

East & North Herts CCG
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Welwyn Garden City
Hertfordshire, AL8 6JL
Mobile Telephone: 07771 842772

By email:

Catherine Gooding-Williams
Planning Systems Manager
Welwyn Hatfield Borough Council

29 December 2020

Dear Catherine,

Re: Planning Application Consultation: 6/2020/3420/MAJ

Proposal: Demolition of existing buildings and construction of 289 residential units (Use Class C3) and community hub (Use Class E/F.2), with public realm and open space, landscaping, access, associated car and cycle parking, refuse and recycling storage and supporting infrastructure.

Location: Biopark Broadwater Road, Welwyn Garden City AL7 3AX.

East & North Herts Clinical Commissioning Group has considered this planning application. Should this development of 289 dwellings go ahead, based on an average occupancy of 2.4 occupants per unit, it will create circa 694 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 applications for closed lists 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. It is therefore important that new housing contributes financially towards healthcare infrastructure. Patient lists are closed in exceptional circumstances.

When new dwellings and registrations are planned the preferred option is to find a way to absorb those significant demands upon surgeries by providing additional resources, e.g. by re-configuring, extending or relocating the premises to provide sufficient space to increase resources and clinical services and thus keep the patient lists open. Developers contributions under these circumstances is considered fair, reasonable and necessary.

Patients are at liberty to choose which GP practice to register with providing they live within the practice boundary and the CCG nor NHS England can 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 several years, East and North Herts CCG, in accordance with national direction, has commissioned a number of additional services from general practice. This aspect of the general practice work is now due to increase substantially. Namely, the NHS Long Term Plan set out a requirement for practices to form Primary Care Networks (PCNs) effective from 1 July 2019. NHS England agreed an Enhanced Service to support the formation of PCNs, additional workforce and service delivery models for the ensuing 5 years.

In East and North Herts CCG there are 13 PCNs across the 6 localities; each covering a population of between circa 30,000 and 76,000 patients. These PCNs are expected to deliver services at scale for its registered population whilst working collaboratively with acute, community, voluntary and social care services in order to ensure an integrated approach to patient care. The PCN that covers Hatfield has a combined patient registration list of 52,066.

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:

$289 \times 2.4 = 693.6$ new patients

$693.6/2000 = 0.3468$ of a GP *GP based on ratio of 2,000 patients per 1 GP and 199m² as set out in the NHS England "Premises Principles of Best Practice Part 1 Procurement & Development"

$0.3468 \times 199 \text{ m}^2 = 69.0132 \text{ m}^2$ of additional space required

$69.0132 \text{ m}^2 \times \text{£}2,964^* = \text{£}204,555.1248$ * (*Build cost; includes fit out and fees)

$\text{£}204,555.1248/289 = \text{£}707.8032$ (rounded up to £708 per dwelling)

Total GMS monies requested: £204,612.00

East and North Herts Clinical Commissioning Group propose to focus the GMS monies on expanding, reconfiguring existing or realising an additional site for the Peartree Group of practices of which there are currently 3. In these pandemic times the direction of travel is to future proof GP services by providing areas at practices that can be isolated from the main practice area for obvious reasons. In terms of the Peartree Group it would be possible to expand & completely reconfigure Hollybush for example and use it as an

isolation site, possible to serve the whole PCN. A preliminary exercise shows that in accordance with the development trajectory the Peartree Group will incur a shortfall of circa 448 m² of GP space, the equivalent of their main practice in Peartree Lane. That is based on an average occupancy of 2.4 per dwelling whereas the expectation is that for 2, 3 and 4 bedroom dwellings that occupancy will in fact be greater. However to achieve any advancement of any intended project S106 monies are required as being ultimately the only source of funding. A trigger point of an occupancy of the 75th 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 as occupiers of the development will access a variety of 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:

289 residential units x £201.75 = £58,306.00

Community Healthcare costs:

289 residential units x £182.03 = £52,607.00

Community Services for the WelHat area are centralised from Queensway Health Centre in Hatfield Town Centre. The focus of the S106 would be on the evolving expansion, re configuration and refurbishment project including the installation of a lift.

Mental Health Services for the Hatfield and Welwyn Garden City area are centralised at Roseanne House in Welwyn Garden City. The focus of the S106 would be on the evolving expansion, reconfiguration & refurbishment project on that site by taking on additional space with the building.

Both these projects rely on S106 funding being made available.

Total mental health and community costs requested for the development= £110,913.00

The CCG is keen to continue to work with Welwyn Hatfield Borough Council as well as the developer to ensure that patients access to healthcare isn't compromised by this development, or indeed, other developments.

In terms of identifying a project in full at this stage the following points must be considered:

- All projects are subject to Full Business Case approval by the CCG and NHS England.
 - A commercial arrangement has to be agreed between the landowner, developer and end user based on a compliant design specification and demonstrate value for money.
- All planning applications and responses are in the public domain; identifying a project before any design work starts and funding is discussed, agreed and secured may raise public expectation and indicate a promise of improvements and increased capacity,

which are subject to both above points. Securing developers contributions to all aspects of healthcare is vital.

- A project identified and costed in response to the planning application may not meet the objectives of the current strategies or could have significantly increased in cost, especially if there has been any significant time lapse from the date of the response to the date of implementation of the planning consent.

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. But should this development, as with any other, materialise, it will have an impact on healthcare provision in the area and must be mitigated by legally securing developers contributions.

Subject to certainty that healthcare will form part of the development and/or developers contributions will be secured towards all aspects of healthcare East & North Herts Clinical Commissioning Group does not raise an objection to the proposed development.

Yours sincerely



Sue Fogden MRICS LLB (Hons)



Assistant Director – Premises
East & North Herts and Herts Valleys Clinical
Commissioning Groups