Bath and North East Somerset, Swindon and Wiltshire Integrated Care Board

NHS Property Services

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16 January 2024

Dear Gen,

Application Ref:	**PL/2023/06725**
Address:	**Land at Longleaze Land, Melksham, SN12 6QJ**
Proposal:	**Construction of 82 bed elderly care home (Use Class C2)**

NHS Bath and North East Somerset, Swindon and Wiltshire Integrated Care Board (BSW ICB) and NHS Property Services (NHSPS) are responding to the above application in relation to the requirement for a S106 planning obligation to mitigate the impact of the development on local healthcare infrastructure.

NHS Bath and North East Somerset, Swindon and Wiltshire ICB

The BSW ICB covers a large and varied geographical area that includes the densely populated and growing town of Swindon to the north, the historic city of Bath, Salisbury plains to the south, and the rolling Mendip Hills to the west. The ICB commissions (plans, designs, and purchases) many of the health services that the local population use, including medicines, hospital care, urgent and emergency services, mental health care, GP services, community pharmacy, dentistry, general ophthalmology (eye care services), and various community services.

To ensure that our health and care services meet the healthcare needs of the population living across BSW, we have three localities, each represented by place-based partnership called Integrated Care Alliances (ICAs). Each ICA is made up of local doctors, hospital chief executives, clinical commissioners, council officers, patient and voluntary and social enterprise sector groups who lead the detailed design and delivery of integrated services across their localities and neighbourhoods. The ICB and its partners are therefore well placed to identify the implications of the proposed development on healthcare services in the local area.

Local Policy on Infrastructure Delivery and Funding

National policy (NPPF paragraphs 55 to 58) and guidance set an expectation for development proposals that impact on local infrastructure to mitigate their impact to be considered sustainable. There is a well-established connection between planning and health. Residential developments often have very significant impacts in terms of the need for additional healthcare provision for future residents, meaning that a planning obligation requiring that the development contributes to, or delivers, a new healthcare facility is often necessary.

Policy 3: Infrastructure Requirements of the Wiltshire Core Strategy states that all new development will be required to provide for the necessary on-site and, where appropriate, off-site infrastructure requirements arising from the proposal. Healthcare facilities are identified as essential infrastructure, and as such afforded the highest priority. The cost of providing necessary infrastructure will be met through the appropriate use of planning obligations. Joint Melksham Neighbourhood Plan Policy 8 sets out similar provisions. The Wiltshire Infrastructure Delivery Plan 3/Appendix 1: Melksham Community Area notes that local primary healthcare facilities are already undersized for the number of current patients.

The delivery of new and improved healthcare infrastructure is significantly resource intensive. The NHS as a whole is facing significant constraints in the terms of the funding needed to deliver healthcare services, and the level of projected population growth in the Western Riverside area will add further pressure to the system. It is critical that new developments in the area make a proportionate contribution to funding the healthcare needs arising from new residents – access to essential healthcare services promotes good health outcomes and supports the overall social and economic wellbeing of the area.

Existing Primary Care Capacity in the Local Area

The proposed development is located to the south-east of the centre of Melksham, adjacent to the Spa Medical Centre. The ICB has identified that Bradford on Avon and Melksham Primary Care Network (PCN) sites Spa Medical Centre and Giffords Surgery are most likely to be impacted by the proposed development. The location of the surgeries in relation to the application site is shown on Map 1. Capacity assumptions for the GP surgeries, based on November 2023 weighted patient lists, are shown in Table 1.

The practices have been assessed to establish if they have adequate overall floorspace (clinical rooms and supporting accommodation) to provide services to the existing local population, in line with NHS Long Term Plan objectives relating to primary care provision. The assessment involves reviewing weighted patient list sizes against the current net internal area (NIA) of premises. Weighted patient list sizes are used in preference to overall patient registrations because weighting for patient demographics reflects that certain types of patients place a higher demand on practices than others – for example, older and very young patients.

A standard floorspace requirement of approximately 150sqm GIA/ 120sqm NIA per 1,750 patients is used, aligned to Department of Health (DH) guidance within *Health Building Note 11:01: Facilities for Primary and Community Care (HBN 11-01)*. Health Building Notes are published by the DH to provide best practice guidance on the design and planning of new healthcare buildings and the adaptation or extension of existing facilities. They are intended to support the briefing and design processes for individual projects in the NHS building programme.

These practices have seen a significant growth in patient list size over the past 5 years due to ongoing housing growth. The practices currently operate with a shortfall of overall floor area (clinical rooms and supporting accommodation) for the current patient list when compared against national guidance for primary and community care services. This means these practices do not have sufficient spare capacity within their existing estate as currently configured that could accommodate the additional primary healthcare services needed by new residents of the proposed development.

Map 1 Bradford on Avon and Melksham PCN GP practice locations in relation site

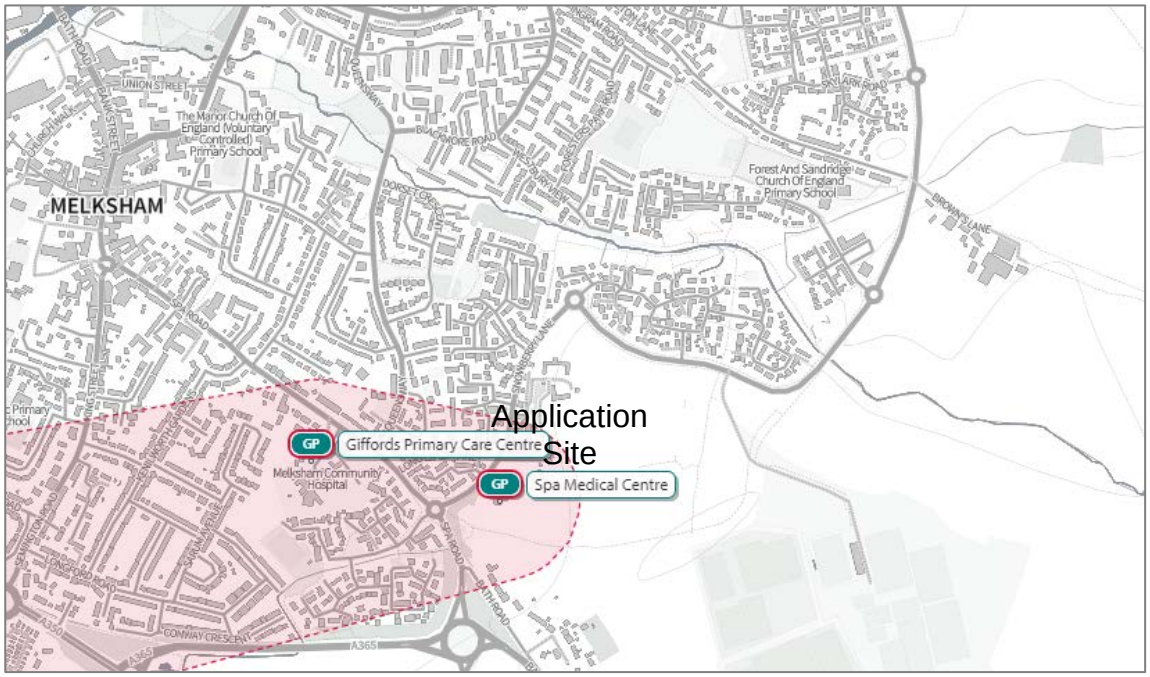

Table 1 Capacity of existing primary healthcare infrastructure

Premises	Weighted Patient List Size	Required Floorspace (NIA) as per HBN Guidance	Actual NIA of Current Premises	Space Surplus or Deficit
Giffords Surgery	14,501	994	609	388
Spa Medical Centre	13,933	955	894	61

Healthcare Needs Arising from Proposed Development

Given that the practices currently operate with an overall space deficit, to properly mitigate the impact of the proposed development a planning obligation will be required to create the full amount of additional primary care floorspace needed to serve the new residents. It is important to note that care homes rely on health infrastructure in the local area and generally require additional primary care services. This additional level of primary care service provision is crucial to avoiding unnecessary hospital admissions, therefore local practices having the infrastructure capacity to accommodate the additional workforce and related resources needed to support care homes is key. The site-specific capital cost required to deliver the needed additional floorspace via

refurbishment and/or extension of existing premises (build cost of £5,273/sqm) within the locality is included in Table 2.

Table 2 Capital costs calculation of additional primary care floorspace required

Total care home bed spaces	Estimated New Residents	Required Floorspace as per HBN 11-01 Guidance	Delivery Approach	Total Capital Cost
82	82	7.0sqm	Refurbishment and/or extension of existing premises	£37,062

Estimated new residents are calculated based on an occupancy ratio of one person per care bed, a total of 71 residents. The additional floorspace requirement (sqm) arising from this residential population is then calculated based on 150sqm GIA per 1,750 patients. This calculation is directly related to the proposed development, mitigating the uplift in population by establishing the required increase in primary care services floorspace, then applying a build cost to quantify the contribution needed for mitigation. The build cost is based on NHSPS build cost benchmarks for refurbishment and extension, rebased to Wiltshire and adjusted for professional fees, fit out and contingency, but excluding land acquisition.

The recently completed PCN Toolkit for the area identifies that the existing estate has a mix of core and flex premises. Core and flex premises have the ability to be refurbished and/or extended to create the additional floorspace required to mitigate the impact of the proposed development. In doing so, this would also enable an efficient use of the existing healthcare facilities that are well-located in relation to the proposed scheme. The ICB would look to secure the above capital cost as a financial contribution in the S106 linked to grant of planning permission. It is important that the detailed drafting of any S106 provides appropriate flexibility to align with ICB commissioning processes and estates plans, and we would welcome discussion on this should the application be approved.

Conclusion

Based on the latest data on primary care capacity within the Bradford upon Avon and Melksham PCN, there is not sufficient existing primary healthcare capacity locally to accommodate the 82 residents calculated to be generated by the proposed development. Mitigation is therefore required in the form of a financial contribution of £37,062 towards the capital cost of delivering the additional primary care floorspace required to serve residents of the new development. Without this mitigation, the development would not comply with Policy 3 of the Wiltshire Core Strategy, Policy 8 of the Joint Melksham Neighbourhood Plan, or paragraphs 55 to 58 of the NPPF and related Planning Practice Guidance on Planning Obligations. We hope this information is of assistance to you. Please do not hesitate to contact us should you have any questions.

Yours sincerely,

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NHS Bath and North East Somerset, Swindon

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NHS Property Services