
REPORT TO:	OVERVIEW AND SCRUTINY COMMITTEE	AGENDA ITEM: 8
DATE OF MEETING:	17th JANUARY 2018	CATEGORY: DELEGATED
REPORT FROM:	STRATEGIC DIRECTOR (SERVICE DELIVERY)	OPEN
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SUBJECT:	PRIMARY MEDICAL PROVISION IN AND AROUND STENSON WARD	REF:
WARD(S) AFFECTED:	STENSON	TERMS OF REFERENCE:

1.0 Recommendations

- 1.1 To note the information regarding healthcare facilities as a result of Local Plan commitments for around 1950 dwellings at Wragley Way (plus additional areas within Derby City); any future potential additional dwellings (up to 1200) within the Infinity Garden Village.
- 1.2 To note the information on the provision and application of the Section 106 healthcare contribution for the development at Stenson Road Stenson.

2.0 Purpose of Report

- 2.1 To report to the Committee the process around the provision of any appropriate contribution to the provision of healthcare facilities to accommodate increases in population at developments at Wragley Way, future potential site at Infinity Garden Village; and the outcome of the Section 106 healthcare contribution at Stenson Road as requested by the Ward Members Councillors Shepherd and Chahal (see attached request).

3.0 Detail

- 3.1 During the course of the drafting of the Local plan and the growth to the population envisaged, many bodies were consulted and this process continued at every stage of the plan so that all stakeholder were aware, could make comments and could then also make the necessary provision to prepare for the inevitable increase in demand for their services. One such stakeholder is the NHS. Records show that they were engaged in the consultation for the plan and therefore have been aware of the forecast increase in demands for primary care services. As such strategic housing allocations are proposed and put forward for adoption taking into account any feedback from infrastructure providers among others. A similar process would have been followed on the Derby City side regarding the allocations in its plan.
- 3.2 Notwithstanding the forward planning strategy, the planning system makes provision for developments to mitigate for the impact on infrastructure through the use of

Planning Obligations under Section 106 of the 1990 Act, although these provisions are subject to certain statutory rules.

- 3.3 It is worth setting out at this stage the requirements for the use of sums levied under the 1990 act as set out in the Community Infrastructure Levy Regulations 2010 and advice set out in the NPPF at paragraph 205:

CIL Regs 2010 (paragraph 122):

A planning obligation may only constitute a reason for granting planning permission for the development if the obligation is—

(a) necessary to make the development acceptable in planning terms;

(b) directly related to the development; and

(c) fairly and reasonably related in scale and kind to the development.

Any contributions are also subject to sufficient funds from the development being available for infrastructure use tested by way of viability assessments. Government guidance advises that development only pays for what it can afford to enable the development to go ahead.

- 3.4 In the case of the Wragley Way allocation (Policy H15), evidence shows that the NHS was consulted at every stage of the process where the increase in size of the population of the district and the main areas for strategic growth were being planned. The Duty to Cooperate Statement (March 2014) clearly reports this at paragraphs 1.8, 1.9 and 3.48. Notwithstanding this, the NHS (as the CCG) has the opportunity to 'claim' funds for primary care whenever it is consulted on a planning application. History shows (and has been reported many times as such to the Planning Committee) that such opportunities are not always taken up or requests are received without the requisite evidence which then cannot result in a contribution. The first outline application for the Wragley Way site on South Derbyshire was received in November 2017 and the CCG invited to comment. To date no response has been received. The contributions sought from developers on the two applications on the City Council side is unclear but being researched at the time of writing.
- 3.5 The 'additional site' at the Infinity Garden Village at Lowes farm, has been identified as a site of future potential only and as such does not appear as an allocation in the Local Plan.
- 3.6 Outline planning permission for the residential development of the site at Stenson Road for up to 500 dwellings was granted at appeal subject to an agreement under Section 106 of the Town and Country Planning Act 1990, by the Secretary of State in January 2009 (9/2007/0020) following the conjoined Public Inquiry which considered a number of housing sites within the District. The outline permission was subsequently renewed on 4 January 2012 under application 9/2011/0484 and subject to a deed of variation that maintained the Section 106 obligations of the original outline consent. Following a planning application (9/2012/0555) in 2012 planning permission was renewed on the site in February 2013 subject to a continuation of the S106 agreement which continued to include (inter alia) a sum toward the provision of healthcare facilities as required, generated by the incoming population to the site.
- 3.7 In terms of Healthcare Contribution the agreement states:

- 1. The Healthcare Contribution shall be calculated by multiplying £512.56 by the number of dwellings*
- 2. The Owner covenants to pay the Healthcare Contribution to the District Council prior to the occupation of the 250th dwelling*

3. *The District Council covenants to apply the Healthcare Contribution for the purposes of improving primary healthcare provision within the vicinity of the site*
4. *The District Council also covenants with the owners to repay any unexpended monies paid pursuant to paragraph 2 of this schedule at the expiration of 5 years of the date of final payment (or such longer period as expressly agreed in writing with the owners) within 2 months of a written demand from the owner.*

3.8 Records show that the contribution was paid to the Council on 18th August 2015. Following receipt the usual procedure was followed which involves informing the NHS (by way of the Local Clinical Commissioning Group (CCG)) of the receipt of the contribution to confirm from which development the sum was raised, the extent of the sum (in this case £261,646.44) and which project it was intended for.

3.9 In this case the Commissioning Manager & CCG Estate Lead advised that the facility they had planned for extra primary care capacity would be for an ongoing project to create extra capacity at Hollybrook Surgery. The CCG now tells us that the funds are committed as planned. As such the CCG was paid the funds in July last year. Recent enquiries have revealed that the works to the centre are ongoing and expect to be completed by the end of March 2018. This expansion would not only add capacity to the Hollybrook facility but adds capacity for the practice which also operates a surgery at Sinfin. In other words the expansion of Hollybrook adds capacity across the area for which the practice is providing a service.

4.0 Financial Implications

4.1 None arising directly from this report other than the passing on of funds as described in accordance with the Section 106 agreement.

5.0 Corporate Implications

5.1 The Council must act in accordance with the provisions of the relevant legal agreement.

6.0 Community Implications

6.1 The funds levied are designed to ensure that the impact on primary care provision in the area as a result of the development is mitigated subject to the enabling provisions of the Community Infrastructure Levy regulations 2010. This is designed to ensure that sufficient capacity is available to deal with the needs of the incoming population generated by the development.

7.0 Background Papers

7.1 Request from Councillors Chahal and Shepherd.