

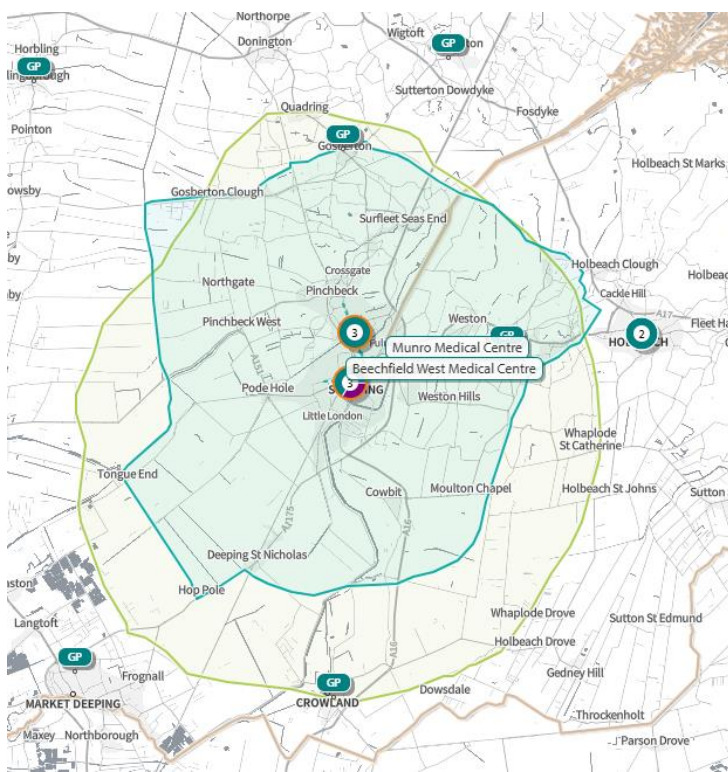
NHS Lincolnshire Integrated Care Board
Application Number: H16-0767-23
AMENDED DUE TO REDUCED CAPACITY FROM 88 TO 86 BEDROOMS
Location: Former Bull And Monkie, Church Gate, Spalding

Impact of new development on GP practice	The above development is proposing 86 single bed occupancy dwellings which, based on the average of 1.43 people per dwelling for the South Holland District Council area, would result in an increase in patient population of 123. The calculations below show the likely impact of this new population in terms of number of additional consultation time required by clinicians. This is based on the Department of Health calculation in HBN11-01: Facilities for Primary and Community Care Services. Consulting room GP <table border="1"> <tr> <td>Proposed population</td><td>123</td></tr> <tr> <td>Access rate</td><td>5260 per 1000 patients</td></tr> <tr> <td>Anticipated annual contacts</td><td>$0.123 \times 5260 = 647$</td></tr> <tr> <td>Assume 100% patient use of room</td><td>647</td></tr> <tr> <td>Assume surgery open 50 weeks per year</td><td>$647/50 = 13.$</td></tr> <tr> <td>Appointment duration</td><td>15 mins</td></tr> <tr> <td>Patient appointment time hrs per week</td><td>$13. \times 15/60 = 3.2$ hrs per week</td></tr> </table> Treatment room Practice Nurse <table border="1"> <tr> <td>Proposed population</td><td>123</td></tr> <tr> <td>Access rate</td><td>5260 per 1000 patients</td></tr> <tr> <td>Anticipated annual contacts</td><td>$0.123 \times 5260 = 647$</td></tr> <tr> <td>Assume 20% patient use of room</td><td>129</td></tr> <tr> <td>Assume surgery open 50 weeks per year</td><td>$129 /50 = 2.6$</td></tr> <tr> <td>Appointment duration</td><td>20 mins</td></tr> <tr> <td>Patient appointment time hrs per week</td><td>$2.6 \times 20/60 = 0.9$ hrs per week</td></tr> </table> Therefore an increase in population of 123 in the South Holland District Council area will place extra pressure on existing provisions, for example- extra appointments requires additional consulting hours (as demonstrated in the calculations above.) This in turn impacts on premises, with extra consulting/treatment room requirements.	Proposed population	123	Access rate	5260 per 1000 patients	Anticipated annual contacts	$0.123 \times 5260 = 647$	Assume 100% patient use of room	647	Assume surgery open 50 weeks per year	$647/50 = 13.$	Appointment duration	15 mins	Patient appointment time hrs per week	$13. \times 15/60 = 3.2$ hrs per week	Proposed population	123	Access rate	5260 per 1000 patients	Anticipated annual contacts	$0.123 \times 5260 = 647$	Assume 20% patient use of room	129	Assume surgery open 50 weeks per year	$129 /50 = 2.6$	Appointment duration	20 mins	Patient appointment time hrs per week	$2.6 \times 20/60 = 0.9$ hrs per week
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¹ Source: Lincolnshire Research Observatory 2011 Census Data

GP practice(s) most likely to be affected by the housing development	Due to the fact that patients can choose to register at any practice that covers the area of the development, and there are no waiting lists for patients, all practices that provide care for the region that the development falls within are obliged to take on patients, regardless of capacity. The development will impact Beechfield Medical Centre and Munro Medical Centre as the development is within their catchment area.
Issues to be addressed to ensure the development is acceptable	This development would put additional demands on the existing GP services for the area and additional infrastructure would be required to meet the increased demands. NHS Lincolnshire Integrated Care Board (LICB) wishes for the Section 106 contribution from the development of 86 single bed care home at Former Bull And Monkie, Church Gate, Spalding to contribute to the expansion in capacity through remodelling/changes to layout or extension to existing facilities within the South Lincolnshire Rural Primary Care Network (PCN) at Beechfield Medical Centre and/or Munro Medical Centre. Alternatively, the funding may, where appropriate, be used to support expansion in capacity at an alternative general practice site as required to meet the local population health need. The funding will be used to support the practice where the care home is aligned, once it is nearing completion. The Lincolnshire Integrated Care Board may need the flexibility to utilise the funding at neighbouring practices which cover the area in order to create the capacity. The strategic direction both nationally through the development of PCNs and locally through the Sustainability Transformation Plan is to provide primary care at scale, facilitating 100% patient population primary care and services delivered in the community in an integrated way. Included within the PCNs this is the introduction of additional roles to enhance the delivery of primary care, including a Clinical Pharmacist, Physiotherapist and Social Prescriber. Nationally the NHS Long Term Plan, published in January 2019, seeks to improve the quality of patient care and health outcomes. The plan builds on previous national strategies, including the General Practice Forward View (2016), includes measures to: • Improve out-of-hospital care, supporting primary medical and community health services; • Ensure all children get the best start in life by continuing to improve maternity safety including halving the number of stillbirths, maternal and neonatal deaths and serious brain injury by 2025; • Support older people through more personalised care and stronger community and primary care services; • Make digital health services a mainstream part of the NHS, so that patients in England will be able to access a digital GP offer. The Beechfield Medical Centre and Munro Medical Centre are within the LICB South Lincolnshire Rural PCN where the housing is being developed; there is a huge

variation in the type; age and suitability of premises within the PCN of the planned development.



Fairly and reasonably related in scale and kind to the development.

	Average list size per GP	Required m2	£ per m2	Total cost	£per person
GP team	1,800	170	2,300	£391,000	217
GP furnishings	1,800			£20,000	12
					229
Contingency requirements @ 20%					46
Total per resident					275
Total per dwelling (1.43 x 275)					393.25

The table above shows the contribution formula which is based on the needs of a Primary Care Health Team and associated administration support. By applying average national list sizes to these groups and identifying the required area and furnishings, a total cost of £275 per patient is determined. This figure is multiplied by 1.43 (the average number of persons per single bed occupancy within a care home for South Holland District Council) to provide a funding per dwelling of £393.25.

Financial Contribution requested

The contribution requested for the development is £33,819.50 (£393.25 x 86 single bed care home occupancy dwelling).

Please note that the expectation is that the appropriate indexation rate and any late payment penalties would also be paid on top of the value specified above.

Trigger point

After reviewing the practice response regarding their capacity to accommodate the increase in patient numbers arising from this development, it's requested that the trigger point for the release for funds for health care be set at payment of all monies

	upon completion of 50 percent of the dwellings for each phase of the development. This will ensure the practices are not placed under undue pressure. To ensure that there is sufficient time carry out the works and allow the s106 funds to be spent in the most appropriate way, a repayment period of 10 years from receipt of the final payment transfer (for the entire development) to the relevant NHS body will be required.
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NHS Lincolnshire Integrated Care Board

21st November 2023

Amended 27th January 2025