

Agenda Item 8.

TITLE:	Section 106 and CIL payments to support increased primary care infrastructure.
FOR CONSIDERATION BY	Health and Wellbeing Sub Committee on 16 November 2015
WARD:	None Specific
DIRECTOR:	Stuart Rowbotham, Director, Health and Wellbeing

OUTCOMES/BENEFITS TO THE COMMUNITY

With the major population growth deriving from the building of Wokingham Borough's Strategic Development Locations (SLDs) and other housing growth, ensuring that all residents have access to high-quality and responsive primary healthcare services is an important outcome for the Authority.

The support for increased infrastructure provision in primary healthcare through the release of capital funding from Section 106 and Community Infrastructure Levy (CIL) contributions is one mechanism that the Council can use to ensure existing and new residents have access to the high quality primary healthcare provision that meets their needs.

RECOMMENDATION

That the Health and Wellbeing Board Sub Committee notes the recommendations of the Grimes Report, and creates processes to assess and make recommendations for the allocation of Section 106 and CIL contributions to medical facilities to meeting the needs of the growing population.

SUMMARY OF REPORT

One agreement has already been made between Wokingham Borough Council and a medical practice to contribute towards expanded primary healthcare provision.

Currently practices seeking to improve or expand their premises currently have access to a range of funding options including private financing / business mortgages, and also NHS England have a Primary Care Infrastructure Fund which opens to receive applications at regular intervals. This requires quite advanced planning usually in the form of having architects plans drawn up at the least. Section 106 allocations have been identified for medical facilities in those applications subject to Section 106. Those applications covered by CIL will have a total amount of capital allocation identified, but not specified for specific infrastructure needs.

When assessing allocation of S106 or CIL funds for medical facilities, the Health and Wellbeing Board Sub Committee should seek information from practices about their plans which cover the following points:

- How they meet the Grimes report recommendations
- Timescales for infrastructure delivery
- Timescales for staff recruitment

- Applications for funding from other sources e.g. NHS England
- How they meet the Primary Care Strategic vision for Berkshire West

Background

Wokingham Borough Council appointed Grimes Ltd. in January 2014 to carry out a needs assessment for primary healthcare requirements in the Borough's Strategic Development Locations at Arborfield Garrison, South of M4, Wokingham North and Wokingham South. This assessment informs the requests for developer Section 106, Community Infrastructure Levy (CIL) and/or other funding contributions.

The Wokingham Core Strategy to 2026 identified a need to develop 13,232 new dwellings by 2026. The Wokingham strategy is to deliver the majority through four Strategic Development Locations and development across other areas as shown below in Table 1.

The Core Strategy aims to deliver sustainable growth which includes social, economic and environmental aspects. To ensure the SDLs are sustainable each will include a local centre comprising a range of shops as well as other services and amenities.

The Core Strategy was based on the Berkshire Strategic Housing Market Assessment (SMHA) produced by DTZ in 2007 and the GL Hearn Housing Options Advice Report (October 2010) which predicted household sizes in a range of 2.42 to 2.52 persons per dwelling by 2026. The Census of 2011 indicated that Wokingham has maintained an occupancy rate of 2.52 per dwelling.

The 2011 Census also indicated that the total population and number of households in Wokingham had not reached the expected levels identified in these planning reports. This may be due to national and international economic conditions delaying house building.

The 2.52 persons per dwelling figure will be used for developing capacity in General Practice as it creates a nominal 4% contingency in capacity planning over the minimum population prediction for 2026. Based on an average occupancy rate of 2.52 the Borough will see an increase in population of 33,280 persons totaling 185,020 household residents which equates to a 22% increase in resident population by 2026. If the population meets the low household size prediction of 2.42 the household resident population of Wokingham Borough would reach 183,761, representing a growth of 21%.

Discussions with NHS England have confirmed three key planning assumptions:

- 1 GP lists should include 1,850 patients per Whole Time Equivalent (WTE) GP;
- 2 Primary Care is moving towards a seven day a week delivery model;
- 3 Newly formed Practices should have a minimum of three WTE GPs.

Consequently it is likely that each SDL and other growth areas will require additional GP capacity shown in Table 1. This indicates requirement for an additional 18 WTE GPs by 2026.

	North Wokingham	South Wokingham	Arborfield Garrison	South of M4	Non-SDL	Total
New dwellings	1,500	2,500	3,500	3,000	2,732	13,232
New population (at 2.52 per dwelling)	3,773	6,288	8,803	7,545	6,871	33,280
GP WTE* (at 1,850 patients per WTE)	2.0	3.4	4.8	4.1	3.7	18.0

*WTE: Whole Time Equivalent

It should be noted that Wokingham has a notional 70 whole time equivalent GPs supporting the population. Over the next 12 years it can be anticipated that between 33% and 40% of Wokingham's GPs may retire and the area will require a total of between 41 and 46 whole time equivalent GPs to be recruited to cover both population growth and retirements.

The Grimes Report does not examine primary health models as this is outside the remit of the Borough Council. Redesign of clinical pathways is the responsibility of NHS England and Wokingham Clinical Commissioning Group (CCG), who are working on a Berkshire West strategy at present. Table 2 below outlines the suggestions for GP premises expansions and the costs at 2014 prices to meet demand in the Borough.

Table 2: Cost Proposals for developing GP estate in the Borough of Wokingham

SDL	Facilities expansion	Space required sq. m GIA	Overall cost (2014 prices) Excl. VAT	Overall cost (2014 prices) Incl. VAT
North Wokingham South Wokingham	Expand Burma Hills Surgery 2 WTE GP	179	£408,436	£490,123
Arborfield	Develop new Health Centre 5 WTE GP	800	£2,724,494	£3,269,393
Non SDL	Expansion of Brookside surgery for 2 WTE GP	75	£171,132	£205,359
Totals		1054	£3,304,062	£3,964,875

The remaining WTE GPs were identified as being able to be accommodated in existing premises.

FINANCIAL IMPLICATIONS OF THE RECOMMENDATION

The Council faces severe financial challenges over the coming years as a result of the austerity measures implemented by the Government and subsequent reductions to public sector funding. It is estimated that Wokingham Borough Council will be required to make budget reductions in excess of £20m over the next three years and all Executive decisions should be made in this context.

	How much will it Cost/ (Save)	Is there sufficient funding – if not quantify the Shortfall	Revenue or Capital?
Current Financial Year (Year 1)	£150,000 pre-agreed for Wokingham Medical Centre	Yes	Capital
Next Financial Year (Year 2)	None yet agreed		Capital
Following Financial Year (Year 3)	None yet agreed		Capital

Other financial information relevant to the Recommendation/Decision

None.

Cross-Council Implications

The Health and Wellbeing Board Sub Committee will act as a Programme Board to manage the planning of local primary care infrastructure across the Borough up to 2026. The Sub-committee will therefore make recommendations for future S106 and CIL capital payments to secure the new or improved facilities required.

Other infrastructure delivery mechanisms within the Borough (e.g. the Sustainable Communities Implementation Working Group) should have clear sight of the recommendations for S106 and CIL funding made by the Health and Wellbeing Board Sub Committee, to ensure strategic fit.

List of Background Papers

Terms of Reference of Health and Wellbeing Board Sub Committee
Meeting the Health Needs of Wokingham Borough Council's Major Growth Areas; Grimes Ltd. 2014. (The Grimes Report).
Wokingham Borough Health and Wellbeing Strategy 2014-17
Wokingham Needs Assessment (JSNA) 2014-15
WBC Core Strategy - Development Plan Documents 2010

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