

APPENDIX B

Report of the Lewes District Council Scrutiny Seaford Health Hub Panel

Date:	28 January 2020
Purpose of report:	A review of the proposal for Lewes District Council to develop the Downs Leisure Centre Site in Seaford to include a new health hub, retail and residential.
Panel Members:	Councillors Christine Robinson (Chair), Christine Brett (Vice-Chair), Roy Burman, Liz Boorman and Roy Clay.

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A Executive Summary and the Panel's Recommendation

1. The Panel's recommendation is for the Council not to progress the proposed development on the Downs Site of a health hub, unless and until all the following conditions have been satisfied:
 - a) It is established within a reasonable timescale (i.e. 12 months) by the NHS that there is no practical prospect of new GP premises being provided in Seaford through the redevelopment of the Seaford Medical Practice's existing Dane Road site together with the Richmond Road car park. For this purpose the Cabinet should be satisfied that the NHS has diligently carried out a full analysis of the viability of this option which should include all necessary surveys.
 - b) A revised design for the Downs Site is finalised, which excludes the residential and retail elements and relocates the new health hub building to the east of the existing leisure building.
 - c) The financial model for the revised design specified at point b) above must clearly demonstrate that the Council will make a suitable financial return commensurate with the risks involved, and that the required investment will not prevent the Council from investing in higher priority capital projects to the benefit of the whole of the District, due to the impact of that investment on the Council's borrowing limits.
2. The Panel is making this recommendation after following the Panel's remit (attached to this report as Appendix 2), carefully listening to and reviewing and balancing the evidence and representations which are summarised in Appendix 4, and reaching the conclusions set out in Part C below. In coming to its conclusions, the Panel considered the key issues identified in this report giving them the weight that the Panel considered fit and balancing the advantages and disadvantages of each of them.
3. Although the Panel reached a unanimous view on the substance of the recommendation to be made, a minority on the Panel would have preferred the recommendation to have been presented as a positive recommendation to proceed subject to qualifications.

B Background and History

The Downs Leisure Site and its History

The Downs Leisure Site is owned freehold by the Council. The extent of the site is shown edged red on the plan at **Appendix 1**. It currently includes the existing leisure centre, residential flats, accommodation used by the 60+ Club, recreation facilities and open green space. Prior to its acquisition in 1965 by the Council's predecessor, the site was used as a school.

The Proposed Scheme

Seaford is currently served by two GP practices located in the town centre. These are Seaford Medical Centre and Seaford Old School Surgery.

Over the last few years, the GP practices have been seeking new purpose built premises. A scheme had been agreed between the GPs and the NHS in 2009 but this was abandoned because of the global financial crisis.

Subsequent discussions with NHS bodies were ultimately unproductive and the GPs' consultant then approached the Council's Regeneration Team in 2017 to see if there were any available/suitable sites in its ownership. This was then referred to the Council's Property Team which was already undertaking a wider review of the Council's land and buildings as part of the Council's Asset Challenge initiative which aims to ensure that Council assets are financially sustainable in the longer term. The Downs Site had been identified under this review as a potential site for investment/additional uses (e.g. housing). This led to further discussions between the GPs and the Council.

These discussions resulted in proposals for a new development on the Downs Leisure Site to include a health hub, retail, residential flats and improvements to the existing leisure centre. The business plan prepared for the proposed development involves the Council paying the capital costs of the development and borrowing the capital funds required for the investment over a 40 year period.

The proposal in respect of the health hub is for the GPs to take a full repairing and insuring lease for a term of 25 years paying a market rent anticipated to be at least sufficient to service this debt during those 25 years.

The Council is not under any duty to provide primary healthcare facilities but it has the powers to do so.

The Panel's Remit

The Panel has been given a remit by the Scrutiny Committee to consider the advantages and disadvantages of the proposed development on the Downs Site at Sutton Road, Seaford to provide a health hub and other leisure, retail and residential facilities and to provide a recommendation to Cabinet as to whether or not the project should be progressed.

A copy of the agreed remit is attached to this report as **Appendix 2**.

Set out at **Appendix 3** is a list of all the stakeholders and advisors from whom the Panel received representations and evidence, together with a list of other documents taken into consideration.

Appendix 5 contains for ease of reference copies of two documents the detail of which is referred to in this report.

Appendix 4 and Exempt Appendix 6 each contain a summary of the evidence and representations reviewed by the Panel. These are summaries and are not intended to be comprehensive. Repetition of points made by more than one contributor has been avoided.

C Issues Considered

1. Assessment of health, well-being and community implications of the proposal

The Panel considered the evidence and representations summarised at **Appendix 4 (1)** and concluded as follows:

1. There is a widely recognised need for better healthcare provision in Seaford.
2. The current provision of healthcare services is limited because of lack of space and this is likely to become more problematic as the population of Seaford expands.
3. Purpose built premises could enable additional services which could result in shorter waiting times for patients.
4. The Panel notes that the lease for the existing premises for the Old School Surgery expires in May 2022. If there is no extension to the lease and an alternative premises in Seaford cannot be found, there is a risk that some primary care services may need to be provided outside of Seaford and some patients may need to be reallocated by the CCG to other surgeries outside of Seaford.
5. The new development would enable the practices to provide additional services to those currently provided including: (a) a travel clinic, (b) a non-dispensing pharmacist enabling someone other than GPs to offer a specialist service, (c) space for a mobile MRI scanner, and (d) outreach mental health clinics.
6. The CCG has confirmed that if the services are moved to the proposed new development on the Downs Site it will guarantee the supply of funding for additional services.
7. The proposed new development will be required to be built to standards of sustainability assessed as excellent using the Building Research Establishment Environmental Assessment Method (BREEAM). It will therefore have high sustainability credentials and so, in this respect, will be a benefit to the community.
8. The Panel considers that 'fit for purpose' premises for the two GP practices would be beneficial for staff retention and recruitment and should make their services more robust, but this was not necessarily linked directly to a development on the Downs Site.
9. The development should enable enhanced working between East Sussex Healthcare NHS Trust and both GP practices.
10. The Panel notes that the GP practices are committed to providing longer access hours (8am to 8pm Monday-Friday and some Saturday/Sunday cover) if the development proceeds.
11. The Panel notes that the GPs have provided additional space at their existing surgeries where possible, for example through the use of porta cabins. However, this has been limited. The GP Practices have made funding bids to other NHS bodies with a view to substantially improving the physical facilities at each surgery, which largely have been unsuccessful.
12. The development will enable greater and more effective integration of healthcare services with the wellbeing services currently provided by Wave Leisure at the existing Downs Leisure Centre. These will focus on preventative care and reduce demand on medical services. Evidence has been provided of the current benefits of such integration including the provision of fall prevention

classes by Wave Leisure and a statement from East Sussex Healthcare NHS Trust (ESHT) that it would not have met its targets without Wave Leisure's support.

The Panel balanced the possible benefits of the proposed development mentioned above with the following points:

1. The resulting loss of recreation space may in itself damage the health and wellbeing of the residents of Seaford. It is for this reason that the Panel is not recommending that the retail and residential elements of the scheme are progressed. This should reduce the loss of open space but the Panel recognises that there will still be a loss.
2. Other than in respect of point 12 above, similar benefits could be obtained from a similar size development elsewhere in Seaford which might result in no or a reduced loss of open space. It is recognised that there is potentially only one possible alternative site which is the existing Dane Road Site when combined with Richmond Road car park, and this is reflected in the Panel's overall recommendations.
3. Increased use of telecommunications in healthcare services is reducing the importance of the physical location of GP services and patients.
4. Some of the benefits mentioned above might be made available at the existing practice premises e.g. through extended hours.
5. Representations were made that the co-location of health and leisure facilities would have some adverse consequences as the noise from the leisure facilities was not conducive to patient care.

The Panel also considered the following points:

1. There is significant demand for new housing in Seaford. However the cost of developing housing on the Downs Site was relatively high and the site was not identified in the Local Plan as an area for housing development. It was therefore considered that the proposed residential element of the development was not an essential part of the scheme and its removal would provide some mitigation of the loss of green space.
2. The proposed development will involve the loss of the current premises used by the over 60's Club. However, the proposed development will provide the Club with alternative accommodation and the scheme is generally supported by the Club.
3. The inclusion of retail in the proposed development does not meet any obvious need in the community and had met with concerns from local residents. For those reasons and in order to further mitigate the loss of open space, the Panel is recommending that the retail element of the proposed development is not progressed.

2. Impact of movement of GPs from the Town Centre to the Downs Site

2.1 Economic impact on the Town Centre (including reduced footfall from staff and patients, possible alternative uses of current surgery premises, impact on pharmacy services)

The Panel considered the evidence and representations summarised at **Appendix 4 (2)** and concluded as follows:

1. It is reasonable to anticipate some level of reduced footfall in the town centre resulting from the relocation to the Downs Site.
2. No surveys had been carried out to assess any such impact and it was considered that it was unlikely that any survey carried out now would reveal the true picture. It was likely that there would be some adverse impact on town centre businesses but it was not possible to assess the scale of this.
3. A large percentage of GP repeat prescriptions from the two surgeries are prescribed electronically to the usual pharmacy which should limit the impact on footfall and on the revenue of the town centre pharmacists.
4. The Panel recommends that any new pharmacy in the development should be a satellite of an existing town centre pharmacy which would limit the impact on the revenue of town centre pharmacies.
5. In the event that the Seaford Medical Practice moves from its existing building and it consequently becomes surplus to NHS requirements, in order to mitigate any adverse effects on business in the town centre, the Panel recommends that efforts are made to ensure that the building is let to local start-up businesses or for other community uses. This could include the Council exploring the potential for purchasing the site for these purposes, should the opportunity arise.

2.2 Proximity to the existing Downs Leisure Centre

The Panel considered the evidence and representations summarised at **Appendix 4(2)** and concluded as follows:

1. The co-location of healthcare and wellbeing/leisure services resulting from the proposed development would enable a holistic approach to supporting the health and wellbeing of the people of Seaford.
2. The issue of noise from the leisure centre disturbing the provision of healthcare services was not considered to be strongly supported as there had been very few complaints about noise from the leisure centre. In addition, the Panel notes, as a result of discussions with Council Officers, that a potential new design could look to mitigate noise transfer. The Panel therefore recommends that proper regard is had to avoiding noise disturbance in the design phase should the scheme proceed.

2.3 Impact on patient journeys

The Panel considered the evidence and representations summarised at **Appendix 4(2)** and concluded as follows:

1. The GPs provided the Panel with heat maps showing the walking times of patients for the existing premises and the proposed development. However, it was hard to draw any firm conclusions from these maps. They appeared to indicate that the relocation would result in less short and long journeys and more medium length journeys. However, no account was taken of people not travelling on foot.
2. The Panel has been advised that bus routes could possibly be reviewed/changed but further engagement with bus companies would not take place until the pre-application planning stages of the development.

2.4 Traffic impact

The Panel considered the evidence and representations summarised at

Appendix 4(2) and concluded as follows:

1. The Panel considered that it could not come to a properly informed view on the impact of the development on local traffic. This would need to be the subject of a proper traffic impact assessment which it was understood would be carried out at the pre-application planning stage and the Panel is assuming that proper regard would be had to the results of any such assessment.
2. The Panel recommends that (if the scheme proceeds), the strongest possible case is made to those responsible for the provision of bus services to ensure that the Downs Site is properly served.
3. The Panel recommends that no new vehicular access/egress to Sutton Road is included in any development proposals for the Downs Site.

3. Impact on green space, public recreation (including free and paid for facilities) and wildlife habitat

The Panel considered the evidence and representations summarised at **Appendix 4(3)** and concluded as follows:

1. There is already a deficit of green space in the area.
2. The original proposal for the development would have resulted in the loss of green space. However, during the course of this review, Council Officers have put forward a further design option which would move the health hub element to the east of the site. The Panel's view is that this design should also exclude the retail and residential elements. The combined effect would be to reduce the total amount of green space lost. The garden would not be retained, but many trees will be. In addition, the petanque rink would need to be removed but could be relocated elsewhere.
3. A desktop survey of the site shows no notable habitats/species and no invasive/ non-native species. Bat surveys would need to be completed if the development is progressed and it is assumed that due regard would be had to the results of these.

4. Appraisal of availability and viability of other sites

The Panel considered the evidence and representations summarised at **Appendix 4(4)** and concluded as follows:

1. The Panel noted the report prepared by Charlie Grimble who is an advisor to the Seaford Neighbourhood Plan Group, which looked for viable alternatives to the Downs Site for the provision of new primary healthcare facilities in Seaford. Although the search was extensive, his view was that there was only one viable alternative site, which was on part of the Salts Recreation Ground. The report concluded that this site would be complex and involve expensive foundation works. It was also in a flood risk area (flood zone 3) which would be likely to involve additional expense and planning complications.
2. The Panel noted advice from Council Officers that a healthcare building could not be built in Flood Zone 3 (i.e. at the Salts Recreation Ground) unless there is no other alternative site. Given that the alternative of the Downs Site was available, the Salts Recreation Site would be ruled out by the sequential test required for development in Flood Zone 3.
3. The Panel noted that the Charlie Grimble report had looked at the option of

redevelopment of the existing Dane road site (but had not considered it being combined with Richmond Road car park). This option was dismissed by the report as it would likely require the GPs to decant and would involve unpredictable and possibly unaffordable foundation works.

4. The Panel noted that although the Vail Williams LLP Report ("Seaford Health Hub Dane Road and Alternative Site Appraisal" dated October 2019) indicated that there would be significant constraints to the redevelopment of the existing Dane Road Site and the adjoining Richmond Road Car Park, this alternative was not dismissed. Vail Williams LLP stated that the assessment of the viability of this site would require further design work.
5. The Panel considers viability work and all relevant surveys (including relevant geophysical surveys) should be carried out on the Dane Road and Richmond Car Park site. It is understood that the CCG has allocated a budget of £60,000 for the capital costs of any new development for the GP surgeries. The Panel would expect the NHS to pay for the costs of the surveys, whether from this budget or otherwise.

5 Financial viability of the Downs Site development

The Panel considered the evidence and representations summarised at **Appendix 4(5)** and concluded as follows:

1. The Panel was not provided with sufficient information to clearly demonstrate that the scheme would be financially viable. From what has been indicated by FMG Consulting Limited (FMG), consultants retained by the Council, it would appear that the residential elements may not be financially viable whilst the health hub could be. There was too little information available to FMG to allow them to comment on the viability of the leisure element at this stage.
2. The Panel's recommendation, in any event, is not to proceed unless the scheme can be clearly shown to be financially viable and make a suitable financial return, commensurate with the risks involved.
3. The Panel considers that a decision to invest in the Downs Site should have regard to any impact on the Council's borrowing limits, so as not to prevent the Council investing in higher priority capital projects which could benefit the whole of the District and which would be in line with the Council's Corporate Plan and priorities.
4. The Panel considered the form of tenure for the GPs within the proposals and the business plan for the Downs Site. The Panel came to the conclusion that the proposed 25 year lease to the GPs would be acceptable given the covenant strength of the GPs (backed by the NHS) and the likelihood that the lease would be renewed after 25 years given the ongoing need for healthcare services.

6 Consequences of not proceeding

The Panel considered the evidence and representations summarised at **Appendix 4(6)** and concluded as follows:

1. The Panel considered that the consequences of not proceeding with the Downs site development would be:
 - a. The loss of some potential health and wellbeing improvements from the provision of a combined health and leisure facility;

- b. The risk that there could be no alternative site available for 'fit for purpose facilities' for primary care services in Seaford; and
- c. The loss of costs incurred to date in respect of the proposed site.

7. Additional considerations and conclusions

7.1 The Council's role in the provision of the services

The Panel considered what the Council's role was in the provision of primary healthcare services. It came to the conclusion that the Council is not under any obligation to provide the new facilities but to do so would be consistent with its general aims of promoting good health and social wellbeing in the community, but this must be balanced against the considerations set out above.

7.2 Strength of public feeling

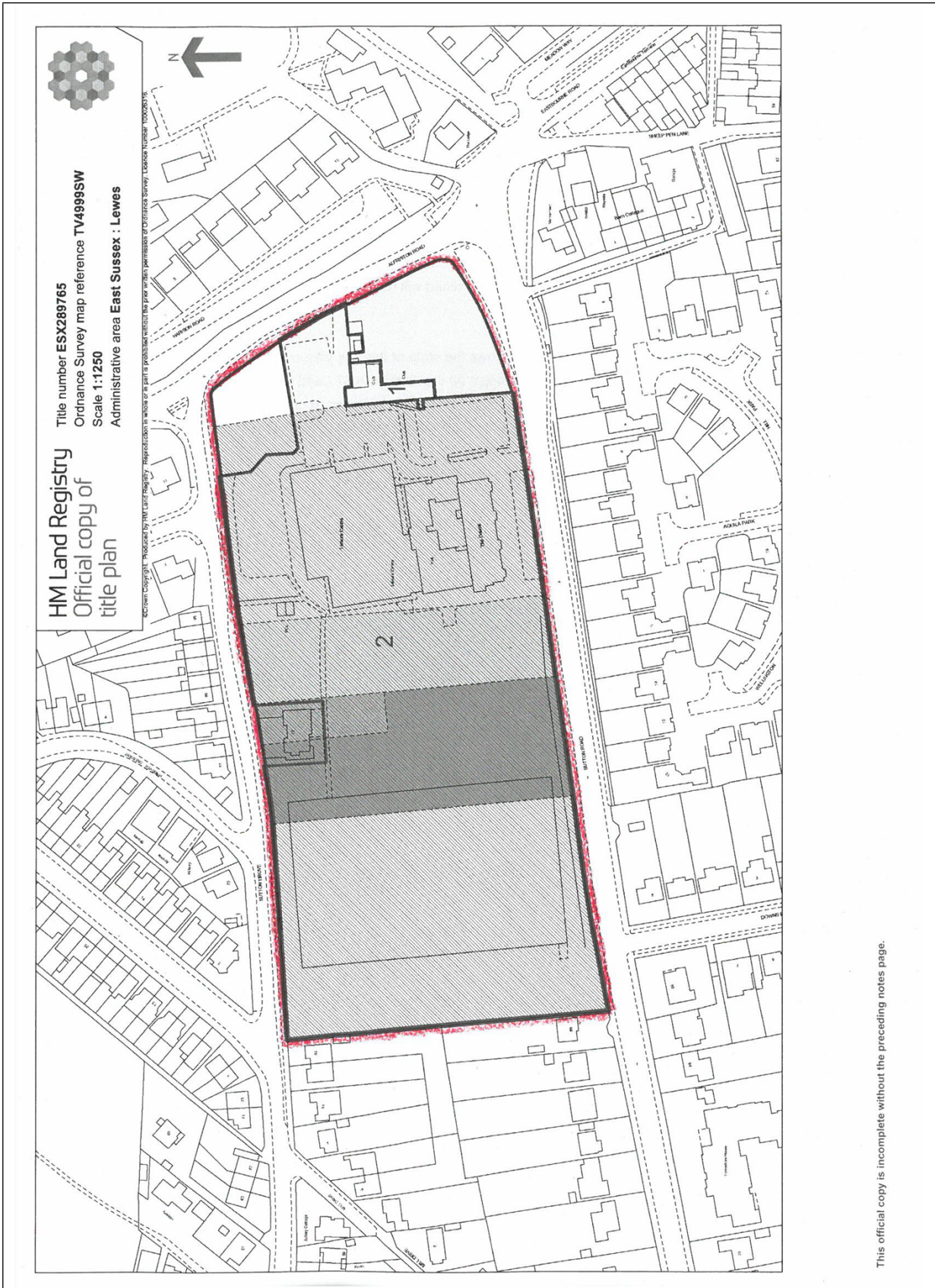
The Panel recognises the strength of public feeling in relation to the provision of primary healthcare services and the potential Downs Site, as demonstrated by the number of signatories to the petition, and the range of contributors to this review, and has sought to balance all the views expressed to it in its conclusions.

7.3 Panel's thanks

The Panel is grateful for the wide range of representations and views provided to it during the course of this review, and extends its thanks to all those who have attended to give evidence personally or by letter or email and have supported it in its work.

Appendix 1

Plan showing the location and extent of the Downs Site



This official copy is incomplete without the preceding notes page.

Appendix 2**Scrutiny Seaford Health Hub Panel Remit**

1. To consider the advantages and disadvantages of the proposed redevelopment of the Downs leisure centre site at Sutton Road Seaford to provide a health hub, having regard to the needs and views of those supporting and those opposing the proposal.
2. To formulate a recommendation(s) to Cabinet as to whether or not the project should be progressed.

The Panel's consideration will include, but not be limited to, the following issues:

- (i) Those matters identified by the Scrutiny Committee at its meeting on 27 June 2019, namely:
 - The impact on the movement of GPs and the Council's role in provision of the services.
 - Demonstrating that other sites have been considered for viability
 - The impact on green spaces in Seaford
 - The impact on the wider economy in Seaford
 - The form of tenure within the proposals and the business plan
 - The financial viability of the scheme from the Council's perspective
 - The consequences of not proceeding with the project.
- (ii) Those matters contained in a petition opposing the proposed redevelopment at Sutton Road which was presented to the Council at its meeting on 15 July 2019, namely:
 - The relocation of two NHS doctors' surgeries away from the town centre without promise of additional medical services
 - The loss of a public recreation ground and wildlife habitat
 - Increased traffic, pollution and accident risk
 - Reduced footfall within the town centre and likely impact on the town centre

Appendix 3

Stakeholder and Document List

The Panel has received and considered evidence and representations in person or in writing from the following stakeholders and advisers:

Stakeholders and Advisors:

- Seaford Medical Centre
- Seaford Old School Surgery
- Wave Leisure Trust Limited
- Downs Development Neighbourhood Voice
- Seaford 60s Plus Club Steering Group
- Seaford Chamber of Commerce
- Seaford Town Councillors Dr Alan Latham, James Meeks and Mark Brown.
- County Councillor Carolyn Lambert
- Seaford Neighbourhood Plan Steering Group (Keith Blackburn - Chairman of the Group and Charlie Grimble consultant to the Group)
- Local residents and businesses in Seaford - Including Mr Bob Downing, Richard West, Clive Livingstone, Kieran Perkins, Dr Maggie Wearmouth, Wynford Seaford Fencing, and 3 other residents (name and address supplied).
- East Sussex Healthcare NHS Trust
- The Eastbourne, Hailsham and Seaford Clinical Commissioning Group
- NHS Property Services Limited
- Lewes District Council Officers
- Lewes District Council Consultants (Vail Williams LLP and FMG Consulting)

Documents:

In addition to the above, the Panel has reviewed the following documents:

Lewes District Council - Minutes:

- Minute 6 and 9 of Lewes District Council Scrutiny Committee – 27 June 2019
- Cabinet Report and Minute – 17 September 2018 'Regeneration and Development: Sutton Road, Seaford'.
- Minute of Full Council (Discussion of petition) – 24 September 2019.
- Exempt Cabinet Reports 'Asset development - Seaford, Sutton Road' – 3 January 2019 and 18 November 2018 (Exempt - financial and business information and legal privilege).

From Downs Development Neighbourhood Voice (DDNV):

- Petition presented to Full Council on 15th July 2019: 'Stop the development on the Downs Leisure Centre Site. Save our Recreation Grounds, keep Doctors in Seaford Town' (Petition Statement and Online Petition: <https://you.38degrees.org.uk/petitions/keep-the-doctors-in-town-save-our-recreation-ground>). As at 15 July 2019, the petition contained 2,620 signatures (1,876 hard copy signatures and 764 online). When the latest signature list was

provided to the Council on 14 January 2020, the petition contained 4,588 signatures (3,387 hardcopy and 1,191 online).

- Downs Development Neighbourhood Voice presentation to Scrutiny Committee – 10 September 2019.

From GPs / East Sussex Healthcare NHS Trust / CCG / NHS Property Services:

- Notes from GPs for the Scrutiny Committee on 6 September 2019 (attached at Appendix 5)
- Letter from the CCG regarding funding commitment (attached at Appendix 5)
- Letter from the CCG regarding future governance arrangements
- Outcome of vote on constitution for proposed new NHS East Sussex CCG
- CQC reports:
<https://www.cqc.org.uk/location/1-547762353?referer=widget3>
<https://www.cqc.org.uk/location/1-549775689>
- Heat maps (showing journey times) for existing surgeries and the Downs Site.
- Repeat prescription data from GPs

Impact Seaford

- Minute action from Impact Seaford Meeting – 23 September 2019 (requested economic impact study)

From Seaford Town Council

- Seaford Town Council Health Hub Working Party Interim Report 17 October 2019 (later withdrawn by Seaford Town Council).

Seaford Neighbourhood Planning Steering Group

- Document - Report on the viability of alternative sites for a Seaford Health Hub by Charlie Grimble (Advisor to the Seaford Neighbourhood Planning Steering Group)

Lewes District Council Officer and Consultant Reports.

- Scrutiny Seaford Health Hub Panel Report dated 22nd August 2019;
- Seaford Health Hub Survey Responses;
- Seaford Health Hub Draft Proposals;
- Seaford Neighbourhood Plan – Planning Policy Response
- Salts Recreation Ground – Planning Policy briefing
- Impact of proposals on the Town Centre – Head of Regeneration Briefing
- Seaford Hub Chronology
- Vail Williams LLP, Consultant –Seaford Health Hub Dane Road and Alternative Site Appraisal (Exempt - business and financial information)
- FMG Consultant – Presentations on Hub Design, Business Case and Financial Viability (Exempt - business and financial information)
- Downs Leisure Centre/Salts Recreation Ground confidential lease details (Exempt - business and financial information)

Any documents which are not attached as Appendices will be available as background papers on request. This excludes any documents already published or which are Exempt from Publication/ provided in confidence.

Appendix 4 (1)

Summary of Evidence and Representations reviewed

1. Assessment of health/well-being/community implications of the proposal

1.1 Health

(a) Evidence:

(i) Evidence from the GPs / CCG / East Sussex Healthcare Trust

- 1) Old School Surgery lease term expires 15 May 2022 but it has statutory security of tenure.
- 2) Old School Surgery patient list size (including East Dean and Alfriston) is 10,000 (which is x 4 the list size originally anticipated for the building).
- 3) Seaford Medical Practice – average 2-3 week wait to see patients (although there is no independent verification of this).
- 4) Neither surgery has physical room to expand. Old School Surgery is operating out of porta cabins in the car park.
- 5) Old School Surgery has terminated its travel clinic service but this could be reinstated from the Downs Site.
- 6) There are 21 GPs across both Old School (7) and Seaford Medical Centre (14)
- 7) Care Quality Commission (CQC) assessments: Old School Surgery “needs improvement”. Seaford Medical Centre has been classified as “Good” (CQC assessments focus on the medical services offered and not on the state of the premises).
- 8) Combined new practice requires 3,000 sq. metres.
- 9) Proposed new GP services are as set out at **Appendix 5**.
- 10) Funding guarantee of existing and new GP services from the CCG is as set out at **Appendix 5**.
- 11) CCG Funding offers do not cover equipment costs. GPs confirmed they will fund this cost.
- 12) There are no plans for any redundancies (medical or administrative).
- 13) CCG merger planned for April 2020 but a Seaford locality is to be retained. Costs of merger will not be charged to or impact on medical services.
- 14) The Health Hub building will need to be BREEAM “Excellent”. This is a requirement of the CCG. It will therefore have high sustainability credentials, and so, in this respect, a benefit to the community.
- 15) Patient numbers are increasing and demographics changing resulting in greater demand for primary care services.
- 16) Integration of health, social and community services is national policy.
- 17) The development will enable the establishment of an effective Primary Care Network (PCN) in Seaford.
- 18) Co-location of the two practices will enable the PCN to work to maximum effect.
- 19) Existing premises are insufficient for current needs.
- 20) A number of attempts have been made by the GPs to increase the clinical space at the Seaford Medical Practice between 2009 and 2016, but the requests were not agreed by NHS England or NHS Property Services or

could not proceed [details provided in confidence to the Panel].

- 21) New premises would enable integrated working with East Sussex Healthcare NHS Trust (ESHT) and other health and social care teams.
- 22) New premises would enable an integrated approach to the promotion of good health and wellbeing.

(ii) Evidence from Keith Blackburn (Chair of the Seaford Town Neighbourhood Plan Group)

- 1) During the production of the Seaford Neighbourhood Plan the importance of GP services had been highlighted.
- 2) The policy relating to the Downs Leisure Centre as a site for healthcare development had been omitted from of the Seaford Neighbourhood Plan.

(iii) Officer evidence:

- 1) There is no commitment to provision of additional East Sussex Healthcare NHS Trust services.
- 2) The design and siting of the Health Hub is being developed and revised following consultation, but is yet to be finalised.
- 3) The design now includes proposed 238 parking spaces (net increase of 121) and 50 public bike parking hoops (existing parking at Seaford Medical Practice is 37 for staff and 18 for patients; Old School Surgery – none designated).
- 4) 5 design meetings were held with end users of the scheme, and a new preferred ‘H’ shaped scheme has been identified, but is yet to be finalised.
- 5) 4 options of site layout were considered and option 4 chosen with the health hub located to the east of the site.
- 6) The design is for a three-storey building with 3100 sq. m to accommodate GPs and other primary care services.
- 7) The design includes space for a dispensing pharmacy.

(iv) Vail Williams LLP (Building Consultant):

- 1) Report commissioned by Lewes District Council to look at Dane Road, Richmond Road car park and other options.
- 2) Considered the Dane Road (and/or Richmond Road car park) will require demolition and temporary decanting of GPs.
- 3) At present the Dane Road site is well located to function as a medical practice, but is understood to be at, or above, capacity. A deficiency in provision of primary care services is anticipated to increase with population numbers, and consequently patient numbers, increasing over the plan period. This is highlighted in the Neighbourhood Plan (Submission Version 2017) which identifies that any increase in population will require new or expanded health facilities. Accordingly, the draft Neighbourhood Plan (Policy SEA10) strongly supports new or expanded health facilities, including the proposal for the Downs Site health facility.

(v) NHS Property Services:

- 1) If Dane Road vacated and surplus to requirements, the Council could have option to acquire at market price.

(b) Representations

(i) Representations from the GPs / CCG / ESHT

- 1) Rooms being used are inappropriate for clinical use. Cannot expand medical team. Recruitment and retention difficult – particularly for Old School Surgery. Service providers are offering additional services but being turned away by surgeries because of lack of space. Lack of space currently means surgeries do not have the facility for a mobile MRI scanner that would be beneficial.
- 2) Surgeries are looking to future-proof and so have premises which can provide modern treatments to meet demand for next 20 years +.
- 3) Health hub proposal will allow for offer of additional access 8am – 8pm opening Mon-Fri, and some Sat/Sun cover.
- 4) The health hub proposal would allow for on-site non-dispensing pharmacist so enabling someone other than GPs to offer specialist service.
- 5) A dispensing pharmacy is also proposed (GPs say this will be a satellite of an existing town pharmacy as a result of licensing issues).
- 6) The health hub proposal will promote efficiencies e.g. shared reception and back office.
- 7) The health hub proposal would allow provision of outreach mental health clinics, enhanced digital services and re-opened travel clinic service (although this has not been confirmed).
- 8) If the health hub proposal does not proceed the GPs have said that they do not have a Plan B. They would need to speak to the CCG about possible reallocation of the patient list. Most likely outcome is that some patients would be reallocated to Newhaven or possibly Eastbourne.
- 9) Fit for purpose premises are key to the success of the Primary Care Network (PCN).
- 10) New premises would help with recruitment and retention of staff.

(ii) Representations from NHS Property Services

- 1) The Dane Road site is not viable for the GPs' proposals.

(iii) Representations from resident (RWF Downing)

- 1) There is no imperative for the Council to subsidise the GP Practices.
- 2) It is not and should not be the local authority's role to resolve this issue for the NHS/CCG who should themselves have made provision for adequate healthcare facilities. Similarly the two GP Practices, as private sector businesses, are responsible for securing their own accommodation.
- 3) Seaford has some 28,000 registered patients and population is growing.
- 4) Detailed architect plans for a new centre on Dane Road / Richmond Road car park have previously been drawn up. Scheme failed because of failure of NHS Property Services and the GP practices to provide the necessary finance, including the refusal of the GP Practices to take out mortgages.
- 5) Dane Road and Old School surgeries failed to apply for potential NHS funding without explanation.
- 6) No one can guarantee that the 2 GP Practices will remain viable, in which case the Council may end up having to pay off its own development debt.
- 7) If the hub is designed to meet the needs of the GPs and ESHT it will be

- unsuited to occupancy at a later date by any other organisation.
- 8) Seaford is being emotionally threatened with a suggestion that if the health hub does not proceed both GP practices will leave Seaford and set up elsewhere (probably Newhaven) or that healthcare staff will simply leave, leaving Seaford with no healthcare provision.
 - 9) NHS Property Services has the function of providing the NHS with buildings from which to deliver healthcare. It is failing in its duty. It is not the local authority's job to usurp or offer to assume the NHS's duties.
 - 10) There is no need for a health "hub" as such. It would make sense to re-site the 2 practices in separate premises so as to be easier to reach for scattered residents.

(iv) Representations from resident (Richard West)

The health hub proposal is to be welcomed as the existing Old School Surgery premises is sub-standard and cramped. Integration with Wave is forward-looking and will improve health. Good working conditions will assist GP recruitment. Opportunity to provide secondary care, community and special care services on a single site is an exciting potential benefit. Will assist co-ordinated and joined up care.

(v) Representations from resident (Clive Livingstone)

- 1) Current facilities are inadequate.
- 2) The new proposal will offer more services and relieve Accident and Emergency (A&E) and other services currently undertaken by Eastbourne Hospital.

(vi) Representations from resident (Dr Maggie Wearmouth)

- 1) Seaford, as largest town in district deserves better health provision.
- 2) Moves to enhance staff recruitment and retention are to be welcomed, as is integrated working with social care professionals and organisations, and encouragement of individuals to take personal responsibility for their health.
- 3) Additional resources such as physiotherapists, paramedics, pharmacists are financial inducements offered to surgeries, regardless of location or premises so it is not accurate to say that the health hub will be responsible for providing these.
- 4) Additional services which the health hub is said to provide are future potential services dependent on increased patient numbers.
- 5) If the health hub does not progress, CCG has a statutory duty to arrange alternative service provision if that is needed.
- 6) Extended hours services are already available in Seaford.
- 7) Technology is becoming more important than physical location of either patients or health professionals.

(vii) Representations from the Petition to Stop the Development on the Downs Site.

- 1) No promise of additional medical services.
- 2) Will damage health by removing recreation space.

1.2 **Well-being**

(a) **Evidence**

(i) **Evidence from CEO Wave Leisure**

- 1) Three Wave employees to be trained to support recovering cancer patients into activity.
- 2) Wave's work with ESH NHS Trust has been recognised nationally. Wave seen as leaders in field and invited to speak at major NHS conferences / exhibitions.
- 3) ESH NHS Trust confirms it would not meet its targets if it did not work with Wave.
- 4) Fall prevention classes a successful example of WAVE / NHS collaboration.
- 5) Wave's Impact Report presented as evidence of Wave's commitment / performance re "Healthcare Under One Roof."
- 6) Most activity services are provided at a small charge, rather than being free at the point of delivery.
- 7) The proposed development proposal will give Wave an extension to existing gym and a small studio.
- 8) See also Exempt Appendix 6.

(b) **Representations**

(i) **Representations from CEO Wave Leisure**

- 1) Co-location with Wave benefits well-being and health, enables preventative health care options and will reduce demand on pure medical services.
- 2) "Healthcare Under One Roof" vision.
- 3) Fall prevention and other similar services could be handled by Wave without reference to GPs.
- 4) The proposal to extend existing gym and provide small studio are subsidiary to perceived co-location benefits.

(ii) **Representations from DDNV:**

There are disbenefits in co-location of health facilities and leisure facilities because associated noise not conducive to patient care.

(iii) **Representations from the Petition to Stop the Development on the Downs Site:**

Building will be on well-used playing ground.

1.3 **Community**

(a) **Evidence**

(i) **Evidence from Officers**

- 1) Housing figures (correct when provided): 1,200 individuals on Council's waiting list. There are 200 lets per annum in the District. There are 83 households currently in temporary accommodation.

- 2) The residential element is not an essential part of the scheme. The removal of housing will provide some mitigation to the loss of green space.
- 3) Development of Richmond Road car park could lose 65 public car parking spaces in town centre.
- 4) The Downs Site is not allocated within the Local Plan.

(ii) Evidence from Wave Leisure

Wave Leisure will provide lunches to the 60+ club at existing prices.

(b) Representations

(i) Representations from Russell Gilbert (chair of the 60+ club)

- 1) Courtyard in new development could be used as additional space and kitchen for the 60+ club.
- 2) Art activities could be relocated in Wave building.

(ii) Representations from resident (Name and Address supplied)

A detrimental impact on footfall will affect vibrancy of community and lead to isolation in town centre where there are many older persons, who currently feel safe walking around town.

(iii) Representations from DDNV

- 1) Wave's track record in not responding to complaints about noise indicated a lack of concern for vulnerable and elderly patients visiting the proposed health hub which would damage any benefits of integrated care.
- 2) The 3G/4G pitch would provide all year round use but not space for dog walking and an alternative grass pitch should be considered.
- 3) No plan to make the building net carbon zero.
- 4) Downs originally appraised as an existing recreation ground and unsuitable for development (Local Plan).

(iv) Representations from resident (RWF Downing)

- 1) Loss of old barn to be regretted as it is only visible remains of Old Sutton settlement.
- 2) The 60+ club is a valuable community asset in operation at the barn since 1965. It also contributes to Council rental income.
- 3) Wave is a nuisance neighbour: noise pollution; floodlights need adjustment; leisure centre noise will disturb patients and the 60+ club.
- 4) Proposal will increase traffic noise.

(v) Representations from resident (name and address supplied)

Concerns on behalf of 60+ Club and aware that the views of the Club's Steering Group do not represent all Club members.

(vi) Representation from the Feedback of initial exhibition evenings

- 1) The event was attended by 1,240 people.
- 2) Concerns expressed included: Car parking, bus links, negative impact on town centre footfall, traffic congestion, questioning the need for a retail

- unit at the site and loss of green space.
- 3) Residents also welcomed opportunities for better, and more 'appropriate', spaces for the GPs and health services and for 'future-proofing' local health services, as well as opportunities for the two practices to work together with the leisure centre to promote better health.

Appendix 4(2)

2. Impact of movement of GPs from Town Centre to the Downs

2.1 Economic Impact on the Town Centre (include reduced footfall from staff and patients, possible alternative uses of current surgery premises, impact on pharmacy)

(a) Evidence

(i) Officer evidence

- 1) High Streets and Town Centres 2030 report (House of Commons Housing Communities and local Government Committee) note: 'Our vision is for activity based community gathering places where retail is a smaller part of a wider range of uses and activities and where green space, leisure, arts and culture and health and social care services combine with housing to create a space based on social and community interactions'.
- 2) Potential redevelopment of the Dane Road site if GPs vacate could have the potential for employment generating uses.
- 3) Not recommended to carry out survey at this time, as unlikely that a true picture would be ascertained.
- 4) It is reasonable to anticipate some level of reduced footfall from the relocation to the Downs site.

(ii) Evidence from the GPs / CCG / ESHT

- 1) Old School Surgery repeat prescriptions 85% (of which 94% is prescribed direct to the usual pharmacy) and of the remaining 15%, 76% is prescribed direct to the usual pharmacy. Overall 91% of prescribing is done electronically.
- 2) Seaford Medical Practice - repeat prescriptions 67%. Overall 91% of prescribing is done electronically direct to the usual pharmacy.

(b) Representations

(i) Representations from Gerri Ori (Chair of Seaford Chamber of Commerce)

- 1) Concern was expressed over the economic impact of the GPs leaving the Town Centre.
- 2) Footfall would be reduced impacting negatively on town centre retail businesses.
- 3) In particular, pharmacists were concerned that their revenue would be reduced.

(ii) Representations from Keith Blackburn (Chair of Neighbourhood Plan Steering Group)

- 1) Most pharmacy users were for repeat prescriptions and patients could choose which pharmacy to use.
- 2) An existing pharmacy in the town could provide a satellite pharmacy as part of the scheme.
- 3) Population of Seaford expected to be 32,000 by 2027 (this figure includes East Dean and Alfriston).
- 4) Neither the supermarket or houses are needed at this location.

- (iii) **Representations from resident (RWF Downing)**
Encouraging surgeries to leave town centre and take their visitors with them is irresponsible.
- (iv) **Representations from trader (Wynne's and Seaford Fencing)**
We have two units in Seaford. The proposed development will affect traders through loss of footfall in town centre.
- (v) **Representations from resident (Clive Livingston)**
Impact on town centre a 'red herring' as people who are ill and need to see a doctor asap will not be shopping.
- (vi) **Representations from resident (Name and Address Supplied)**
Removal of surgeries from town centre will have a detrimental effect on footfall for local shops / businesses.
- (vii) **Representations from the Petition to Stop the Development on the Downs Site**
 - 1) Relocation from town centre will lead to reduced footfall in town shops and cafes and will damage business in town.
 - 2) Patients of surgeries also use shops and cafes.
- (viii) **Representations from the Seaford Chamber of Commerce**
There will be a detrimental effect on town centre businesses.

2.2 Proximity to the existing Downs Leisure Centre

- (a) **Evidence**
 - 1) **Wave Leisure** – See information as set out above at 1.2(a)(i) and (b)(i).
 - 2) **GPs / CCG / ESHT** - See information as set out above at 1.1(a)23.
- (b) **Representations**
 - 1) **DDNV** – See information as set out above at 1.2 (b) (ii).

2.3 Impact on Patient Journeys

- (a) **Evidence - GPs / CCG / ESHT**
The CCG has produced two heat-maps which show the walking times of the patients for the existing premises and the proposed health hub. These are open to interpretation but generally speaking the relocation of services to the health hub would result in less short and long journeys and more medium length journeys.
- (b) **Representations**
 - (i) **Representations from Keith Blackman**
Some people who drive to town now will walk to new hub.
 - (ii) **Representations from trader (Wynnes and Seaford Fencing)**
Retirement flats are planned for town centre. The proposed development will not be within walking distance for these residents.

2.4 Traffic Impact

(a) Evidence - from Council Officers

- 1) Early discussions with bus companies but the appropriate time for detailed consideration is at pre-planning application stage.
- 2) No new vehicle access/egress to Sutton Drove to be proposed.

(b) Representations

(i) Representations from Keith Blackburn

- 1) The retail and housing elements of the proposed Downs development were not needed and their exclusion would mitigate the development's impact on traffic.
- 2) Bus routes would require altering.
- 3) Traffic in the town centre would be reduced.

(ii) Representations from DDNV

- 1) No traffic feasibility studies undertaken and traffic accident potential exists.
- 2) Insufficient car parking at the Downs site. This will exacerbate on-street parking.

(iii) Representations from trader (Wynnes and Seaford Fencing)

Wave customers, patients and staff will create more congestion and parking problems on road already busy with HGVs, waste vehicles and cars.

(iv) Representations from resident (Clive Livingstone)

- 1) The Health hub will be on major bus route with significant parking on site.
- 2) This will help with on street parking in town centre. Traffic impact on adjacent roads likely to be minor as appointments will be during daytime.

(v) Representations from trader (name and address supplied)

- 1) The Health hub proposal will encourage people to travel by car.
- 2) Infrastructure inadequate to cope. (Town centre, by comparison, has a railway station and buses). Parking on proposed Health hub site is inadequate and parking should not replace green fields.

(vi) Representations from resident (Kieran Perkins)

- 1) The Health hub proposal will generate traffic disruption in an already built up area.
- 2) Development will lead to increased traffic, pollution and risk of accidents.
- 3) Parking demand will increase and planned parking is insufficient.

(vii) Representations from the Seaford Chamber of Commerce

Parking will be insufficient causing traffic problems and unauthorised parking.

Appendix 4(3)

3. Impact on green space, public recreation (including free and paid for facilities) and wildlife habitat

(a) Evidence

(i) Officer evidence

- 1) Desktop survey shows no notable habitats / species on site and no invasive/ non-native species. Bat surveys will be completed.
- 2) In the new design that has been discussed the garden would not be retained, but many trees would be retained. In addition, the Petanque Ground can be relocated. Petanque Group confirmed that fewer 'lanes' required.
- 3) Land was gifted to the Council under covenant for purposes of recreation and enjoyment.
- 4) Planning policy position for the Downs site is as follows: that the grounds at the Downs Site are protected by LDC Planning Policies, contributing to RE1 Existing Recreation Groups, CP8 Core Green Infrastructure, SPF12 Recreation and Community Services at the Downs; LDC Core Policy 8 – Green Infrastructure; LDC Local Plan Core Policy 9 – Air Quality.

(b) Representations

(i) Representations from Downs Development Neighbourhood Voice (DDNV)

- 1) Existing deficit of 15Ha plus of green space.
- 2) There will be an additional loss of 4Ha at Newlands.
- 3) The health hub proposal would mean loss of a further 1Ha.
- 4) Population of Seaford using 2018 figures is 24,497.
- 5) Population projection for Seaford by 2030 is 25,324.
- 6) Minimum charge for using any part of the artificial pitch is £20 per hour.
- 9) School East Sussex Report 2017: children stated preferred choice of exercise was walking, jogging, running games. Need to use transport, lack of time and costs of activity are deterrents.
- 10) Green space is necessary for promoting good health. Taking it away and/ or charging for it has a detrimental effect on the community. A 3G pitch would attract a charge.
- 11) Location of the Downs offers inclusive, accessible green space for all. Playing field is a much valued asset.

(ii) Representations from resident (RWF Downing)

- 1) The health hub proposal will cause loss of 2 green spaces.
- 2) The Downs is in a geographically central position within Seaford and is a calm, green oasis.
- 3) Soccer pitch is used on Sunday by a Seaford TC youth football team and is in continual use by walkers and by residents for games.
- 4) It is the only free open space locally.
- 5) Value of the Memorial Gardens.
- 6) Promised provision of a public recreation space at former Newlands School is not comparable or mitigation.

(iii) Representations from trader (Wynnes and Seaford Fencing)

The health hub proposal will remove trees and one of the last green spaces.

(iv) Representations from resident (Name and Address Supplied)

- 1) Destruction of Downs Recreation ground not warranted – will lead to loss of green space, garden, wildlife, free-of-charge pitch. Also loss of beautiful flint building (over 60s club).
- 2) Site is of architectural and historic interest.

(v) Representations from the Petition to Stop the Development on the Downs Site

Development will damage wildlife habitat, plant life and ecosystem.

Appendix 4(4)

4. Appraisal of availability and viability of other sites

(a) Evidence

(i) Evidence from Charlie Grimble, Advisor to the Seaford Neighbourhood Plan Group

- 1) A report was prepared by Charlie Grimble, which looked at viable alternatives to the Downs for the provision of new primary healthcare facilities.
- 2) 306 sites were considered but only one viable site was identified: part of the Salts Recreation Ground. This would involve more complex and expensive foundations. The site was also in a flood-risk area (flood zone 3) which would involve additional expense and had planning complications. There would also be a loss of playing pitch area.
- 3) A proposed scheme from a local architect for redevelopment of the existing Dane Road Site was considered but was dismissed as it would require the GPs to decant and would involve unpredictable and possibly unaffordable foundation works.
- 4) Refurbishment options have not been looked at because of difficulties in assessing costs, adverse VAT treatment and timing issues.
- 5) The only options would be local authority owned sites in order to be financially viable and after considering these sites only one site was identified as worth consideration (Salts).

(ii) Evidence from the GPs (See Exempt Appendix 6)

(iii) Report from Vail Williams LLP (Planning Consultants)

- 1) It cannot be said that a Dane Road / Richmond Road alternative is technically unfeasible. A combination of the existing Seaford Medical Practice's Dane Road Site and Richmond Road Car Park would provide greater scope for a redevelopment. Further detailed design work would be needed to establish feasibility. This option would involve the temporary decanting of the current GP practice. It would result in the loss of public car parking capacity at Richmond Road (65 spaces) and would also involve construction challenges.
- 2) It is unlikely that any of the development scenarios on the existing Dane Road site would provide an appropriate layout/configuration for the new facility whilst meeting highways and parking requirements.
- 3) If demolition was required, temporary premises would be needed. Finding this in the proposed timescale could be difficult.

(iv) Evidence from NHS Property Services (NHSPS)

- 1) There is potential to extend the existing Dane Road site but this would result in loss of parking and may not create sufficient additional space.
- 2) No funding route has been identified. Any request for NHS funding would need to go through the Sustainability and Transformation Partnership (STP) capital planning process which has not historically released significant primary care investment.
- 3) NHSPS has no capital to invest in this kind of expansion project.

- 4) NHSPS do not consider that the site would attract NHS funding.
- 5) Any works are likely to require decanting out of the building which would add to the development costs.
- 6) The Council would be given priority to acquire the existing site if declared surplus but would have to pay full market value for it.

(v) Evidence from Officers

- 1) Planning policy advice on the Salts Recreation Ground site – that a site in Flood Zone 3 can only be considered for development for healthcare use under the sequential test if no other suitable sites for that use are available. Given that the alternative of the Downs site was available, the Salts Recreation Site would be ruled out for development for this use.

(b) Representations

(i) Representations from resident (RWF Downing)

Queries whether there has been any consideration of either Talland Parade and/ or Warwick House.

(ii) Representations from resident (Name and Address Supplied)

Questions why NHS cannot adapt the Dane Road site to provide extra GP Services.

(iii) Representations from resident (Kieran Perkins)

Doctors' surgery should stay where it is and be extended to provide a new wing and Salts carpark used to provide necessary additional car parking.

(iv) Representations from the GPs / CCG / ESHT

The Downs proposal is the only realistic, practical and affordable solution to meet current and future needs and enable new services.

(v) Representations from County Councillor Carolyn Lambert

- 1) Previous assessments by the CCG of the Dane Road Site have not been made available.
- 2) There is no clarity as to what an assessment of the Dane Road site actually means and in particular there is confusion as to the extent of the site and the space requirements of the GPs.
- 3) Given that this is a partnership project, no consideration appears to have been given to the potential land bank that exists around the Dane Road Medical Centre and the Richmond Road Car Park. Reconsideration of this as a potential alternative site is welcome.

Appendix 4(5)

5. Financial Viability of the Downs Site Development

(a) Evidence

(i) Officer Evidence:

- 1) Final costing figures not yet available.
- 2) Considerable flexibility available in build options and programme.
- 3) The health hub element likely to at least break even financially.
- 4) Residential element not viable without value – engineering which is likely to reduce sustainability features.
- 5) Leisure element – insufficient information available to assess viability.
- 6) See Exempt Appendix 6.

(ii) Evidence from the GPs / CCG / ESHT

The CCG supports the proposed development and has committed to funding it and the additional services which come with it.

(iii) Evidence from FMG Consulting Ltd - See Exempt Appendix 6.

(b) Representations

(i) Representations from resident (RWF Downing)

- 1) The proposed build costs published by the Council (approximately £18m) are not reliable.
- 2) There is no imperative upon the Council to subsidise either the private business (the GP Practices) or other public sector bodies (ESHT) and in turn the NHS.
- 3) Importance of Wave Leisure's financial strength.

(ii) Representations from resident (name and addressed supplied)

It is not the Council's responsibility to fund this project.

(iii) Representations from resident (Kieran Perkins)

Cost excessive in comparison with extension of existing GPs' site.

(iv) Representations from County Councillor Carolyn Lambert

- 1) There is a huge financial and reputational risk for the Council associated with the proposed development.
- 2) Questions why all the capital for the development is being funded by the Council.
- 3) Questions if the NHS will be refunding any of the capital costs.
- 4) Questions if there is a business case for the development supported by all the stakeholders.

Appendix 4(6)**6. Consequences of not proceeding****(a) Evidence****(i) Evidence from the GPs / CCG / ESHT**

- 1) There would be an adverse effect on care and working conditions at the surgeries.
- 2) Current services would be destabilised and staff retention would be adversely affected.
- 3) One or both of the current practices might fail and the provision of primary care services might be moved elsewhere e.g. Newhaven and/or Eastbourne.

(b) Representations**(i) Representations from Keith Blackburn**

The benefit of the co-location of a medical centre with sports and wellbeing facilities would be lost.

(ii) Officer advice:

NHS Property Services not likely to agree to sale proceeds of Dane Road being used to subsidise cost of any new development for GPs because this is known to be inconsistent with NHS funding model. Community Health Partnerships (CHP) is unlikely to facilitate this scheme as its resources are focused on parts of the Country which do not include East Sussex.

Appendix 5

Individual Documents:

Documents referenced in Appendix 4(1), Section 1.1 Health Evidence points 9 and 10:

1. GP's Notes for Lewes District Council Scrutiny Committee regarding Seaford Health Hub (Presented 10/09/19)

Why a Health Hub?

- National policy is to integrate Public Bodies to work together including the voluntary sector
- Enable the Seaford GPs to establish an effective Primary Care Network (PCN), in line with the NHS Long Term Plan. A PCN is defined as GP Practice(s) and other non-GP providers such as community (community pharmacy, dentistry, optometry etc.), voluntary, secondary care providers and social care) serving a population of 30k – 50k. Seaford (and the surrounds) has been confirmed as a PCN
- Fit-for-purpose premises is key to fulfilling this ambition, both for today's needs and the community needs for the next 25+year. Co-location will enable PCNs to work to maximum effect
- Both Practices have insufficient premises to meet today's needs
- The Seaford GPs want to be able to continue to be able to effectively recruit and retain scarce clinical resource against a backdrop of national and local shortages.
- The Seaford GPs want to be able to offer a range of enhanced primary care services and improve our current service. The enhanced services will be fully determined once the building is being developed, but a number of expected enhancements are set out below.
- Enable effective integrated working with the East Sussex Healthcare Trust out-of-hospital teams and other health and social care teams that will be present in the new Health Hub, making most effective use of formal and informal communication channels (e.g. coffee room chats etc.)
- Enable a truly integrated approach to health and wellbeing, incorporating innovative approaches in conjunction with Wave Leisure and other parties. This would build on existing work by Wave Leisure, which has been nationally recognised

Enhanced Services That Can Be Introduced With A New Health Hub:

- As part of the Seaford PCN, the GPs will recruit:
 - A team of 3 paramedic practitioners
 - A Practice Pharmacist
 - A first-contact physiotherapist

- A Physician Associate
 - A social prescribing team
- Offer extended access, Monday – Friday 8.00 am to 8.00 pm and some Saturday and Sunday appointments
 - Introduce MRI capabilities in Seaford via a visiting mobile MRI provider
 - Change how the Seaford GPs work, moving towards a Primary Home Care mode, including providing an Acute On the Day service
 - Provide a walk-in “wound assessment” service. This would enable a number of wounds to be assessed and treated, with only the more serious wounds being directed to Urgent Treatment Centres etc.
 - Extend the current ultrasound service from 1 day a week in Seaford to 3 days a week
 - Extend the current audiology service from 1 day a week Host more Community and Consultant Outreach Clinics (e.g. Dermatology, Cardiology, Diabetes already in place but limited by room space) to stop people travelling to hospitals for these services
 - Aided by the co-location, work with Wave Leisure to develop, deliver and oversee health and wellbeing programmes for the population of Seaford (please refer to presentation given by Duncan Kerr, Wave Leisure)
 - Many other potential services could be introduced because of (1) the fit-for-purpose premises and (2) the integrated and effective working of the two Practices being co-located. This will not be possible without co-location

What Happens If A New Health Hub Is Not Developed at the Downs Site:

- Current premises are unsuitable and impacting and impeding the level of care we can offer our patients. The cramped and not fit for purpose nature of the infrastructure is directly detrimental to the working conditions and well-being of existing staff e.g. Porta cabins and store cupboards used to see patients currently.
- NHS Property Services, the CCG and the Practices have concluded that the Dane Road site is not big enough for the size of Health Hub required for the town the size of Seaford and the surrounds
- Any other site other than the Downs site is likely to involve land acquisition costs and third party developer costs. It is likely the additional costs would make any other scheme unviable from a CCG and a Practice perspective
- High risk of destabilising current offer of General Practice in Seaford area both in terms of infrastructure (lease of OSS Premises expires in Practical terms at the end of 2021) and work force in terms of retention of Doctors , Nurses and associated staff.

- Far from certain if the lease of Old School Surgery could be renewed and even if was the accommodation is currently totally inadequate for provision of services.
- In event of one or both Practices failing then provision of patient care would either be transferred out of area e.g. Newhaven or Eastbourne or to the remaining Seaford Practice risking a 'domino effect' resulting in the other practice failing.

Clinical Commissioning Group Perspective:

- Eastbourne, Hailsham & Seaford (EHS) CCG is fully supportive of the proposed development. The CCG confirms that funding for proposed rents is confirmed and will remain confirmed following any reconfiguration of local CCGs
- If this development does not proceed, there is no certainty that an alternative proposal will be supported by the CCG
- The CCG will financially support the additional services referred to above, in line with national commissioning guidelines

Dr Dan Elliott, Executive GP Partner, Seaford Medical Practice & Dr Raj Chandarana, Executive GP Partner, Old School Surgery.
6th September 2019.



**Eastbourne, Hailsham and Seaford
Clinical Commissioning Group**

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28th October 2019

Dear Councillor Robinson

Further to our verbal and written submissions to the Scrutiny Committee in September, I am formally responding to you on the CCG's position in regard to funding on the proposed new Seaford Health Hub .

Eastbourne, Hailsham and Seaford CCG is fully committed to this development which is one of our local priorities. Funding has been identified and committed to cover all the revenue costs of this development based on the rent reimbursements for the 25 years of the lease. The costs of the community elements of this scheme are also covered by the CCG through the contract arrangements with the current community provider.

The CCG and NHSE are committed to the Primary Care Network funding as set out in the NHS Long Term Plan and this will support the new developments that the GPs have referred to.

If you have any queries on this or would like a conversation to discuss further please do let me know

Yours sincerely,



Fiona Kellett
Head of Finance and Primary Care Commissioning

CHAIR: DR MARTIN WRITER CHIEF EXECUTIVE OFFICER: ADAM DOYLE
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