

Template for additional funding ask for Local Growth Fund (LGF) projects

1. Project title

Kent and Medway Medical School, Canterbury

2. Federated Board

Kent and Medway Economic Partnership

3. Project description

The Kent and Medway Medical School is the first medical school in Kent, providing an innovative centre for medical education and research to develop the health and social care workforce.

This development has responded to the acute need for medical professionals in an area of rapid housing and population growth, and is already driving innovation in the health economy.

KMMS is an important contributor to the development of the 'medical corridor' envisaged by the Thames Estuary 2050 Growth Commission, and has been being delivered by Canterbury Christ Church University (CCCU) and the University of Kent, together with local health providers via the Kent and Medway Integrated Care System. The students of the Kent and Medway Medical School are located across the two campus sites of both universities in Canterbury, with placements in clinical settings across Kent and Medway.

An earlier successful Strategic Outline Busines Case (SOBC) bid was then followed by a further additional LGF funding bid (September 2019). This combination of capital funding has enabled the development of both sites by part funding initial agreed construction and fit-out costs of:

• 2,476 sq m of lecture theatre, classroom, anatomy and clinical skills simulation laboratory space at CCCU's Science, Technology, Engineering and Medicine (STEM) facility. £4 million of LGF alongside £7.24 million from CCCU to increase the scale of the planned building

• 2,320 sq m of lecture theatre, IT suites, seminar rooms, meeting rooms and office space at the University of Kent campus. £4 million of LGF alongside £9.6 million from University of Kent, to provide a new dedicated KMMS building.

The two sites provide complementary facilities which all students at KMMS will use, once completed. In broad terms, dissection, clinical skills and simulation facilities will be located on the CCCU site, and bioscience provision, including wet lab facilities, at University of Kent, linked with each university's areas of academic strength.



4. What was the value of the Benefit Cost Ratio included in the original Business Case approved by SELEP?

2.42:1

5. Summary of project benefits

The intended project benefits are that KMMS will:

1. Deliver Kent and Medway's first medical school, initially supporting 107 undergraduates per year, rising to 214 from 2029/30, and with additional capacity for postgraduate and CPD education

2. Deliver a new curriculum model to support the Kent and Medway health economy, with much greater exposure to primary care from the start – helping to address the key areas of workforce shortage

3. Recruit more – and more diverse – people into the health service workforce, through an outreach model that will broaden the medical talent pool

4. Over time, reduce the workforce challenges that affect the sector

5. Build a new centre for medical knowledge and research, complementing the established Brighton and Sussex Medical School (with which KMMS is working closely) and the new Anglia Ruskin School of Medicine in Chelmsford, and building strong relationships with University of Kent's and Canterbury Christ Church's research expertise

6. Existing LGF allocation

£8m

7. LGF spent to date

£8m

8. Additional LGF sought

£1m

9. Why is additional LGF investment required?

Additional funding is requested for the following four reasons:-

a) Increased building costs due to delays caused by Covid-19 - £32,250 (including VAT)
b) Increased building costs due to changes in Health & Safety regulations - £70,500 (including VAT)

c) Equipment and building costs associated with KMMS significantly higher than original estimates - £703,418 (Including VAT)

d) Increased equipment costs due to impact of Covid-19 on recruitment and delivery - £192,600 (including VAT)



a) Increased building costs due to delays caused by Covid-19 - (£32,250 including VAT)

At the beginning of March the construction of the CCCU and Kent University buildings were on schedule with the builds being expected to be fully ready for use for early September 2020. The Covid-19 lockdown and subsequent revised working practices resulted in delays. The Kent University building was delayed by one month and the CCCU building by 5 months. As a consequence, the Universities have incurred additional project management costs of £26,875 (excluding VAT) related to Kent and Medway Medical School.

b) Changes to Health and Safety Regulations – (£70,500 including VAT)

The original design of the anatomy suite included a ventilation system that would provide 10-12 air changes an hour to meet the Health and Safety requirements associated with the use of formalin embalmed cadavers. In 2019 new formalin exposure levels were specified by the Health and Safety Executive which will require enhanced ventilation to the anatomy suite. This will require additional equipment and testing to ensure the new regulations are achieved at a cost of £70,500 (including VAT).

c) Equipment and Building costs associated with KMMS higher than initial estimates – (£713,418 including VAT).

As the design and construction of the building progressed there were a number of required/approved changes identified as a consequence of planning control (e.g roof top screening, raised brick plinth) and actual costs in excess of the original estimates (e.g. laboratory furniture, anatomy equipment, simulation systems) which exceeded the allocated contingency. These additional costs are less than 10% of the original budget. Given the Universities are absorbing additional recurrent costs and, due to Covid-19, have not been able to progress private/charity funding of the project, they request that the building/equipment cost over-runs are covered by LGF.

It should be noted that the new STEM building at Canterbury Christ Church University provides accommodation for the Edge Hub (33.3%), for the new Medical School (KMMS- 33.3%) and for relocating departments (33.3%). As a consequence, costs associated with the CCCU building have been distributed in these proportions to calculate appropriate additional costs. Where additional costs can be directly attributed to one activity all the costs have been allocated to that area. The University of Kent Building is solely for the use of KMMS.

d) Increased equipment costs due to impact of Covid-19 on recruitment and delivery are related to two elements – (£192,600 including VAT)

The impact of Covid-19 on the Universities financial stability is substantial and well documented (LSE 2020). Nationally there is evidence of increased attritions during 2019-20 and reduced overall recruitment during the 20-21 cycle. The KMMS slightly exceeded its recruitment target despite the problems created by A-level decision processes. Covid-19 has had a particular impact on the way in which the curriculum is delivered due to the increased health and safety issues associated with face to face delivery. Additional capital costs are being incurred in the following key areas:



1. Changes to recruitment

Key to KMMS's future benefits realisation is a continued requirement to recruit students in a highly competitive market, however the 21-22 applications cycle has to proceed with Covid-19 Health and Safety requirements in place. KMMS intends to move to a novel virtual alternative with multiple mini interviews. The technology required to support this approach was not part of the original business case, but reflects the 'digital first' philosophy of KMMS. This additional digital innovation, whilst new, may sustain the benefits of the face to face approach, whilst delivering additional benefits for the KMMS and wider supporting community, enabling increased level of personal safety, allowing participation of off-site clinicians, and so reducing the travel burden and carbon footprint for staff and applicants associated with this process.

2. Changes to the delivery of teaching, learning and assessment due to Covid-19 Whilst continuing students have tolerated the uncertainty of shifting from traditional campus based study, to increased levels of online and blended learning opportunities during 19-20, new students in 20-21 have been recruited with clear expectations around study. The Office for Students (OfS), the universities' regulator, has made it clear that these expectations must be met as published, as a requirement of university registration status. In addition, there is a clear recognition that university communities will continue to experience space and physical engagement constraints, due to strict and dynamic health and safety requirements in place for the delivery of higher education, for the foreseeable future. This has resulted in additional capital costs in the following areas:-

i) Maintaining appropriate high-quality anatomy teaching and learning experiences;

Anatomy is a building block underpinning clinical understanding and decision making. KMMS anatomy services are delivered in the CCCU Building 2, within the Anatomy Learning Suite. To ensure students benefit directly from the opportunity of cadaveric dissection (considered to be the gold standard for learning in systems based curriculums) the KMMS Team have had to purchase additional software (e.g; Anatomy 2020) which will have a longer term benefit to the wider healthcare practitioner community across Kent and Medway, as an additional teaching resource to support CPD.

ii) Preparation for Clinical Placement

The impact of Covid-19 on the experience of healthcare students is particularly profound for placements which are a central part of their experience. The KMMS model requires a thorough preparation in the expected and imminent clinical skills required for each placement experience. Current OfS guidance to universities on teaching, learning and assessment recognises the primacy of face to face experience and clinical skills teaching remains a priority in all but the most extensive lockdown scenario. To ensure this takes place additional online educational resources will have to be purchased to provide appropriate preparation for placements.

It should be noted that the Health and Safety issues associated with Covid-19 have resulted the curriculum being delivered to smaller group sizes. This has substantially increased the number of teaching sessions and as a consequence the number of staff required to deliver the curriculum. Greater use of specialist spaces (e.g. anatomy suite) and specialist equipment will produce greater running and replacement costs. All these additional recurrent costs are being covered by the Universities.



10. Can the project proceed without the additional LGF allocation?

The KMMS has progressed and it has recruited its first cohort of students. Its progress as a project is evidenced by the following:

- Recruitment has exceeded the original year 1 target (108 student in its initial recruitment cycle)
- Student demographics indicate a wider diversity of backgrounds than benchmark.

- Many of the Academics recruited from outside the locality have already chosen to work clinically within the local healthcare economy

- There is already evidence that local expertise and knowledgeable scholars have been retained within Kent and Medway by a shift to direct contributions to the KMMS cadre.

The project will proceed without additional LGF funding, but without such funding the costs outlined above can only be met by:-

a) reducing the capital investment in the anatomy laboratory and simulation centreb) slowing the implementation of continuous professional development for qualified practitioners within the facilities.

So any reduction in capital investment will negatively impact on the original figures as expressed in the SOBC and the last LGF bid.

11. What are the main project risks impacting the ability of the project to proceed?

The continuation and escalation locally of Covid-19 infection rates present the major risk to the project's ongoing success.

Covid-19 is however our new normal for the foreseeable future and will continue to impact all aspect of daily operation within KMMS. Dynamic contingency plans are in place to escalate and de-escalate teaching and learning experiences in line with government guidance.

Within the facilities for KMMS in Building 2, the ongoing uncertainty with the supply chain for fitout of the anatomy laboratory and simulation suite, could compound the delayed opening and the KMMS management plans that have been put into place.

However an active risk management approach is in place within the Building 2 Project Management Team with both the remaining contractors, to manage Covid-19 impacts in the workforce and within the supply chain organisations. Strict Covid-19 applied working conditions are required on both the construction site and in our supply chain organisations. The University maintains an ongoing close dialogue with all parties to ensure staggering work patterns, strict social distancing, and hands, face, space is visible in operations.



12. Have the project benefits changed since the original Business Case was approved by the Accountability Board?

If yes, please state the nature of these changes and the likely impact on the value for money case.

No – if anything, the current Covid-19 scenario has provided an increased spotlight on the need for the future clinical workforce in Kent and Medway.

13. How can the project support the economic recovery?

The KMMS project will still support the economic recovery as indicated in the SOBC and subsequent LGF funding requests. Additional funding support to alleviate additional costs directly attributable to Covid-19, which were not part of the original scenario, will enable KMMS to build and demonstrate flexible and innovative approaches to the delivery of its curriculum, which will sustain the interest of future applicants.

In addition, KMMS has met its initial commitment to the government to deliver 108 medical school students on its first round of recruitment, which will have a positive influence on any future Medical School funding application process. This will ensure that the future wide ranging benefits of having medical students located within Kent and Medway are in line with those predicted.

14. If additional funding is awarded to the project, are there any remaining barriers to project delivery (for example: outstanding planning approvals, other Governance requirements, other funding sources awaiting confirmation)?

No



		Orig	<mark>inal fundi</mark>	ng breakd	own (as pe	er the orig	inal Busin	ess Case) (£m)		
Funding source	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	2024 onwards	Total
LGF	0	0	0	0	8.000	0	0	0	0	0	8.000
ссси	0	0	0	2.015	2.908	2.317	0	0	0	0	7.240
UofK	0	0	0	0.635	5.493	3.472	0	0	0	0	9.600
Total	0	0	0	2.650	16.401	5.789	0	0	0	0	24.840

				Revised	funding b	reakdown	ı (£m)				
Funding source	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	2024 onwards	Total
LGF	0	0	0	0	8.000	1.000	0	0	0	0	9.000
ссси	0	0	0	2.015	2.908	2.317	0	0	0	0	7.240
UofK	0	0	0	0.635	5.493	3.472	0	0	0	0	9.600
Total	0	0	0	2.650	16.401	6.789	0	0	0	0	25.840



Sign off of additional funding ask – required from lead County/Unitary Authority

Dear Colleague,

In submitting this project application for additional LGF, I confirm on behalf of [Insert name of County or Unitary Authority] that:

- The information presented in this application is accurate.
- The application states all substantial project risks known at the time of submission.
- The delivery body has considered the public sector equality duty and has had regard to the requirements under s.149 of the Equality Act 2010 throughout their decision making process. This should include the development of an Equality Impact Assessment which will remain as a live document through the projects development and delivery stages.
- The delivery body has access to the skills, expertise and resource to support the delivery of the project.
- Adequate revenue budget has been or will be allocated to support the post scheme completion monitoring and benefit realisation reporting.
- The project will be delivered under the conditions in the signed LGF Service Level Agreement with the SELEP Accountable Body and SELEP Ltd.

I note that the information presented in this application will be presented in the public domain as part of the Strategic Board's prioritisation of projects. Any information presented in this application which is considered commercially sensitive and confidential, has been highlighted as such within this application.

Yours Faithfully,

S151 Offi	cer
Name	
Signature	
Date	
Senior Re	sponsible Officer
Senior Re Name	sponsible Officer
	sponsible Officer