

NHS England/ East & North Herts CCG  
Charter House  
Parkway  
Welwyn Garden City  
Hertfordshire, AL8 6JL  
01707 685000

**By email:**

Peter Quaile  
Broxbourne Borough Council

27 March 2019

Dear Mr Quaile,

**Re: Planning Application Consultation: 07/19/0200/F**

**Proposal: Erection of 58 dwellings (17no. 2 bed , 14no. 3 bed, 22no. 4 bed, 1no. 5 bed) with associated infrastructure**

**Location: Fairmead 90 Cuffley Hill Goffs Oak Hertfordshire EN7 5EX**

NHS England and East & North Herts Clinical Commissioning Group have now had an opportunity to review the impact of this proposed development on local health provision.

Should this development of 58 dwellings go ahead, based on an occupancy of 2.4 it will create circa 139 new patient registrations.

Despite premises constraints GP Practices are not allowed to close their lists to new registrations without consultation with, and permission from, the East and North Herts Clinical Commissioning Group. We expect such applications to increase as the new developments in the area go live. Even when surgeries are significantly constrained East and North Herts CCG and NHS England would not wish an individual patient to be denied access to their nearest GP surgery. Patient lists are therefore only closed in exceptional circumstances.

However, when a large number of new dwellings and registrations is planned the preferred option is to try and find a way to absorb those significant demands upon surgeries by providing additional resources, e.g. re-configuring, extending or relocating the practice to provide sufficient space to increase clinical human resources and clinical services and thus keep the patient lists open. A developer contribution under these circumstances is considered fair and reasonable.

Constrained' means a practice working to over-capacity for the size of their premises and the clinical space available to provide the required services to their patients. A Practice in this situation would usually need to be re-configured, extended or even relocated to absorb a significant number of new registrations.

Patients are at liberty to choose which GP practice to register with as long as they live within the practice boundary and NHS England cannot prescribe which surgery patients should attend. However, the majority of patients choose to register with the surgery closest and/or most easily accessible to their home for the following reasons; quickest journey, non-car dependent (public transport or walking distance), parking provision if a car journey is necessary, easy access during surgery hours, especially for families with young children and for older adults.

For the above reasons a S.106 contribution is requested to make this scheme favourable to NHS England and East and North Herts Clinical Commissioning Group.

Please note that our calculations below are based purely on the impact of this development, based on the number of dwellings proposed and does not take into account other development proposals in the area.

**Below is the calculation of the contribution sought based on the number of dwellings proposed, for GMS GP provision:**

Circa 58 dwellings x 2.4 occupants = 139 new patients

$139/2000 = 0.0695$  of a GP \*GP based on ratio of 2,000 patients per 1 GP and 199m<sup>2</sup> as set out in the NHS England "Premises Principles of Best Practice Part 1 Procurement & Development"

$0.0695 \times 199 \text{ m}^2 = 13.83 \text{ m}^2$  of additional space required

$13.83 \text{ m}^2 \times \text{£}2,964^* = \text{£}40,993.602$  \* (\*Build cost; includes fit out and fees)

$\text{£}40,993.602/58 = 706.786$  (rounded up to £707 per dwelling)

**Total GMS monies requested: £40,993.60**

East and North Herts Clinical Commissioning Group propose to focus the monies on the practices within whose patient registration boundaries this development directly falls namely in no particular order: Abbey Road Surgery, Stockwell Lodge Medical Centre, Cuffley and Goffs Oak Medical Practice, The Maples and High Street Surgery Cheshunt. This development falls into the practice boundaries of all of them. This may include the digitalisation of patient records to release rooms to increase clinical capacity by way of reconfiguration and any associated works. A trigger point of on occupancy of the 1st dwelling is requested. NHS England and the East and North Herts Clinical Commissioning Group reserve the right to apply for S106 money retrospectively and the right to amend and request that this be reflected in any S106 agreement.

As well as the importance of a S.106 contribution for GMS, it is also vital to consider the impact of developments and additional residents on community and mental

healthcare. Based on recent cost impact forecasting calculations, the potential cost impact of these developments going ahead on community and mental healthcare would be as follows:

**Mental Health costs:**

58 residential units x £194.46 = £11,278 – monies to be focused as per below

**Community healthcare costs:**

58 residential units x £182.03 = £10,557 – monies to be focused as per below

**Acute costs:**

58 residential units x £2,214.46 = £128,438

**Total acute, mental health and community costs requested for development = £150,273**

The CCG has consulted the Community Health Provider, and received the following comments on this application:

“This will put additional pressure on our local mental health services across the age range, ie adult, children and older people. Consequently, we will need to seek to increase our service provision in Cheshunt for adults and older people and potentially at Hoddesdon where our CAMHS services are currently located. As our existing buildings are already operating at capacity it is likely that we will need to build additional space in these locations for which we will require a S106 contribution.”

The CCG has received the following comments from Herts Community Trust:

“This application would have an impact on the estate required for both HCT as well as HPFT. We need therefore to raise this in order to fund additional facilities as part of the developments at Hoddesdon and/or Cheshunt from s106 monies.”

Cheshunt Community Hospital would be considered as a focus for these monies.

The CCG and NHS England are keen to continue to work with Broxbourne Borough Council as well as the developer to ensure that local healthcare services have sufficient investment to meet these additional needs of existing patients. The commissioners’ intention is to secure developers contributions to develop, reconfigure and extend existing assets and not commission services from another new building.

In terms of identifying a project in full at this stage we have to bear in mind the following:

- All projects are to be approved prior to implementation via the NHS England Prioritisation and Approval process.



- All planning application responses are uploaded into the public domain; identifying a project at an early stage before funding is secured may raise public expectation and indicate a promise of improvements and increased capacity that may not be viable without a secured financial contribution.
- A project identified and costed at an early stage may not meet the objectives of the current strategies or could have significantly increased in cost, if it has been proposed some time prior to the delivery of the development.
- In line with the five year forward view the way in which primary care is delivered is changing, this includes the amalgamation of practices and co-locating of services. Having flexibility to attribute funding to scheme that may not have been identified at

the time of responding to a planning application can help us to provide the most benefit to the community with the least amount of funding.

These points also apply to Acute, Community and Mental Health.

At the time of responding to planning applications it is unclear when the development may be delivered, even if the site is listed in the Local plan and features on the housing trajectory for the local authority or indeed if permission will be granted. It remains that this development as with any other if it does materialise will have an impact on primary healthcare provision in the area and its implications, if unmitigated, would be unsustainable. NHS England and East & North Herts Clinical Commissioning Group would not wish to raise an objection to the proposed development but this is dependent on the decision on the S106 monies applied for in our response on the basis the Local Planning Authority may wish to review the development's sustainability if such impacts are not satisfactorily mitigated. When it has been confirmed that this development is to go ahead, when & what the confirmed build out trajectory is then we would be pleased to work with Broxbourne Borough Council and provide full details of the project to be funded with S106 at the point of draw down. In the event S106 monies are not forthcoming as requested we object to this planning application as to increase patient numbers without increasing capacity would make this development not viable in Healthcare terms.

Yours sincerely



Sue Fogden MRICS LLB (Hons)  
Assistant Director – Premises  
East & North Herts and Herts Valleys Clinical Commissioning Groups



(Please note that I work four days each week, Monday, Tuesday, Wednesday and Thursday)