

RESPONSE TO PLANNING APPLICATION REF: **HPK/2023/0192**

Proposed residential development of circa **99 dwellings**

Location: Land at Hoghaw, Fairfield, Buxton

Impact of new development on GP practice

The development is proposing 99 **(A)** dwellings which based on the average household size of 2.5 per dwelling and assuming 100% of the new population would come into this area for primary care health provision would result in an increased patient population of approx 247 **(B)** (2.5 x A).

The calculation below shows the likely impact of the new population in terms of number of additional consultations. This is based on the Dept. of Health calculation in HBN11-01: Facilities for Primary and Community Care Services.

Consulting room

Number of Dwellings	A	99	
Proposed population	B	247.5	
Access rate (per patient per year)		5.26	
Anticipated annual contacts		1302	
Assume 100% patient use of room		1302	
Assume surgery open 50 weeks per year		26	contacts per week
Appointment duration		15 mins	
Patient appointment time per week		6.5	hours

Treatment room

Anticipated annual contacts		1302	
Assume 20% patients use room		260	
Assume surgery open 50 weeks per year		5	contacts per week
Appointment duration		20 mins	
Patient appointment time per week		1.7	hours



GP practice most likely to be affected by growth and therefore directly related to the housing development	It is unlikely that NHS England or NHS Derby and Derbyshire CCG would support a single handed GP development as the solution to sustainably meet the needs of the housing development and that the health contribution would ideally be invested in enhancing capacity/infrastructure with existing local practices. The closest practices to this development are; • Elmwood Medical Centre • Stewart Medical Centre • Buxton Medical Centre																			
Necessary to make the development acceptable in planning terms	Buxton is a priority area in the ICB's primary care estates strategy. We would like to discuss the potential for S106 funding to be used to provide additional capacity at any practice in the vicinity of the development, which may be through the extension or internal reconfigurations at one of more existing site, or any new site developed within the timeframe of the S106 agreement.																			
Plans to address capacity issues	The amount requested is proportionate to the scale of the housing development proposed.																			
Fairly and reasonably related in scale and kind to the development.	The indicative size of the premises requirements has been calculated based on current typical sizes of new surgery projects factoring in a range of list sizes recognising economies of scale in larger practices. The cost per sq m has been identified by a quantity surveyor experienced in health care projects. This is the cost of providing additional accommodation for 247 (B) patients: <table border="1"> <tr> <td>(B) Additional patients to be accommodated</td><td>x</td><td>(D) Standard area m²/person Based on total list size of approx. 0.08 m²</td><td>x</td><td>(E) Cost of extension including fees £/m² £ 5,000*</td><td>=</td><td>Total cost (B) x (D) x (E) £99,000</td></tr> <tr> <td>247</td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>						(B) Additional patients to be accommodated	x	(D) Standard area m ² /person Based on total list size of approx. 0.08 m ²	x	(E) Cost of extension including fees £/m ² £ 5,000*	=	Total cost (B) x (D) x (E) £99,000	247						
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247																				
Financial contribution requested	£99,000																			

*Update 2024 in line with increase build costs.

Date of response:

23.05.25



Derby and Derbyshire
Integrated Care Board

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