

HEALTH OVERVIEW AND SCRUTINY COMMITTEE: 5 SEPTEMBER 2018**REPORT OF WEST LEICESTERSHIRE AND EAST LEICESTERSHIRE &
RUTLAND CCGS****SECTION 106 OF THE TOWN AND COUNTRY PLANNING ACT 1990****Purpose of Report**

1. The purpose of this report is to provide an overview of how Section 106 healthcare contributions are managed by the NHS and the process followed to ensure that all possible funding is received from developers.

Background

2. Planning obligations under Section 106 of the Town and Country Planning Act 1990 (as amended), commonly known as Section 106 agreements, are a mechanism which make a development proposal acceptable in planning terms, that would not otherwise be acceptable. They are focused on site specific mitigation of the impact of development. Developers applying for planning permission can be asked to contribute financially and in other ways to the infrastructure needed to support the new development, including health infrastructure, and to mitigate any impacts arising from the development.
3. NHS England held the remit for the management of primary care estates and the facilitation of Section 106 healthcare contributions until January 2016; with the responsibility transferring to CCGs at this point under co-commissioning delegation.
4. The CCGs have maintained close links with NHS England and have established effective working relationships with Borough and District Council teams to maximise the Section 106 healthcare contributions requested and spent to benefit patients within the Leicestershire and Rutland area.

Current Process

5. Please refer to appendix A, Section 106 Healthcare Contribution Process – West Leicestershire CCG. WLCCG developed and implemented this process to support the management of Section 106 contributions; which has since been adopted by ELRCCG.
6. The CCG review the detail of any proposed development and assess the potential impact of the increased population on local healthcare services. The CCG uses a clear methodology for allocating practices and applying for healthcare contributions, taking into account; general practice boundaries, size of the proposed development, current practice capacity/resilience, commitment in principle from the practice and existing Section 106 agreements.

7. Following consultation with identified practices, the CCG will respond to the Council. Our response may;
 - Recommend refusal of the planning application on the grounds of insufficient healthcare capacity in the area. In this instance a Section 106 healthcare contribution would be requested if the application is subsequently approved;
 - Request a Section 106 healthcare contribution to increase clinical capacity to meet the demand of the proposed increased population;
 - Request that occupancy trigger points are carefully considered where premises investment is required to increase capacity before patients register at the identified practice.
8. The CCG regularly checks the status of planning applications through the Borough and District Council planning portals. Where a planning application has been approved and a Section 106 healthcare contribution has been agreed, the legal agreement is downloaded and saved on file for information.
9. The CCG meets with Borough and District Councils on a quarterly basis to discuss new healthcare contributions received by the council, progress with GP practice projects and to seek approval for newly identified projects.
10. The CCG GP Contracts and Quality team maintains an effective engagement relationship with its member practices and is familiar with the premises needs of each. Practices will approach the CCG for advice in planning how Section 106 monies can be effectively utilised and teams work closely to ensure all available funds are spent in accordance with the obligations as set out in the relevant section 106 agreement.

Notable Projects to Date

11. Please refer to Appendix B, West Leicestershire CCG S106 Healthcare Contributions Spend and Appendix C, East Leicestershire & Rutland CCG S106 Healthcare Contributions Spend. WLCCG has been actively working with its member practices, and the Borough and District Councils, to ensure that Section 106 healthcare contributions are spent in a timely manner and in accordance with conditions as outlined in the legal agreements.
12. Since taking responsibility for the facilitation of Section 106 healthcare contributions in January 2016, WLCCG has achieved a spend totalling around £1.5m to support the improvement and expansion of primary medical healthcare facilities, and has a further £1.4m committed to premises improvement projects.
13. To date, S106 healthcare contributions have supported a number of premises projects locally, including;
 - The internal refurbishment of clinical consulting rooms at Measham Medical Unit, Highgate Surgery, Anstey Surgery and Forest House Surgery;
 - Premises extensions at Castle Donington Surgery, Ibstock House Surgery, Heath Lane Surgery and The Burbage Surgery. Please refer to Appendix D, Heath Lane Surgery Extension Project – Mini Case Study;

- Internal reconfiguration and refurbishment of Pinfold Medical Centre and the two branch surgeries of Charnwood Medical Group;
 - The purchase of clinical equipment for Barrow Health Centre, Anstey Surgery, Quorn Medical Centre, Highgate Surgery, Station View Health Centre.
14. East Leicestershire and Rutland CCG have secured £1.6m in Section 106 healthcare contributions from Blaby County Council and £306k from Harborough District, Charnwood Borough and Melton Borough Councils.
15. Larger sums of Section 106 healthcare contributions have been allocated to Countesthorpe Health Centre, Hazlemere Medical Centre, Forest House, The Limes Medical Centre, Wycliffe and Masharani. Three practices will be using funds for extensions to current premises and one for general refurbishments.

Officer to Contact

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List of Appendices

Appendix A: Section 106 Healthcare Contribution Process – WLCCG

Appendix B: West Leicestershire CCG S106 Healthcare Contributions Spend

Appendix C: East Leicestershire & Rutland CCG S106 Healthcare Contributions Spend

Appendix D: Heath Lane Surgery Extension Project – Mini Case Study

Section 106 Healthcare Contribution Process – West Leicestershire CCG

