



South Northants District Council

Planning Application Ref:

S/2019/1728/MAF

Date:

13th May 2020

The CCG can confirm there will not be sufficient capacity in the local primary healthcare system to absorb the anticipated increase in demand created by the proposed new housing development for land at 152/154 Watling Street East Towcester Northamptonshire. Practices in the local area are already at the limit of their capacity and the increase in population could push practices to the point that they are no longer able to accept new patients. If this were to be the case it could result in the population brought to the area by the new housing development experiencing difficulties accessing primary care health services. Therefore the CCG and NHSE & I are seeking a financial contribution towards infrastructure support to ensure the new population has access to good quality primary health care services.

Please find below a request for a financial contribution to healthcare along with supporting information. This demonstrates how the request for financial contribution to healthcare provision is CIL compliant, meeting the relevant tests which require that the sums are –

- a) necessary to make the development acceptable in planning terms;
- b) directly related to the development; and
- c) fairly and reasonably related in scale and kind to the development

Background

Traditionally s106 requests made by health to support new developments have been centred around the capacity and development needs of a single GP Practice. However, there is now a move towards new health care models on a larger scale involving multiple organisations including primary care, the foundations underpinning this have already begun in the formation of PCNs (see below). These organisations will focus collectively, rather than separately, on the needs of the local people they serve, with general practice being at the heart of patient care. This change is driving the way that estates health infrastructure is developed, therefore whilst CCGs/NHSE&I still require infrastructure investment to be made by developers to cover the health needs of the new population brought to the area, the precise location of the Practice providing additional services cannot always be identified at the point when the initial response is made to a planning application.

About Primary Care Networks

Practices in the area have already formed groupings known as Primary Care Networks (PCNS), and under the NHS Direct Enhanced Service they have established and formalised agreements.

Primary care networks are based on GP registered lists, typically serving natural communities of around 30,000 to 50,000 and will build on the core of current primary care services to enable greater provision of proactive, personalised, coordinated and more integrated health and social care. PCNs will act as the vehicle for the delivery of the local services across primary, community, secondary and social care services.

The Practice (s) in closest proximity to the proposed development is/are **Towcester & Brook Medical Centres**

therefore it is reasonable to assume this/these Practice (s) will be most affected by the increase in population and will need to develop existing premises to accommodate the new growth.

Impact of new development on GP practice

The development is proposing 15 homes, which, based on the average household size of 2.43 2.39 per dwelling could result in an increased patient population of 36.45 0

The calculations, at table 1 and 2 , shows the likely impact of the new population in terms of number of additional consultation hours. This is based on the Dept. of Health calculation in HBN11-01:Facilities for Primary and Community Care Services. The additional consultation hours require clinical space in which they will be delivered.

Table 1- Consulting Room

Proposed Population	36
Access rate:5260 x 1000 patients	192
Anticipated annual contacts: proposed population	192
Assume 100% patients use room:	
Assume open 50 weeks a year:	4
Patients per week: 52,600/50 = 1052	
Appointment duration 15 minutes	
Patient appointment time per week	1
Hours per week	1

Table 2 - Treatment Room

Proposed Population	36	
Access rate: 5260 x 1000 patients	0	
Anticipated annual contacts: proposed population	192	
Assume 20% patients use room:	38	
Assume open 50 weeks a year:		
Patients per week: $52,600/50 = 1052$	1	
Appointment duration 20 minutes	0	
Hours per week	0	

Fairly and reasonably related in scale and kind to the development. Contribution requested in respect of proposed population

Northamptonshire CCGs/NHSE&I are requesting a contribution from the developer towards the increased primary health care capacity directly attributable to the population of the proposed new development. Northamptonshire CCGs will be working with the Practice/s local to the development, to establish specifically where there is scope to expand/improve capacity to effectively care for the additional patients.

The cost per sqm has been identified by a quantity surveyor experienced in health care projects.

This is the cost of providing additional accommodation for		36.45	0
Additional patients to be accommodated			36.45
Standard area of m ² /person based on total list size of approx.	10000		0.11
Cost of build /alterations/extension £/m ² £1902			1902
Financial Contribution Requested			
Based on the number of dwellings proposed the figure requested is		£7,626.07	

The potential impact if contributions are not made is that the necessary expansion to primary health care capacity to meet the demand from the proposed development will not be achieved.

Yours faithfully

NHS Northamptonshire CCG

NHS England and NHS Improvements