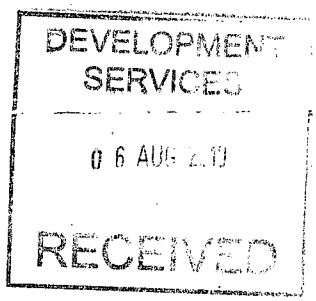
- 6 AUG 2010



Leicestershire County and Rutland Community Health Services

Facilities Management Services
25 Warren Park Way
Enderby
Leicester
LE19 4SA

Hinckley and Bosworth Borough Council
Council Offices
Argents Mead
Hinckley
Leicestershire
LE10 1BZ

5th August 2010

FAO Mr James Hicks

Dear James

APPLICATION FOR S106 HEALTHCARE CONTRIBUTION
APPLICATION REF: 10/00405/OUT
PROPOSAL: PROPOSED DEVELOPMENT OF 232 NEW DWELLINGS
LOCATION: LAND ADJACENT TO HINCKLEY GOLF CLUB LEICESTER ROAD HINCKLEY

Thank you for your email of 2nd August 2010 regarding your request for additional information in relation to the Trust's request for a healthcare contribution concerning the above application.

The Trust would like for Hinckley and Bosworth Borough Council to continue to support the Trust in its endeavours to secure healthcare contributions from residential developments to mitigate the higher demands on current primary care infrastructure.

I understand that the Council will now require a slightly different approach to the justification required for healthcare contributions so I would like to add the following information in support of my earlier letter of 24th June 2010.

1) Identification of a deficiency in the relevant service / facility

As previously stated it is possible residents in the new development will seek to register at a local GP surgery that covers this area in their catchment. We believe this surgery could be the practice on Tilton Road, Burbage. As an alternative they may also consider the Hinckley Health Centre Practice on Hill Street, Hinckley. When considering the effect of new developments the Trust examines the likely increase in population locally. Typically we apply a ratio of 2.57 people per dwelling. In this case that would mean an increase in local population of 596 people.

POSITIVE ABOUT DISABLED PEOPLE

Clearly it is impossible to identify the individual health requirements of any future population therefore predicting the effect at an individual service level is equally unattainable. However we can be sure that any increase in population will lead to a greater number of people registering with the local practices and thus a larger demand on the services delivered from said premises.

In an effort to understand the current level of capacity of GP surgeries within the Trusts area they have completed a Load / Capacity survey. This model has enabled the Trust to identify existing problems in terms of capacity in GP premises. A standard capacity formula is applied to the weighted average list size of GP practices to derive the size of premises that is required to adequately service the population for core primary care activity. The formula is derived from an analysis of all existing practices and effectively represents an average of those existing practices. In this case the Burbage practice has been categorised as "Red" indicating serious capacity issues. This rating is the highest possible for prioritising investment in the future and the Trust have already approved their case to extend, although no funding is currently available. The model indicates there is a deficiency of 126m2 at the current premises. In addition the patient to GP ratio is 2232 which is already higher than the desired national target of 1800 patients per whole time equivalent GP. An increase in local population will further exacerbate the position by placing a higher demand on GP facilities than is desirable. The situation at Hinckley Health Centre is also Red rated again indicating a serious need to invest in improving healthcare capacity.

However whilst used as a tool in developing new capacity, the actual level of expansion will be for consideration based on service needs. This detailed work will only be possible once the new population is in situ to fully understand the requirements. The Trust does not seek to apply for a healthcare contribution to meet this existing shortcoming but merely to show there is already a capacity issue that this proposal will intensify. The level of contribution requested is purely linked to the likely growth in population from the proposed development.

2) How the development will impact on the service / facility

As above we cannot be precise on this point as we do not know the specifics of the residents needs and thus the patient group is unknown until they start to register. However given the already elevated level of patients to GPs as discussed above an increase in local population will create further pressures on GP availability leading to delays in diagnosis, treatment and referral.

3) What mitigation is required to address that specific impact

Clearly until a business case is submitted by the GP surgery in question to the Trust we will not know the exact works of mitigation. However it is likely that a contribution would be used to either re-organise existing room uses and re-specify accordingly or extend the facility. This would increase the healthcare capacity of the building by increasing the potential to see more patients and / or allowing more services to be delivered from the premises. Without information on the housing mix I am unable to calculate a final healthcare contribution for this application. However given the relatively large scale of the proposed development the contribution should be sufficient to fund either internal re-organisation or an extension of the premises

subject to detailed examination in due course. The Trust would seek to combine this sum with any other funding secured through other developments as appropriate.

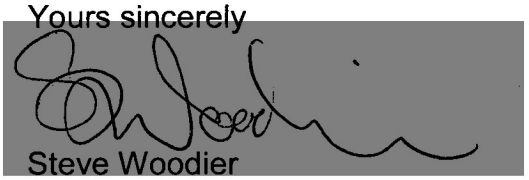
4) How and when the contribution would be utilised

This is a far more difficult point to answer. At this moment in time the Trust has no guarantee of either how much the healthcare contribution might be or when we may be in a position to draw down the funds from the Council. Assuming the appeal is successful it could then be several years before any development works commence and then there is often a further delay until a trigger date is reached and funds released. Clearly, as already discussed, we will not be able to identify specific needs until a full case is made by the practice in question. It is likely this process will not start until funding is definitely available and there will then be a period of consultation with the Trust and with planners potentially. In reality there is often a period of adjustment when large estates start to be occupied and it is only after a period of time that detailed requirements become clearer. To try to undertake this process in advance would be difficult due to future uncertainty of specific needs. The Trust does not have any funding to work up full schemes in advance of planning applications being decided. Arguably even if the Trust had such funds any such plans would be of dubious use given the above factors around future needs and certainly could not be accommodated within the twenty one day time limit allowed for responses.

However the Trust will work in conjunction with independent GP contractors to agree the most appropriate use of any contributions secured and work to make sure funds are spent within the usual five year time frame.

I hope the above additional information is sufficient for you to continue to support the Trust in their application for a healthcare contribution from this proposed development. Should you wish to discuss this matter further please do not hesitate to call me on 0116 2227210.

Yours sincerely



Steve Woodier
Property Surveyor