

UPDATE: ALLOCATION OF S106 HEALTH FACILITIES CONTRIBUTIONS

Relevant Board Member(s)	Councillor Ray Puddifoot
Organisation	London Borough of Hillingdon
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Papers with report	Appendix 1

1. HEADLINE INFORMATION

Summary	This paper updates the Board of the progress being made in allocating and spending contributions towards the provision of healthcare facilities in the Borough.
Contribution to plans and strategies	Joint Health & Wellbeing Strategy
Financial Cost	None.
Relevant Policy Overview & Scrutiny Committee	Social Services, Housing and Public Health Residents' and Environmental Services External Services
Ward(s) affected	N/A

2. RECOMMENDATION

That the Board notes the progress being made towards the allocation and spend of s106 healthcare facilities contributions within the Borough.

3. UPDATE ON PROGRESS

1. Since the last report to the Health and Wellbeing Board in July 2014, the following progress has been made in moving identified schemes forward.

Approved GP expansion schemes

2. Four GP schemes were approved by the NHS panel in August 2013. These schemes are now largely completed and are as follows;
 - Improvements at King Edward Medical Centre, King Edwards Road, Ruislip – H/12/197B (£11,440) and H/9/184C (£8,560). - The scheme to provide an additional consulting room was satisfactorily completed in February 2014.

- Expansion of the GP practice at 1 Wallasey Crescent, Ickenham - H/19/231G (£193,305) - This scheme to extend the existing GP surgery to provide two GP consulting rooms and a clinical training room was completed in August 2013.
- Expansion of the GP practice at Southcote Clinic, Southcote Rise, Ruislip - H/15/205F (£184,653) – This scheme to extend the current practice premises to provide an additional GP consulting room, clinical training room and increased waiting area is due to be completed in September 2014.
- Additional clinical room at Pine Medical Centre, Fredora Avenue, Hayes – H/18/219C (£1,800). – This project involves the conversion of an existing meeting room into a GP consulting room. NHS Property Services (NHS PS) submitted a formal request to the Council in July, to allocate and release the s106 funds towards the scheme. A Cabinet Member report will therefore be submitted to the Leader and the Cabinet Member for Finance, Property and Business Services in September to formally release the funds.

Hesa Health Centre expansion

3. So far, a total of £264,818 from three s106 health contributions has been allocated and transferred towards this project. Work on site has been progressing well with the first phase (post office conversion) completed in June 2014. Phase 2 of the scheme is now on site and due for completion by the end of September 2014. The project has a total of five phases, with the scheme due to be fully completed and operational by end of January 2015.
4. So far a total of £264,818 from three s106 health contributions has been allocated and transferred towards this project. Work on site has been progressing well with the first phase (post office conversion) completed in June 2014. Phase 2 of the scheme is now on site and due for completion by the end of August 2014. The project has a total of five phases, with the scheme due to be fully completed and operational by December 2014.
5. NHS Property Services has confirmed that the overall budget for the HESA scheme is in excess of £1million and that they have already invested over and above the s106 allocation which has so far been released towards the scheme. They have therefore recently submitted a request to allocate and release a further £251,701 from seven health contributions currently held by the Council towards phases 2-5 of the scheme. If formally approved, this will take the total s106 allocation to £516,519.
6. A Cabinet Member report to request the formal allocation and release of further s106 contributions towards the scheme is currently being drafted and will be submitted to the Leader and the Cabinet Member for Finance, Property and Business Services for a formal decision in September.

Proposed new Yiewsley Health Centre (former Yiewsley Pool site)

7. Tenders for this scheme have been received and construction works are subject to a pre-let agreement with NHS England. A meeting was held in August between the Council and NHS PS to address any outstanding issues regarding the terms of the agreement. This was successful and the Council is now waiting to receive a signed agreement from NHS England before agreeing a timetable to proceed.

8. NHS PS has "earmarked" a total of £401,543 from s106 health contributions currently held by the Council towards the fitting out costs associated with the new health centre. Due to ongoing delays with the scheme, these funds are not likely to be needed until 2015/2016. This may be too late to spend one of the contributions held at H/8/186D (£15,549) which has a spend deadline in April 2015. Three contributions (totalling £70,672) with spend deadlines in 2014 have already been utilised by the Council towards the submission of the planning application for the site (Cabinet Member decision 03/03/2014). It may therefore be necessary, with the agreement of NHS Property Services, for the Council to also consider utilising this contribution towards the costs associated with building the health centre.

St Andrews Park

9. The Council has now received the healthcare contribution (£624,507.94) from the developer in accordance with Schedule 6 of the s106 agreement and the developer has therefore been released from their obligation to provide an on-site healthcare facility.
10. The Clinical Commissioning Group (CCG) is in the process of preparing a strategic case for the provision of a health hub in Uxbridge and would like to include the St Andrews Park development site as an option. The Council has received assurances from VSM that they are keen to work with the CCG to provide an onsite facility and the Council remains supportive of this proposal. The onus is, however, now on the CCG to continue to negotiate with VSM to see if a suitable site can be found and also advise the Council of how the financial contribution can best be spent to provide for the future healthcare need of the residents of the development.

Unallocated s106 health contributions

11. Appendix 1 attached to this report details all of the s106 health facilities contributions held by the Council as at 30th June 2014 (This excludes the contribution from St Andrews Park which was received in August and will be reported to Cabinet in December via the S106 Quarterly Monitoring Report). In consultation with NHS PS and the CCG, officers are continuing to explore options to ensure that these are spent to maximum effect to provide viable improvements for the benefit of local communities.

GP expansions in the north of the Borough

12. In line with the process that was agreed with the London wide Medical Committee (LMC) in August 2013, NHS Property Services are preparing to consult with GP practices in the north of the Borough in order to enable them to express an interest in spending unallocated contributions towards eligible expansion schemes. Due to recent organisational change within NHS Property Services, this process has been delayed and is now due to begin in early September.

Possible expansion of NHS "health checks" at Hillingdon pharmacies.

13. Local pharmacies have a key role in providing healthcare in the Borough and in recent years this role has been increasing in line with the demand for healthcare provision. Officers are therefore exploring the scope for using s106 healthcare contributions towards continuing to expand this role.

14. Most of the s106 funding currently held by the Council is earmarked by NHS Property Services towards the expansion/ improvement of GP Services in the Borough (see appendix 1) and as at the 1st August 2014, s106 has now been replaced by Hillingdon's Community Infrastructure Levy (CIL). There may, however, be some further contributions still to be received under existing S106 agreements, which depending on the terms of the individual agreement, might be able to be considered towards expanding the health services provided through pharmacies.
15. The Pharmaceutical Needs Assessment (PNA) for the Borough is currently being reviewed and is required to be in place by 1st April 2015. This will be used to highlight where the Borough's pharmaceutical needs are and the areas to be addressed.
16. One of the areas suggested for consideration is the possibility of further expanding the availability of NHS health checks at pharmacies in the Borough. NHS Health Check is a national prevention programme and is one of the five mandatory Public Health programmes that Local Authorities are required to deliver.
17. The programme aims to identify people at risk of developing heart disease, stroke, diabetes, kidney disease or vascular dementia. The health check is free and available to anyone between the ages of 40 and 74. The test includes checks on cholesterol levels, blood pressure and glucose levels as well as advice on healthy life styles. A print out of the results is given as part of the consultation and in some cases people can then be referred on to their GP if necessary.
18. Health checks are provided primarily through GP surgeries and some local pharmacies. Currently, 19 local pharmacies are contracted to provide an NHS Health Check service for local residents. These are generally in areas of deprivation. Extending the provision of this service to further local pharmacies in targeted areas of the borough where health needs are greatest, may help relieve the pressures on local GP services and increase access to the service outside of traditional GP hours. It is therefore proposed to explore this idea further in consultation with the CCG and NHS PS.

FINANCIAL IMPLICATIONS

As at 30 June 2014, there is £1,295,130 of Social Services, Health and Housing s106 contributions available of which £347,886 has been identified as a contribution for affordable housing and £49,602 towards a social services scheme. The remaining £897,642 is available to be utilised towards the provision of facilities for health. It is worth noting that £493,482 of the health contributions have no time limits attached to them.

The above figures do not include a subsequent contribution of £624,508 in respect of St Andrews Park which was received in August 2014 and will be reported to Cabinet in December via the quarterly S106 monitoring report.

The following tables set out the specific S106 contributions that are earmarked towards Hesa health centre expansion and Yiewsley health centre development.

Earmarked towards Phases 2-5 HESA Scheme (subject to formal allocation)

S106 Funding Reference	Development	Amount	Time Limit to Spend
H/16/210C	Fmr Hayes Stadium, Hayes	£105,044	March 2015
H/25/244C	505-509 Uxbridge Road, Hayes	£20,270	June 2018
H/26/249D	Fmr Glenister Hall, Hayes	£33,219	No time limit
H/29/267D	Fmr Ram PH, Dawley Road, Hayes	£6,069	No time limit
H/30/276G	Fmr Hayes FC, Church Road, Hayes	£68,698	July 2019
H/31/278D	6-12 Clayton Road, Hayes	£4,650	No time limit
H/38/303E	70 Wood End Green Road, Hayes	£13,751	No time limit
Total		£251,701	

Earmarked towards fitting out costs associated with Yiewsley Health Centre (subject to formal allocation)

S106 Funding Reference	Development	Amount	Time Limit to Spend
H/8/186D	92-105 High Street, Yiewsley	£15,549	April 2015
H/23/209K	Tesco, Trout Road, Yiewsley	£37,723	March 2016
H/32/284C	Fmr Honeywell site, Yiewsley	£5,280	No time limit
H/33/291C	Fmr Swan PH, West Drayton	£5,417	No time limit
H/42/242G	West Drayton Garden Village	£337,574	No time limit
Total		£401,543	

LEGAL IMPLICATIONS

Under the provisions of section 111 of the Local Government Act 1972, a local authority has the power to do anything which is calculated to facilitate, or is conducive or incidental to the discharge of any of its functions. The work to be carried out in accordance within this report would fall within the range of activities permitted by Section 111.

Regulation 122 (2) of the Community Infrastructure Levy Regulations 2010 states that a planning obligation may only constitute a reason for granting planning permission for the development if the obligation is:

1. necessary to make the development acceptable in planning terms;
2. directly related to the development; and
3. fairly and reasonably related in scale and kind to the development.

Circular 2005/05 goes further than Regulation 122 and suggests that a planning obligation must also be:

4. relevant to planning; and
5. reasonable in all other respects.

The monies must not be used for any other purpose other than the purposes provided in the relevant section 106 agreement. Where monies are not spent within the time limits prescribed in those agreements, such monies should be returned to the payee.

When the Council receives formal bids to release funds, each proposed scheme will need to be assessed and reported to the Leader and Cabinet Member for Finance, Property and Business

Services in order for the monies to be released. As part of that process, the Council's Legal Services will review the proposal and the section 106 agreement that secures the funding, to ensure that the Council is permitted to spend the section 106 monies on each proposed scheme. The content of the section 106 agreements in relation to King Edwards Medical Centre, Southcote Medical Centre, Wallasey Medical Centre, Pine Medical Centre referred to in this report have been assessed and approved in line with those procedures prior to release of the capital monies for the schemes.

The use of section 106 monies for future schemes mentioned in the report will need to be assessed against their respective agreements when these are finalised on a case by case basis.

BACKGROUND PAPERS

None.