social Care Act 2012 were particularly relevant to GP premises in England.

Before the act came into effect, things were (relatively) straightforward. PCTs were responsible for commissioning GP services and for the reimbursement of GP premises costs. They owned thousands of GP surgeries and health centres occupied by GPs and were head tenant at all LIFT (Local Improvement Financial Trust) buildings.

In other words PCTs were landlords, commissioners and funders of GP premises costs. So GPs in occupation of PCT buildings only ever had to deal with their local PCTs in respect of surgery premises issues.

On 1 April 2013, all of that changed.

Ownership of the old PCT estate was transferred in several different directions. Some of the properties were transferred to local trusts. All of the old PCT head tenancies in LIFT properties were transferred to Community Health Partnerships Limited. The remainder of the PCT estate was transferred to a new company, NHS Property Services Limited.

Responsibility for the commissioning of GP services was transferred to NHS England. NHS England also assumed responsibility for the funding of GP premises costs.

If all of those changes have left you wondering who you should be speaking to in connection with premises issues today, you may find this short guide to the current role of NHS organisations in GP premises helpful.

CLINICAL COMMISSIONING GROUPS

CCGs took responsibility for the commissioning of elective and emergency hospital care,

mental health and other services on 1 April 2013. They do not own GP surgeries but are a key stakeholder in the establishment of primary care premises strategies by NHS England.

COMMUNITY HEALTH PARTNERSHIPS LIMITED

CHP is a limited company but the Secretary of State is the only shareholder. CHP has existed in this form since 2007 but prior to that date it was known as Partnerships for Health Limited. On 1 April 2013, CHP acquired all of the former PCT head tenancies in NHS LIFT premises. Overnight CHP became the landlord to all GPs in occupation of NHS LIFT buildings. CHP does not commission healthcare services and does not provide reimbursement of GP premises costs.

CARE QUALITY COMMISSION

CQC was established in 2009 and, since 1 April 2013, has been responsible for inspecting GP surgeries to ensure that they provide 'safe, effective, compassionate and high quality' care. CQC publishes the results of its inspections on its website.

NHS ENGLAND (THE NHS COMMISSIONING BOARD)

NHS England assumed responsibility for premises costs funding on 1 April 2013. As a result, all new applications for reimbursement of premises costs by GPs should now be made via NHS England. NHS England must follow the new Premises Costs Directions 2013 when considering such applications. The 2013 Directions are closely based on the 2004 Directions, but there are some important changes.

NHS PROPERTY SERVICES LIMITED

NHS PS is a new limited company and, as with CHP, the Secretary of State for Health is the only shareholder. It was established to own and manage most of the remainder of the ex-PCT estate and is now the landlord to most GPs in occupation of old PCT buildings. NHS PS does not provide reimbursement of GP premises costs, but many PCT employees with previous experience of working with the GP premises costs regime transferred to NHS PS on 1 April 2013, rather than to NHS England. As a result, NHS PS does now provide advice to NHS England on GP premises costs issues. NHS PS does not have any commissioning responsibilities, although part of its remit is to provide "estates solutions" for commissioners. Most GPs in occupation of properties owned by NHS PS do not have formal leases in place. NHS PS will ultimately wish to grant formal leases to every GP, but this will be a considerable task, and GPs will wish to protect their own legal position.

In summary, there are a large number of new organisations in place today. If you are seeking advice or support in relation to GP premises issues, it will be important to develop relationships with the correct organisations at a local level. If you still have contacts with ex-PCT employees who worked on GP premises issues, then it would be worth keeping in touch with them so that they can introduce you to the right people.

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