



# OTTERPOOL PARK

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APPLICATION DOCUMENT | 3.9  
**COMMUNITY FACILITIES DELIVERY STRATEGY**

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February 2019



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APPLICATION DOCUMENT



# COMMUNITY FACILITIES DELIVERY STRATEGY

OTTERPOOL PARK GARDEN TOWN

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FEBRUARY 2019

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## Introduction

- 1.1 Otterpool Park Garden Town will deliver up to 10,000 homes in a new settlement in Folkestone and Hythe District (F&HD) in Kent. This document supports a planning application for the first 8,500 of these homes, which will be delivered as Garden Town alongside new community and commercial uses and new road and utilities infrastructure.
- 1.2 The application for 8,500 homes is an Outline Planning Application. This means that the exact detail of the design and the precise location of community facilities such as school and healthcare facilities will not be determined at this stage. Instead, the Application will include:
  - Development Principles, which establish the aspirations for what can be achieved at Otterpool Park
  - Parameter plans, which will show the broad location of all components of the development, including schools and community facilities. These plans will also show major access and transport routes.
  - A Development Specification, which will set out the floorspace that can be delivered at Otterpool Park by use class, including D class floorspace which will be used for schools, community facilities and healthcare.
  - A Phasing Plan, which will set out the order in which areas of Otterpool Park will be delivered, and what facilities will be in each phase.
  - A Section 106 Agreement which will set out the terms under which community facilities, or land for these facilities, will be funded, managed, leased and/or transferred to the future operators.
- 1.3 These components will provide a planning and a legal framework for how the needs of the community will be met in terms of healthcare, education and community space.
- 1.4 This Community Facilities Strategy pulls together the principles established in each of these components to present the coherent approach to the delivery of community facilities for Otterpool Park. This Strategy demonstrates the process that has been undertaken to decide on the amount and type of provision that is required. It then sets out how the planning process – through the Outline Application process and then on to detailed design and Reserved Matters – will secure delivery and long-term management of these facilities.
- 1.5 This Strategy has three core topics:
  1. Education: Nursery, Primary, Secondary and Tertiary education.
  2. Healthcare: GP surgeries, pharmacies, dentists and hospital and specialist care
  3. Community Facilities: community halls and places of worship.
- 1.6 Other community facilities such as open space and playspace are dealt with elsewhere in the application documents such as the Design and Access Statement and the Landscape Strategy.
- 1.7 Each topic has three sections:
  1. Baseline situation
  2. Identified need
  3. Proposed approach

- 1.8 The Application is for 8,500 homes but as the Garden Town as a whole is intended to deliver 10,000 homes in the long term, strategic infrastructure requirements for both scenarios have been considered.

## Development Principles

- 2.1 FHDC has published a Draft Charter for Otterpool Park. This set out its aspirations for the new settlement: “a garden town for the future<sup>1</sup>.” The introductory sections set out the broad vision for Otterpool Park:

*“It will be a community built on sustainability with a wide range of mixed tenure homes and jobs for all age groups that are within easy walking, cycling and commuting distance.”*

- 2.2 The Development Charter establishes 17 Development Principles that aim to achieve economic, social and environmental sustainability within the Garden Town. Those Development Principles that are most relevant to the delivery of community facilities are:

1. Economic: Create local neighbourhood centres within walkable distances
2. Economic: Create an attractive town centre as the heart of the settlement
3. Social: Establish a suitable legal entity for long term management.
4. Environmental: promote healthy and sustainable environments

- 2.3 Each principle is underpinned by a list of commitments. Those that are most relevant to this Strategy are:

1. A state-of-the-art medical centre that provides a ‘one-stop shop’ for outpatients including a cluster of GPs, a wide range of diagnostic services and primary care treatment shall be provided as early as practical in the development programme to meet the needs of the growing town and minimise the requirement for secondary care treatment at local hospitals. The medical centre should be located on an accessible site close to other community services.
2. Otterpool Park should aim to be self-sufficient in terms of providing its own schools, health centres, community facilities and integrated transport systems and community facilities.
3. Early phases of development should be planned in a way that will not disadvantage early residents or place pressure on existing local facilities and infrastructure, but is viable and deliverable.
4. Key infrastructure, such as a new primary school and possibly a new secondary school, should be provided in phase one of the new settlement to support investment and community development. Where it is appropriate or necessary for services to be shared with other local communities this shall be decided after detailed local consultation and made clear as part of the planning process.

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<sup>1</sup> F&HDC, 2017, A Charter for Otterpool Park, Draft for Consultation.

5. Existing nearby communities of Lypne, Barrow Hill, Sellindge, Westenhanger, Saltwood, Stanford and Postling shall have appropriate access to and benefit from the new community facilities provided.
6. A section 106 legal agreement will be negotiated with the developer as an integral part of a planning permission that ensures investment arising from economies of scale is made at appropriate stages of the building of the new town for investment in key infrastructure.
7. The uplift in land value that would be created by a grant of planning permission for Otterpool Park shall be captured to create:
  - Early investment in key infrastructure.
  - A sustainable strategy for the long-term stewardship of the town.
  - Investment in local assets that can provide a sustainable funding stream for the community facilities and those areas of the public realm that will be managed, in the future, by the public and voluntary sectors.
  - An investment in sustainable development.
  - Spaces and facilities designed with long term management and maintenance in mind.



## Education

### Existing Baseline

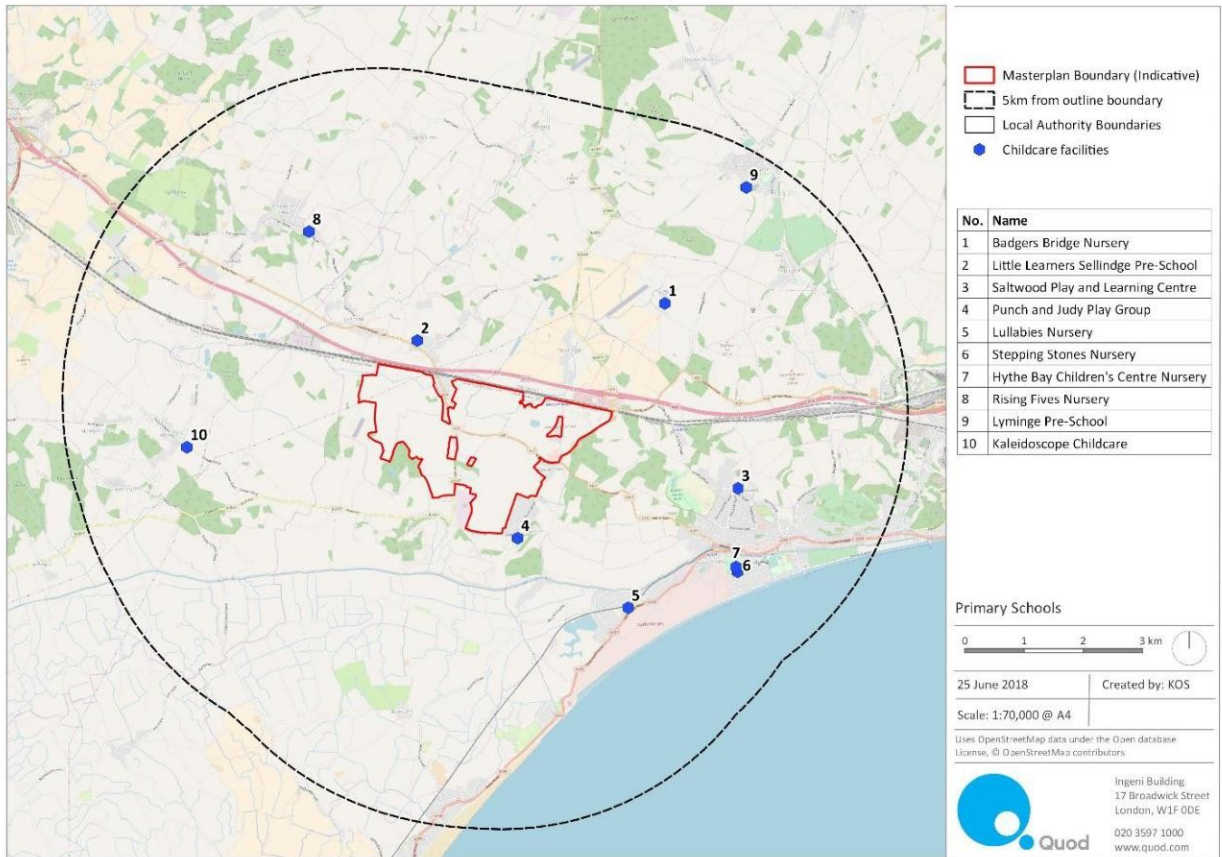
- 3.1 This section examines existing education provision and capacity near to the Otterpool Park Masterplan Area (the Masterplan Area). It details school capacity and numbers of pupils in primary and secondary schools in order to establish what spare capacity is available, based on Kent County Council (KCC) published admissions numbers (PANs) and Annual Schools Census (2017) data. It also sets out what education infrastructure is planned.
- 3.2 For primary schools, this section will consider all schools within five kilometres of the boundaries of the Masterplan Area. This is considered a reasonable travel distance to a primary school in a rural area (although the delivery of more local primary schools will be desirable as part of the proposed development). At secondary level, students are willing and able to travel further – and may do so in order to attend a school with a particular specialism. Therefore, this section will consider all schools within Folkestone and Hythe District (FHDC) as well as within Ashford District (ADC) (given the site's proximity to the District boundary).

### Existing education provision

#### Early Years

- 3.3 There are currently 10 childcare providers within five km. of the Masterplan Area. These vary in type and size; some operate on public sites adjacent to schools while some operate in community halls. Their location is shown in Figure 3.1 below. The nearest childcare providers to the Masterplan Area are Little Learners Pre-School in Sellindge and Punch and Judy Play Group in Lympne.

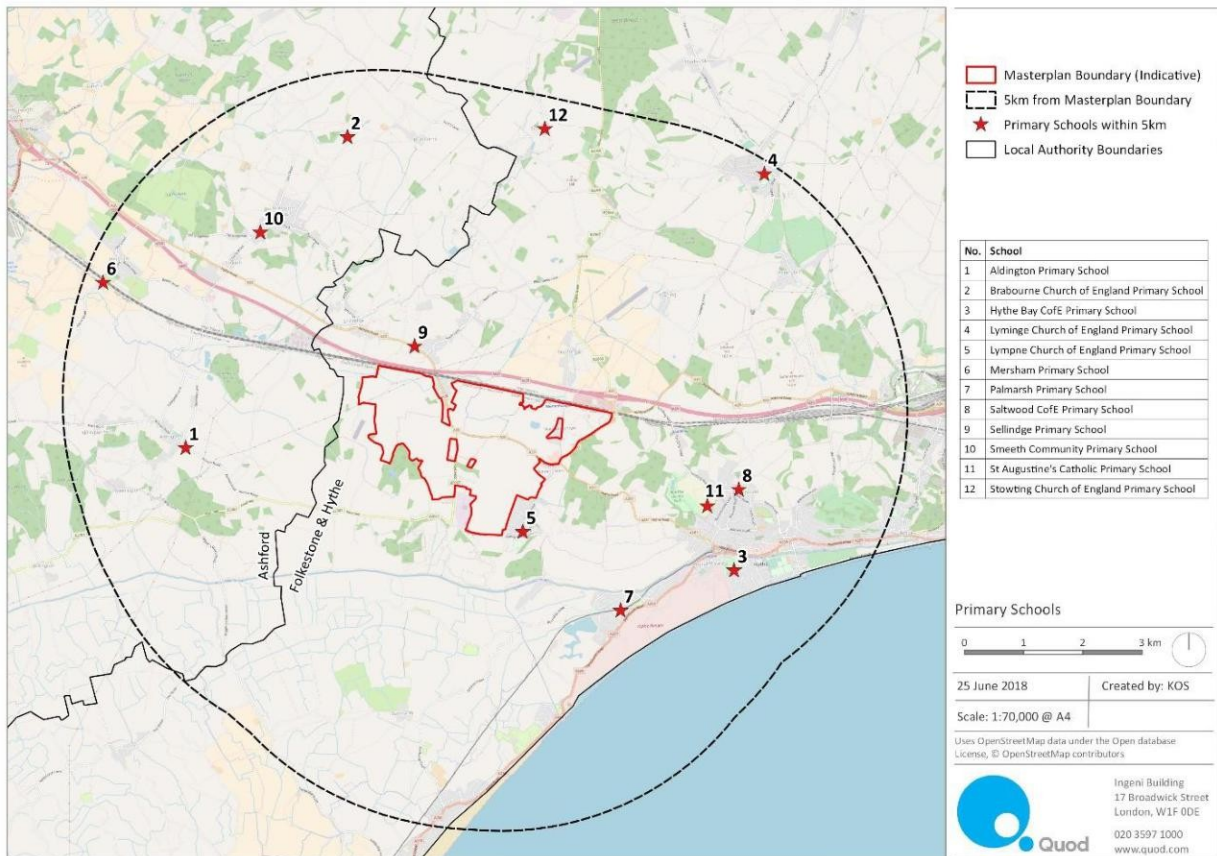
Figure 3.1: Childcare facilities



### Primary Schools

- 3.4 There are currently 12 primary schools within five km. of the Masterplan Area. These are shown below in Figure 3.2. These schools are located in surrounding villages or within Hythe. The schools closest to the Masterplan Area are Lymyne Church of England Primary School and Sellindge Primary School.

Figure 3.2: Primary Schools



3.5 Table 2.1 shows the current pupil numbers and total capacity at these schools. These schools are mostly small schools of one or one-half forms of entry (FE) each, including several schools in small villages. This shows the PAN or number of places for Reception in 2016, the current capacity of each school, the total pupils on the roll in each school and the number of surplus or unfilled places.

Table 2.1: Primary School Capacity

| No. | Name                                       | PAN | Capacity | Number on Roll | Surplus |
|-----|--|-----|----------|----------------|---------|
| 1   | Aldington Primary School                   | 30  | 190      | 203            | 0       |
| 2   | Brabourne Church of England Primary School | 15  | 105      | 102            | 3       |
| 3   | Hythe Bay Church of England Primary School | 60  | 420      | 397            | 23      |
| 4   | Lylinge Church of England Primary School   | 30  | 210      | 194            | 16      |
| 5   | Lympne Church of England Primary School    | 30  | 210      | 209            | 1       |
| 6   | Mersham Primary School                     | 30  | 210      | 190            | 20      |
| 7   | Palmarsh Primary School                    | 20  | 140      | 134            | 6       |
| 8   | Saltwood Church of England Primary School  | 30  | 210      | 222            | 0       |
| 9   | Sellindge Primary School                   | 15  | 105      | 115            | 0       |

| No.          | Name                                      | PAN        | Capacity     | Number on Roll | Surplus            |
|--------------|---|------------|--------------|----------------|--------------------|
| 10           | Smeeth Community Primary School           | 20         | 140          | 131            | 9                  |
| 11           | St Augustine's Catholic Primary School    | 30         | 210          | 206            | 4                  |
| 12           | Stowting Church of England Primary School | 15         | 105          | 92             | 13                 |
| <b>TOTAL</b> |   | <b>325</b> | <b>2,255</b> | <b>2,195</b>   | <b>95<br/>(4%)</b> |

- 3.6 This analysis shows that schools in the surrounding area tend to be small and with limited capacity. Overall, 95 places or 4% of all places across all years are unfilled in these schools. Furthermore, the intake to these schools has remained relatively steady over the last seven years; as a result, the numbers of students in Year 3, the largest year group, is only 20 more than in Year 6, the smallest cohort.
- 3.7 Only one school has expanded in this period<sup>2</sup>. However, KCC documents<sup>3</sup> indicate two of these schools (Palmarsh Primary and Sellindge Primary) are likely to expand in future to meet demand from housing developments in Sellindge and Hythe. However, while these two towns are currently forecast to need more school places in future, demand for school places in rural areas and villages surrounding the site is otherwise forecast to remain steady.
- 3.8 This overview indicates that while there is some surplus capacity in local primary schools, it is very limited. Most schools in the surrounding area are small and are unlikely to have capacity to significantly expand. There is unlikely to be capacity to cater for demand for primary school places from Otterpool Park in existing local schools except in a very limited way for the first homes to be occupied.

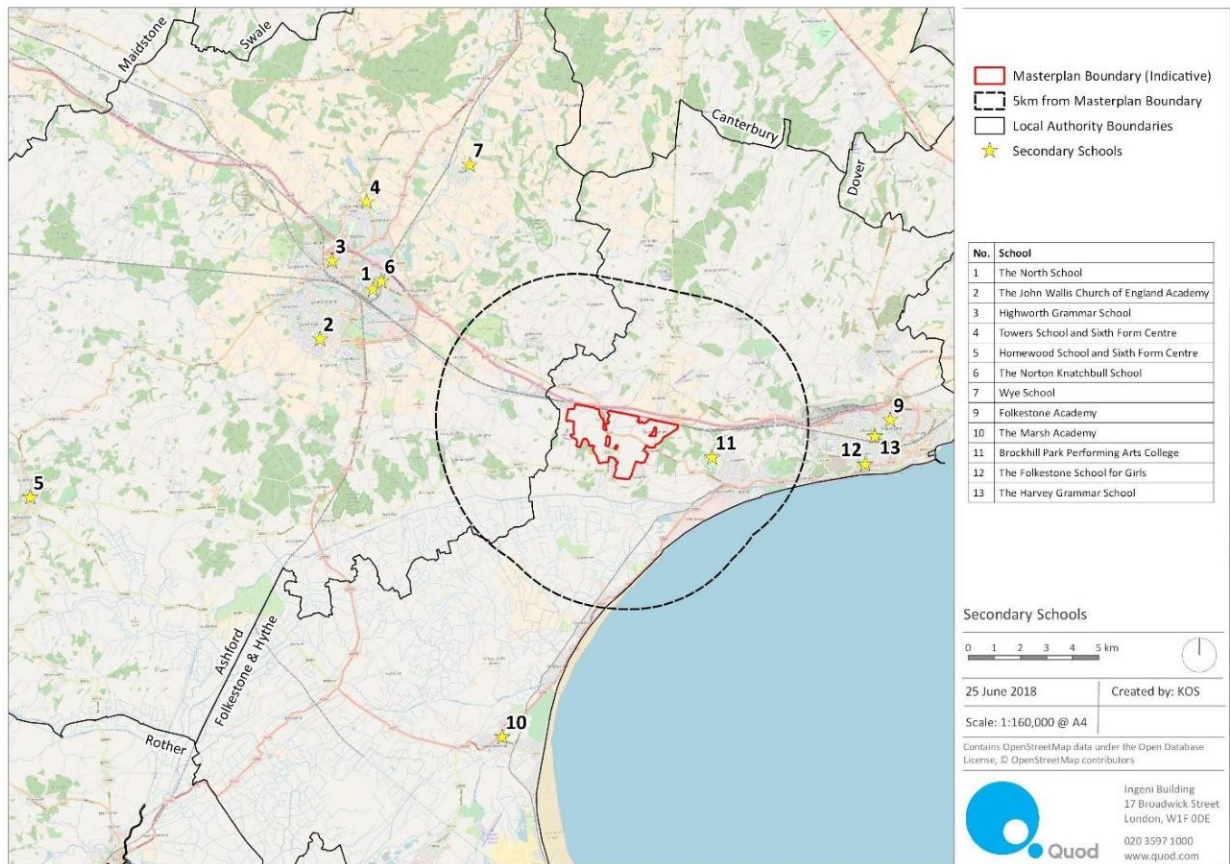
### Secondary Schools

- 3.9 There are currently 12 secondary schools within both ADC and FHDC. These are shown in Figure 2.2 below. The closest school to the Masterplan Area is Brockhill Park Performing Arts College on the outskirts of Hythe. One school (Pent Valley Technology College) closed in 2016 and is therefore not part of this analysis.

<sup>2</sup> Aldington Primary School added 10 to its PAN in 2012.

<sup>3</sup> KCC, 'Commissioning Plan for Education Provision in Kent, 2018-2022', 2017; 'Your guide to applying for a Primary school in Kent 2018', 2018.

Figure 3.3: Secondary Schools



3.10 The capacity of secondary schools in both districts for Years 7-11 is shown below in Table 2.2, including the total capacity for each district. This also indicates what district each school is in and presents capacity in both districts separately and overall.

Table 2.2: Secondary School Capacity

| No. | Name                                      | Admissions Type     | Sex   | District | PAN | Capacity | Number on Roll | Surplus |
|-----|---|---------------------|-------|----------|-----|----------|----------------|---------|
| 1   | The North School                          | Comprehensive       | Mixed | ADC      | 215 | 1,075    | 916            | 159     |
| 2   | The John Wallis Church of England Academy | Comprehensive       | Mixed | ADC      | 210 | 1,050    | 975            | 75      |
| 3   | Highworth Grammar School                  | Selective (grammar) | Girls | ADC      | 184 | 916      | 984            | 0       |
| 4   | Towers School and Sixth Form Centre       | Comprehensive       | Mixed | ADC      | 243 | 1,215    | 794            | 421     |
| 5   | Homewood School and Sixth Form Centre     | Comprehensive       | Mixed | ADC      | 390 | 1,920    | 1,721          | 199     |

| No.                               | Name                                   | Admissions Type     | Sex   | District | PAN          | Capacity      | Number on Roll | Surplus           |
|-----------------------------------|--|---------------------|-------|----------|--------------|---------------|----------------|-------------------|
| 6                                 | The Norton Knatchbull School           | Selective (grammar) | Boys  | ADC      | 149          | 745           | 885            | 0                 |
| 7                                 | Wye School                             | Comprehensive       | Mixed | ADC      | 90           | 360           | 361            | 0                 |
| 8                                 | Folkestone Academy                     | Comprehensive       | Mixed | FHDC     | 270          | 1,290         | 1,336          | 0                 |
| 9                                 | The Marsh Academy                      | Comprehensive       | Mixed | FHDC     | 180          | 900           | 746            | 154               |
| 10                                | Brockhill Park Performing Arts College | Comprehensive       | Mixed | FHDC     | 235          | 1,175         | 1,137          | 38                |
| 11                                | The Folkestone School for Girls        | Selective (grammar) | Girls | FHDC     | 180          | 885           | 860            | 25                |
| 12                                | The Harvey Grammar School              | Selective (grammar) | Boys  | FHDC     | 150          | 750           | 691            | 59                |
| <b>Total Folkestone and Hythe</b> |  |                     |       |          | <b>1,015</b> | <b>5,000</b>  | <b>4,770</b>   | <b>276 (5%)</b>   |
| <b>Total Ashford</b>              |  |                     |       |          | <b>1,481</b> | <b>7,281</b>  | <b>6,636</b>   | <b>854 (12%)</b>  |
| <b>TOTAL</b>                      |  |                     |       |          | <b>2,496</b> | <b>12,281</b> | <b>11,406</b>  | <b>1,130 (9%)</b> |

- 3.11 This analysis of capacity indicates that over both districts there is some secondary school capacity. 1,130 or 9% of spaces within Years 7-11 are currently unfilled. However, surplus capacity is currently greater in ADC (12%) than in FHDC (5%).
- 3.12 This lower surplus capacity in FHDC schools partly reflects a period of transition following the closure of Pent Valley Technology College in Folkestone. Other schools in the district took on extra students as a result, including Folkestone Academy and Brockhill Park College. However, the Turner Free School is due to open on the former Pent Valley site in September 2018 with a Year 7 intake of 120. At full capacity, this will provide 600 additional places at Years 7-11. As a result, there will be greater capacity within secondary schools in FHDC overall. However, KCC plans state that an extra 4FE of secondary school provision may be needed by 2023-24 in FHDC due to forecast rising demand.<sup>4</sup>
- 3.13 Demand in ADC for secondary school places is also forecast to rise from 2018/19 onwards, partly due to development. KCC plans to manage this increase through expanding existing schools from 2019 and with the opening of a new 8FE school in Chilmington Green in 2022 (which will serve demand from a housing development).<sup>5</sup>

<sup>4</sup> KCC, 'Commissioning Plan for Education Provision in Kent, 2018-2022', p. 129

<sup>5</sup> Ibid, p. 77.

- 3.14 Kent operates a partly selective secondary education system, with entry to grammar schools at Year 7 determined by results in the Kent Test. There are currently four selective grammar schools within the two districts (two boys' schools and two girls' schools); as a result, places at these schools would not necessarily be available to all local pupils who apply. The remaining schools do not have selective admissions criteria and operate as comprehensives or secondary modern schools. When open, the new Turner Free School in Folkestone will operate a non-selective admissions policy.
- 3.15 In conclusion, there is some surplus within local secondary schools, particularly within ADC. There are currently 122 surplus places in the three schools closest to the Masterplan Area. However, demand for secondary school places as a result of population growth (including from other planned housing development elsewhere in the two districts) is expected to fill most of this surplus over the next six years.
- 3.16 At present, based on this baseline, it is not expected that existing schools and expansion plans can provide for the increased demand for secondary school places as a result of the Otterpool Park development. In time the bulge of primary demand which is currently reaching secondary level may level off or decline, meaning that, for the later phases of development, there could be more surplus available.
- 3.17 KCC has informed the Applicant that they intend to meet some of the demand created by Otterpool Park through the expansion of The Harvey Grammar School (a selective, boys' school). The Applicant is supportive of this. Other off-site solutions may be possible, especially in the early years of the development, but it is expected that the majority of secondary school places for Otterpool Park will be met on-site.

### Further and Higher Education

- 3.18 Further education for people over 16 and below degree level. It includes A levels and equivalent vocational qualifications and can be provided in a sixth-form college, a further education college or a higher education institution. Higher education (HE) is generally at degree level or above.
- 3.19 All of the secondary schools listed in the section above also have sixth form provision, except for the Wye School (which opened in 2013 and will admit its first post-Year 11 students in September 2018). These schools offer a range of options including A levels and BTEC qualifications. The nearest sixth form to the Otterpool Park Masterplan Area is Brockhill Park Performing Arts College. This provides A/AS level courses and vocational qualifications including BTEC diplomas, including courses in performing arts such as drama, dance and music. It currently has 187 sixth form students.
- 3.20 The nearest further education college to the Masterplan Area is East Kent College's campus in Folkestone. This is the only college in FHDC and is approximately a 12-20 minute peak time drive from the Masterplan Area or 10 mins on the train from Westenhanger station. East Kent College also has campuses in Dover and Broadstairs. It provides a range of professional, vocational and technical further education courses, with a particular focus on developing skills and employability. Qualifications offered include apprenticeships, professional and vocational qualifications in areas such as computing/ICT, construction, art and design, teaching and health and social care.
- 3.21 Ashford College is the only further education college in Ashford district. It is approximately a 16-26 minute drive from the Masterplan Area or 10 mins on the train from Westenhanger station. It also provides a range of vocational, professional and technical qualifications including apprenticeships and BTEC. In addition, it also offers some HE qualifications in partnership with HE institutions, such as diplomas in education in partnership with Canterbury Christ Church University. These HE qualification offer students a route into further study at degree level.

## Expected demand for new facilities

### *Child Yield Rates*

- 3.22 In the early pre-application stage Kent County Council provided the Applicants with a projected Child Yield,<sup>6</sup> i.e. the average number of children of each age expected to be living in each home. These were as follows:
- Early years: 0.08 children per home
  - Primary School: 0.28 children per home
  - Secondary School: 0.20 children per home
  - Sixth form: 0.07<sup>7</sup> children per home
- 3.23 This child yield forms the basis of the demand projections for school places at Otterpool Park. Quod has also applied its own population model, based on Census 2011 Moving Groups statistics and has found KCC's assumptions to be reasonable in the context of Otterpool Park.
- 3.24 More recently, KCC has undertaken further research into the potential child yield of large-scale new settlements (which may differ in their population dynamics from smaller developments and urban extensions). This research shows that there is a range of potential possible yields up to a maximum of 0.41 children per house at primary and up to 0.25 children per house at secondary<sup>8</sup>. The projected rate for flats is significantly lower at a maximum of 0.08 primary school children per flat and a maximum of 0.03 secondary school children per flat.
- 3.25 Whilst all of these child yield projections apply an evidence-based approach, there is still a level of uncertainty about the exact number of school places that will be needed and when they will need to come forward. These assumptions are sensitive to build-out rate, tenure, size of homes (and flats), demographic trends and government education policy. Kent County Council has emphasised that a monitor and manage approach would be suitable for a development at this scale to allow for flexibility and additional land to meet unexpectedly high demand should be safeguarded (until it is shown that it will not be needed.) The Applicants support this approach.
- 3.26 Projections of school demand have not included older person's housing as these homes would not accommodate any children.
- 3.27 The approach to monitoring and to safeguarded (or reserve) sites is set out in more detail below.

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<sup>6</sup> As set out in minutes of meeting held with Education and Community Services, Kromer House, August 2017

<sup>7</sup> 360 A level places and 180 FE places for 8,000 homes, only 250 of which would be on-site

<sup>8</sup> Otterpool Park, Folkestone & Hythe District population forecasts, Draft report dated 5 December 2018 (SUBJECT TO MEMBER APPROVAL)



### Likely education demand

Table 1: School Yields for 8,500 unit scheme (not including older person's housing)

| Age Group        | Potential Number of pupils | Likely Forms of Entry/settings   | Flexibility required   |
|------------------|----------------------------|--|--|
| Early years      | 630                        | 24 classes   | Yes – but easily accommodated in other high street or community uses |
| Primary School   | 2,200                      | 10.5 FE  | Yes – up to a maximum of 13 FE subject to monitoring <sup>9</sup>    |
| Secondary School | 1,570                      | 10.5 FE  | Yes – up to a maximum of 14 FE subject to monitoring <sup>10</sup>   |
| Sixth Form       | 530                        | Up to 530 places, including work-place based and apprenticeship places; likely to be 240-250 places in a full-time education setting <sup>11</sup> | No   |

Table 2: School Yields for 10,000 unit scheme (not including older person's housing)

| Age Group        | Number of pupils | Forms of Entry/settings  | Flexibility required   |
|------------------|------------------|--|--|
| Early years      | 700              | 27 classes   | Review as part of any further planning permission for additional homes |
| Primary School   | 2,440            | 11.6 FE  | Review as part of any further planning permission for additional homes |
| Secondary School | 1,740            | 11.6 FE  | Review as part of any further planning permission for additional homes |
| Sixth Form       | 590              | Up to 590 places, including work-place based and apprenticeship places; likely to be up to 270 places in a full-time education setting | Review as part of any further planning permission for additional homes |

## School Requirements

<sup>9</sup> KCC 2019 model, max primary rate for 8,500 homes with C3 and with 30% flats – subject to further modelling.

<sup>10</sup> KCC 2019 model, max secondary rate for 8,500 homes with C3 and with 100% houses – subject to further modelling. <sup>11</sup> Based on proportion of young people aged 16-19 who are in full time education, Census 2011

### *School typologies*

- 3.28 Primary schools can be 1, 2, or 3FE. Very occasionally a primary school could be 4FE, although this is generally not a preferred approach. 3 FE schools may be suitable in certain settings within the Development and may be the best way to tackle potential short-term peaks in demand. KCC's preference is for 2 FE schools and the majority of the schools at Otterpool Park will be this size, unless demand is higher than currently expected and/or flexibility is required, following which these schools will be able to permanently or temporarily expand to 3 FE.
- 3.29 3 FE schools allow for greater flexibility. Where there is an odd number of FE required, it will be preferable to expand a school to 3FE, rather than build a new 1FE school. Similarly, where demand might be relatively short term, expanding a 2 FE school to 3 FE would be more sustainable than opening a new school. Both the design and the management of schools can affect how sustainable and successful schools of different sizes are and these considerations will influence the detailed design work and the process of finding a suitable operator at a later stage.
- 3.30 All primary schools will have nursery provision/early years on-site or co-located. A significant proportion of early years provision will be delivered by the private sector in both formal and informal settings. This provision is subject to market demand. This will be delivered in flexible high street floorspace with a clause to flip to other D/A/B use if not needed for early years.
- 3.31 Secondary schools can range in size from 6FE to 10FE. Larger or smaller schools than this are generally not preferred for cost and management reasons (although may be permitted under certain circumstances in consultation with the county council and the operator). Secondary schools can include sixth forms or operate only from years 7-11. It is intended that at least 250 6<sup>th</sup> form places are provided at Otterpool Park.

Table 3: School Requirements for 8,500 units

| Age Group        | Forms of Entry/classes for 8,500 homes                 | Delivery options   |
|------------------|--|--|
| Early years      | 24 classes   | A 2 class (54 pupil) nursery school located with every primary school (10 classes)<br>AND<br>additional 5-6 private settings in flexible high street space subject to market demand. |
| Primary School   | 10.5 FE<br>+ safeguarding for addition 3 FE            | 4 x 2 FE primary schools<br>AND<br>1 x 3FE primary school<br>AND<br>Safeguarding up to 3 FE  |
| Secondary School | 10 FE<br>+ offsite safeguarding for addition<br>1-4 FE | 1 x 10 FE secondary school<br>AND<br>1-4 FE off-site   |
| Sixth Form       | 240 places   | 250 places as part of secondary schools  |

Table 4: School requirements for 10,000 homes

| Age Group        | Forms of Entry/classes for 10,000 homes                          | Delivery options  |
|------------------|--|---|
| Early years      | 27 classes   | A 2 class (54 pupil) or 3 class (78 pupil) nursery school located with every primary school<br>+ additional 5-10 private settings in flexible high street space subject to market demand. |
| Primary School   | 11.6 FE<br>with safeguarding up to 3 FE<br>subject to monitoring | 4 x 2 FE primary schools<br>AND<br>2 x 3 FE primary schools<br>Review as part of any further planning permission for additional homes   |
| Secondary School | 10 FE<br>with 3-6 FE of safeguarding<br>subject to monitoring    | 10 FE on-site<br>AND<br>Up to 3-6 FE off-site<br>Review as part of any further planning permission for additional homes   |
| Sixth Form       | 270 places   | 270 places as part of secondary schools   |

## Proposed Approach

3.32 The Masterplan includes the following school sites, with the following capacities, based on Building Bulletin 103 guidance:

**Table 5: Proposed school size by phase**

| Phase                                     | Site Area | Potential capacity  | Indicative Safeguarding  |
|---|-----------|---|--|
| Phase 1A                                  | 2.3 Ha    | 1 x 3FE primary school with nursery   |  |
| Phase 1B                                  | 2.3 Ha    | 1 x 2FE primary school with nursery   | +1 FE primary school with nursery  |
| Phase 1C                                  | -         | -   |  |
| Phase 2A                                  | 10 Ha     | 10 FE secondary school with sixth form                                      |  |
| Phase 2B                                  |           | Standalone commercial nursery   |  |
| Phase 2C                                  | -         | -   |  |
| Phase 3A                                  | 2.3 Ha    | 1 x 2FE primary school with nursery   |  |
| Phase 3B                                  | -         | Standalone commercial nursery   |  |
| Phase 3C                                  | -         | -   |  |
| Phase 4                                   | 2.3 Ha    | 1 x 2FE primary school with nursery<br>Standalone commercial nursery        | +1 FE primary school with nursery  |
| Phase 5                                   | -         | -   |  |
| Phase 6                                   | 2.3 Ha    | 1 x 2FE primary school with nursery<br>Standalone commercial nursery        | +1 FE primary school with nursery  |
| Phase 7                                   | -         | -   |  |
| Phase 8                                   | -         | -   |  |
| <b>Total Phase 1-8</b>                    |           | <b>5 x 2-3 FE Primary Schools</b><br><b>1 x up to 10FE secondary school</b> | <b>Sites for a maximum capacity of 14FE of Primary</b><br><br><b>Sites for a maximum capacity of 10 FE of secondary school</b> |
| Phase 9<br>(only in 10,000 home scenario) | 1.9 Ha    | 1 x 2 FE primary school   |  |
| <b>Total Phase 1-9</b>                    |           | <b>6 x 2-3 FE Primary Schools</b><br><b>1 x up to 10FE secondary school</b> | <b>Sites for a maximum capacity of 16FE of Primary</b><br><br><b>Sites for a maximum capacity of 10 FE of secondary school</b> |

Table 6: Floorspace breakdown of each school

| Phase   | Type of school                       | Site Area target | Floorspace sqm GIA school | Floorspace sqm GIA nursery located within/adjacent to school | Standalone nursery sqm GIA (up to) in addition to any other education floorspace | Safeguarded floorspace for expansion sqm GIA | Total education floorspace in phase sqm GIA |
|---|--------------------------------------|------------------|---------------------------|--|--|--|---|
| Phase 1A                                      | 3 FE PS                              | 2.3 Ha           | 3,235                     | 350  | 350  |  | 3,935                                       |
| Phase 1B                                      | 2 FE PS (+ 1 FE Safeguarded)         | 2.3 Ha           | 2,290                     | 350  |  | 945  | 3,585                                       |
| Phase 2A                                      | 10 FE SS (inc. 250 pupil sixth form) | 10 Ha            | 14,350                    |  | 350  |  | 14,700                                      |
| Phase 2B                                      | Nursery                              |                  |                           |  | 350  |  | 350   |
| Phase 3A                                      | 2 FE PS                              | 2.3 Ha           | 2,290                     | 350  |  |  | 2,640                                       |
| Phase 3 B                                     | Nursery                              |                  |                           |  | 350  |  | 350   |
| Phase 4                                       | 2 FE PS (+ 1 FE Safeguarded)         | 2.3 Ha           | 2,290                     | 350  |  | 945  | 3,585                                       |
| Phase 4                                       | Nursery                              |                  |                           |  | 350  |  | 350   |
| Phase 6                                       | 2 FE PS (+ 1 FE Safeguarded)         | 2.3 Ha           | 2,290                     |  |  | 945  | 3,235                                       |
| Phase 6                                       | Nursery                              |                  |                           |  | 700  |  | 700   |
| Phase 7                                       | Nursery                              |                  |                           |  | 350  |  | 350   |
| <b>Phase 9 (only in 10,000 home scenario)</b> | 2 FE PS                              | 1.9 Ha           | 2,290                     |  | 350  |  | 2,640                                       |
|   |                                      | <b>23.4 Ha</b>   | <b>29,035</b>             | <b>1,400</b>   | <b>3,150</b>   | <b>2,835</b>                                 |   |
| <b>Grand Total sqm GIA (8,500 homes)</b>      |                                      |                  |                           |  |  |  | <b>33,780</b>                               |
| <b>Grand Total sqm GIA (10,000 homes)</b>     |                                      |                  |                           |  |  |  | <b>36,420</b>                               |

### School delivery: construction and operation

- 3.33 There are two main ways that the schools at Otterpool Park could be delivered. The first is for the Applicants to transfer the school land to KCC who would deliver the schools, including running a competition for an academy operator, themselves.
- 3.34 The second option is for the Applicants to deliver the schools themselves. This could be in direct partnership with a school operator or in partnership with both KCC and a school operator.
- 3.35 KCC and the Applicants have not yet decided which option will be used at Otterpool Park – and the approach may differ from school to school.
- 3.36 KCC and the Applicants will put in place a timetable of milestones to ensure that the process of land transfer, detailed planning and design, construction and opening is managed to trigger schools opening when needed, in line with housing occupation.
- 3.37 The Section 106 will set out the commitments and obligations of the relevant parties, which will ensure that the schools can and will be delivered to meet the needs of the new residents, but the detailed delivery mechanism for each school can be determined as part of the detailed design and Reserved Matters process.
- 3.38 The applicant will pursue a principle with the provider of the secondary school (and potentially the primary schools) of sharing facilities with the community. This could include indoor and outdoor sports facilities, classrooms for adult education classes etc. The Applicant will seek to discuss with the provider how the layout and planning of the school can be designed to cope with this and/or plan for community use as part of the detailed design process.

### Special Educational Need

- 3.39 The exact specification for SEN on-site (if it is required) is not yet known. It is likely that any provision would be delivered alongside one of the proposed schools (co-located) and that the current parameter plans allow for sufficient flexibility to accommodate this. Details will be established at the detailed design stage.

### Phasing of schools

#### *Construction Phasing*

- 3.40 The construction of primary schools may be phased, with 1 or 2 FE being built at the start and additional forms of entry added later. For operational reasons, secondary schools would tend to be phased in blocks no smaller than 4FE.
- 3.41 Constructing and opening schools in phases will help to ensure that school buildings are not constructed before they are needed; mothballing of unused school buildings has operational costs and challenges. By expanding schools as demand arises, this helps to ensure school places meet the needs of the children living within Otterpool Park, rather than attracting children travelling from elsewhere. Building schools in phases does add to construction cost, so the advantages and disadvantages will be considered.

- 3.42 The school designs may need to be planned with phasing or future expansion in mind so that core facilities are delivered early on (e.g. halls, kitchens, administrative blocks) with later phases predominantly delivering extra classrooms. Campus designs provide the most flexibility and will be considered if appropriate and advantageous. The size of the school will be a key consideration in design – larger schools should be designed with management, safety and effective circulation in mind.
- 3.43 The school design will need to facilitate cost effective phasing that does not significantly disrupt the schools' operation, for example:
- Block structures and layouts that allow future construction phases to be isolated from operational areas of the school
  - Access arrangements for construction vehicles that are segregated from children's pedestrian routes
  - Construction methods that limit noise, dust and other disruption.
  - Approaches that allow construction to be completed over the summer months.

#### *Phased opening*

- 3.44 Children moving schools in the middle of a phase of education is relatively rare. Because of this, new schools tend to open and fill up from the bottom, with Nursery, Reception and Year 7 opening first, adding academic years in succession every year after that.
- 3.45 However, a new settlement on this scale may attract a disproportionate number of children moving schools in the middle of a phase of education. To address this, schools could have multiple entry points and multi-age groups in the early phases of development.
- 3.46 Children could start in the middle years of primary school and they may be in a class with other children who are slightly older or younger than themselves, as long as they are at the same Key Stage of education. A Key Stage is one of the four "blocks" of years around which the national curriculum is structured. At the end of each Key Stage, the teacher formally assesses children's performance. Using multi-age classes in this way can be referred to as vertical teaching.
- 3.47 Decisions about design, layout, construction methodology and phasing will be made at Reserved Matters stage for each school coming forward. Operational choices, such as the use of vertical teaching, will need to be made in partnership with KCC and the school operator.

#### **Approach to monitoring**

- 3.48 Otterpool Park will only deliver enough school places to meet the needs of children on-site. Where it can be demonstrated through the monitoring procedures that no further school places are needed, delivery of further school sites or floorspace will not be triggered. This is to minimise the delivery of surplus school capacity (which can have operational and cost challenges) and to reduce the potential for children to travel on-site to school from elsewhere.
- 3.49 Every six months, the Applicants will provide the following information to the District and County councils to inform the school place demand monitoring process:
- A plan showing extent of land disposed and/or commenced

- Dates of agreement of terms, disposal and parties involved
- Homes occupied across the site by location, tenure and size
- Homes commenced across the site by location, tenure and size

3.50 KCC will record information on:

- The total Number on Roll of each school by academic year
- The number of applications by preference to each school every year
- The catchment of each school (i.e. postcodes of pupils subject to appropriate data protection)

3.51 This information will be made available to the Applicants on an annual basis.

3.52 The Applicants will also undertake a survey of new residents when 1,000 homes have been occupied (not including older persons housing). This survey will sample the home size, tenure and number and age of children in the new homes. This data will be shared with KCC and will inform the school-place monitoring process for the later phases, including the triggering of safeguarded floorspace.

#### Triggering of safeguarded floorspace

3.53 The monitoring process set out above will ensure that there is extensive information available on occupancy and child yield to inform the school planning in the latter years of construction.

3.54 Within 30 days of the opening of the first form of entry of any primary school (apart from the first primary school) the Applicants will submit a full schedule of:

- Homes occupied across the site by location, tenure and size
- Homes commenced across the site by location, tenure and size
- Homes still to be commenced by location, tenure and size and estimated delivery date

3.55 Within 30 days of the opening of the first form of entry of any primary school (apart from the first primary school) KCC will collect a full schedule of:

- The total Number of Roll of each school by academic year
- The number of applications by preference to each school every year
- The catchment of each school (i.e. postcodes of pupils subject to appropriate data protection)

3.56 This evidence will be used to establish the “Final Yield” for the development. This Final Yield will, in conjunction with the phasing plan agreed at this stage, establish the timing of the triggers for the safeguarded floorspace.

3.57 Safeguarded floorspace may be triggered prior to the completion of all the schools in the masterplan, where there is demonstrable evidence that the expansion of a particular school is better in school planning, education and placemaking terms than provision of another school.



3.58 Where there is demonstrably no need for further expansion of schools into additional safeguarded floorspace - or non-safeguarded sites - this land may be transferred to alternative uses under the terms set out in the S106 Agreement.

### **The Section 106**

3.59 The Section 106 Agreement will set out the legal terms under which schools will be funded and delivered and under which school land will be leased to school operators. It will set out the obligations committed to by both KCC and the Applicants.

3.60 The Section 106 agreement will:

- Establish the legal definition of the schools
- Establish a School Site Specification including access and servicing arrangements.
- Establish the terms under which schools will be granted access to playing fields/off-site sport facilities where this is relevant.
- Establish the terms under which the lease or freehold of the school land will be transferred and to which parties.
- Define what is meant by a safeguarded land or safeguarded floorspace and the legal process under which the delivery of this space will be triggered and released, if not required
- Establish the approach to trigger dates for buildings, land and/or funds for the delivery of schools.
- Establish the scale of school payments and if and where these will be applicable; the indexation rate that will apply to any such payments.
- Set out KCC's covenant with respect to progressing matters related to the schools and school delivery.
- Establish the Monitoring Scheme.

# Healthcare

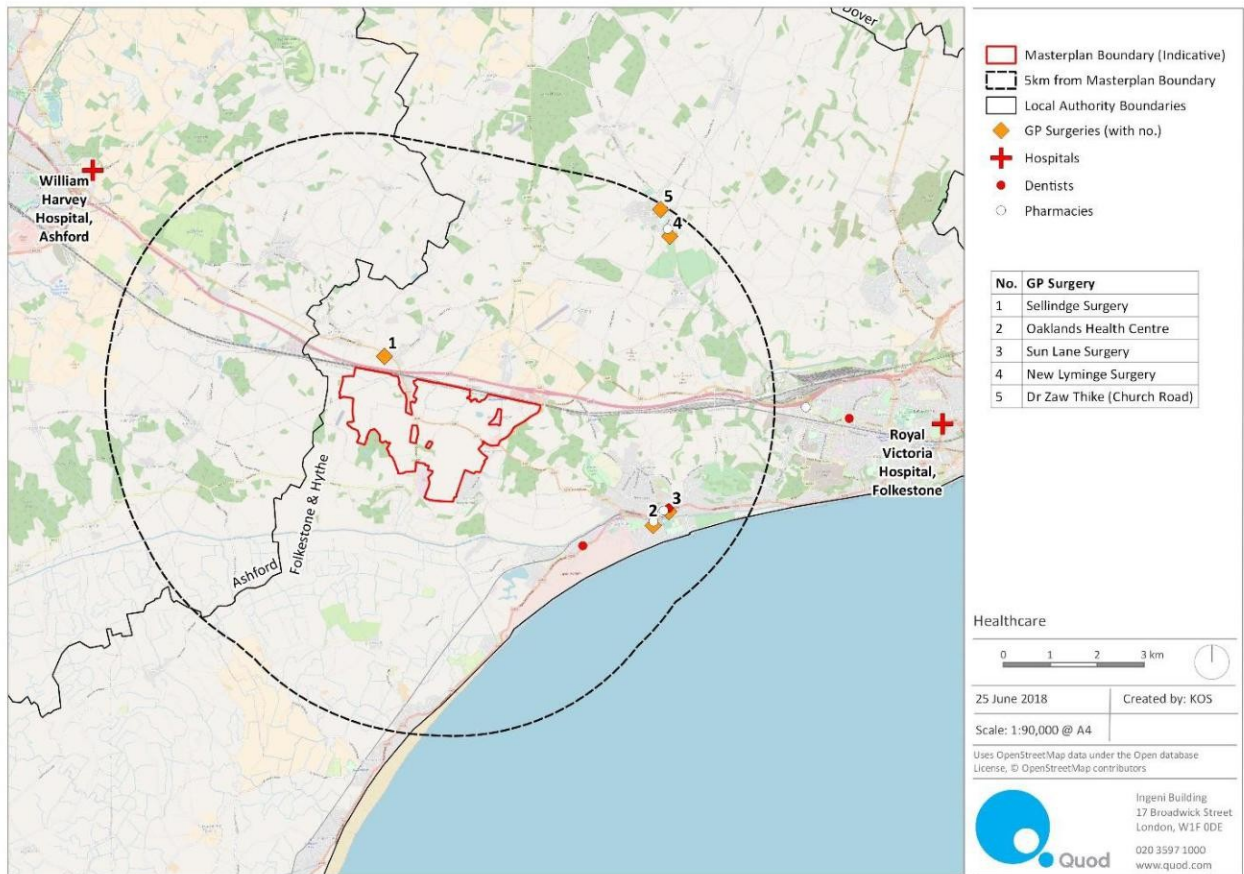
## Baseline

4.1 This section examines existing healthcare provision near to the Otterpool Park Masterplan Area. This includes primary healthcare facilities within five kilometres, including General Practitioners (GPs), dentists and pharmacies. It also examines hospital provision at district levels. This analysis is based on publicly available NHS data.

### Primary Healthcare

4.2 There are currently five GP surgeries within 5km of the Masterplan Area. The location of these surgeries is shown in Figure 4.1 below. According to current NHS data<sup>12</sup>, these surgeries have a total of 17 GPs and 28,289 patients. The nearest GP surgery to the Masterplan Area is the Sellindge Surgery. This currently has three GPs and 4,890 patients.

Figure 4.1: Healthcare



4.3 A measure of effective GP provision is provided by NHS statistics on full-time equivalent (FTE) staff<sup>13</sup>. This measures how many GPs work in areas and individual practices, expressed as FTE roles. This takes account

<sup>12</sup> NHS Choices website, accessed June 2018.

<sup>13</sup> NHS Digital, Workforce data, December 2017.

of GPs working part-time or between multiple surgeries. There are currently 11 FTE GPs within the five GP surgeries listed above, with 2,576 patients per FTE GP.

- 4.4 The average for the NHS South Kent Coast Clinical Commissioning Group (CCG) (which covers Folkestone and Hythe district as well as Dover and Deal) is 3,000 patients per FTE GP, while the average for the NHS Ashford CCG is 2,560 per FTE GP. By contrast, the average for the NHS South East region is 1,980 per FTE and GP and for England as a whole is 2,060 per FTE GP.
- 4.5 This suggests that there are relatively high patient-to-GP ratios locally; however, these are reflected across the surrounding districts. Broadly speaking, the NHS uses a benchmark of 1,800 patients per GP for planning purposes. Based on this benchmark there is no surplus capacity for new residents in existing surgeries in the local area.
- 4.6 There are currently four pharmacies located within 5km of the Masterplan Area (three in Hythe and one in Lyminge). There are two dentist surgeries located within 5km, both in Hythe.

#### *Specialist and hospital care*

- 4.7 There are two hospitals located about 10km from the Masterplan Area. These are the William Harvey Hospital, Ashford and the Royal Victoria Hospital, Folkestone. The William Harvey Hospital operates an Accident and Emergency department (A&E), which is approximately a 12-18 minute peak time drive from the Masterplan Area. The William Harvey Hospital also operates a range of specialist care departments including a maternity department and general and specialist surgery. The Royal Victoria Hospital is approximately a 12-20 minute drive from the Masterplan Area and has a minor injuries unit as well as some specialist services including diagnostic services, mental health care, children's and adolescent services and other outpatient services.
- 4.8 These hospitals are run by East Kent Hospitals University NHS Foundation Trust, which also runs hospitals in Dover, Canterbury and Margate. This Trust, together with NHS organisations in Kent, KCC and Medway Council, is currently examining ways of reorganising hospital care in East Kent. A major part of the strategic plans produced by these organisations involves centralising and consolidating emergency and high-risk surgery and specialist care in East Kent.
- 4.9 Currently, two options are being examined. The first involves consolidating A&E services in East Kent at an expanded A&E department at the William Harvey Hospital in Ashford as well as at an expanded A&E in Margate, with the closure of the A&E in Canterbury. The second option would involve consolidating A&E services at an expanded Kent and Canterbury Hospital in Canterbury, with the closure of A&Es in Margate and Ashford; the William Harvey Hospital would instead have a 24/7 GP-led Urgent Treatment Centre along with diagnostic services, day surgery and outpatient services. The second option is reliant on a developer contribution of land and infrastructure in Canterbury and would be subject to planning approval. A decision has not yet been made and these options are due to be consulted on later in 2018.

### Expected demand for new facilities

- 4.10 FHDC has consulted with the South Kent Coast and Ashford and Canterbury Clinical Commissioning Groups. The expected demand for new GPs at Otterpool Park is based on the assumption that a GP serves 1,800 – 2,000 people<sup>14</sup>. Based on an average household size in Kent of 2.16 people<sup>15</sup>, 8,500 homes would generate demand for up to 10 FTE GPs. 10,000 homes would generate demand for demand for 12 GPs. These GPs would require c.2,000 sqm GIA for standard operations. The CCGs have suggested that an additional 1,000 sqm GIA would be required to provide wider local care services which could include specialist clinics, testing services, physiotherapy, etc.
- 4.11 There is the possibility that there could be two or three smaller practices on-site but, in general, larger practices are more sustainable, easier to manage and able to support a wider range of auxiliary services. The NHS currently has a preference for providing as many services as possible in primary care settings in the community (and not in hospitals) which has benefits for patients and for cost reduction.

### Proposed Approach

- 4.12 The Applicants want health and wellbeing to be embedded in the approach to design and delivery at Otterpool Park. This includes aiming to provide excellent primary care facilities on-site. It also includes a wide range of other design and management aspects. These wider aspects of health are addressed in the Health Impact Assessment for Otterpool Park.
- 4.13 The CCGs have an ambitious vision for the Garden Town, which could include providing innovative, world-class new facilities that could serve both a local and strategic need in the form of a Treatment Centre or Multispecialty Community Provider (more detail below).
- 4.14 The Development Specification includes up to 12,980 sqm GEA of healthcare floorspace. The likely need required as a minimum to provide primary care facilities is 2,000-3,000sqm GIA (for 10,000 homes), so the amount provided is well in excess of what is required to mitigate the impacts of development and provides an opportunity for additional services.
- 4.15 The proposals include one large practice, which will be located in the town centre. In order to retain flexibility, three other smaller sites have been allocated for potential community floorspace, which could include healthcare. Whilst the both the Applicant and the CCGs want to retain flexibility, it is likely that a one larger centre will be the preference.

### *Relationship with Sellindge Surgery*

- 4.16 Sellindge Surgery is the closest existing surgery to the Site. The continued sustainability of Sellindge Surgery is very important and will be considered as part of any new provision at Otterpool Park. Engagement with surgery management is underway. The CCG will explore options for Sellindge Surgery to operate in part or in full from the new site which will increase the capacity of this surgery to meet the needs of both the existing and the new community.

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<sup>14</sup> Strategic Planning - Duty to Co-operate; Shepway District Council (SDC) and NHS (NHS); Note of meeting on 5th January 2017

<sup>15</sup> Census 2011

- 4.17 The CCGs will take careful consideration of the impact of any change in provision on the existing community as part of the decision-making process.

#### Delivering a Treatment Centre or Multispecialty Community Provider

- 4.18 The NHS is prioritising primary care, care in the community and interventions to help people manage long term health conditions more effectively at home or with their GP, rather than in hospital.
- 4.19 This approach is intended to relieve pressure on hospitals and treat illness early, before it becomes acute and before patients require A&E. This reduces cost and significantly improves patient outcomes and wellbeing.
- 4.20 At Otterpool, there is a significant opportunity to provide a GP practice with extended services. The exact model for delivering these services will depend on the strategic plans, objectives and funding available to the CCGs at the time of detailed planning permission and delivery. The delivery model could be Multispecialty Community Provider (MCP) or a Treatment Centre.
- 4.21 It is expected that the healthcare offer, whatever model it will take will also include dentists, opticians and pharmacies which will come forward in a mixture of private and NHS settings according to the NHS licencing programme for these facilities (which includes an up to date needs assessment).

#### MCPs

- 4.22 Under this new care model outlined in the *NHS five year forward view*, GPs practices would come together in networks or federations and collaborate with other health and social care professionals to provide more integrated services outside of hospitals. This might include GPs working with some specialists currently working in acute hospitals, as well as nurses, community health services and social

## Encompass - a new model of care

The new model of care being developed by Encompass is a Multispecialty Community Provider (MCP).

Led by the Whitstable, Northgate and Saddleton Road medical practices, this has already expanded to include an additional 13 practices across the Canterbury and Coastal Clinical Commissioning Group (CCG) area.

The new model will ensure health and social care is integrated and based around local needs and patients can receive more of their treatment in their communities, rather than having to travel to hospital. It will involve joint working across professions and organisations to improve efficiency and reduce duplication.

Encompass wants to create a more cost and clinically effective service by treating patients closer to home using specialist GPs, allied health professionals and community based consultants. There will also be a greater use of information technology, to enable people to maintain their independence through self-care and self-management, and a shared single electronic patient record. Paramedic practitioners are already accessing this using an iPad on home calls in Whitstable.

Focusing on prevention will ensure that the whole health and social care system is working seamlessly to support people to stay well.

The MCP operates on an inclusive basis with a federation of GPs working in partnership with everyone involved in health and social care, including the voluntary sector and patient groups.

(<http://www.encompass-mcp.co.uk/about-us/>)

workers. Over time, GPs and their partners might take on responsibility for the health budget for their whole population<sup>16</sup>.

- 1.1 MCPs are based around 'care hubs' which typically serve a community of around 30-50,000 people. These can be combined together into one umbrella MCP, and the 14 initial MCP 'vanguards' serve a minimum population of about 100,000. An MCP covers the sum of registered lists of participating practices; it is possible for more than one MCP to operate in an area, although more integrated MCPs hold a single whole-population budget for all the services it provides.
- 1.2 Features of MCPs include data sharing which helps integrate out-of-hours and urgent care with GP practices, allowing patients to be easily sent to the right provider. They also increasingly provide alternatives to face-to-face appointments like phone or video consultations.
- 1.3 The following text sets out the principle behind MPCs:

*"As a patient or a clinician, you would not choose to recreate from scratch the historical partitions between primary, community, mental health and social care and acute services. The boundaries make it harder to provide joined-up care that is preventative, high quality and efficient. The MCP model dissolves the divides. It involves redesigning care around the health of the population, irrespective of existing institutional arrangements. It is about creating a new system of care delivery that is backed up by a new financial and business model<sup>17</sup>."*

- 4.23 MCP "vanguards" are the first areas to be trialling this new model of care. *Encompass* is the vanguard the covers Whitstable, Faversham, Canterbury, Ash and Sandwich (see pullout box). The CCGs consider that a similar model could be applied at Otterpool.

#### *Treatment Centres*

- 4.24 NHS England published '*Urgent Treatment Centres – Principles and Standards*' in July 2017. Urgent treatment centres are community and primary care facilities that are open at least 12 hours a day, are GP-led, staffed by GPs, nurses and other clinicians, and have some diagnostics facilities. They should also integrate with existing primary care and urgent care as well as NHS 111.
- 4.25 Urgent treatment centres encompass current Walk-in Centres, Minor Injuries Units, GP-led Health Centres and other similar facilities. They are ideally co-located with primary care facilities including GP extended hours / GP Access Hubs. They may also be co-located with other services including mental health services, community pharmacy, dental, social care and the voluntary sector.
- 4.26 A Treatment Centre may also include a private, specialist wing which deals with a specific type of care or procedure and serves a wide catchment – for example hip replacements. Such a centre could provide private facilities directly to the public or via NHS commissioning.
- 4.27 A Treatment Centre could work instead of or alongside the provision of an MCP, depending upon the commissioning plans of the CCG at the time of delivery.

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<sup>16</sup> King's Fund, <https://www.kingsfund.org.uk/projects/nhs-five-year-forward-view/multi-speciality-community-providers>, accessed online 11.10.18

<sup>17</sup> NHS England, 2016. The multispecialty community provider (MCP) emerging care model and contract framework

## Construction and delivery

- 4.28 The Applicants expect that the health facilities will need to be phased in some way. Phasing is important to reduce running costs/management liability in the early years. It can also assist with capital cashflow in the years before revenue from the sale of homes builds up.
- 4.29 There are several ways to phase a new health centre. The exact model for Otterpool Park has not been decided at this early stage and will be the subject of discussion and agreement between the Applicants, FHDC and the CCGs as part of the 106 agreement and going forward. Phasing options include:
- Before c. year 3 or 4 years of construction, a GP could operate temporarily from another building (e.g. a community or commercial building) provided that the facilities and setting are appropriate to provide the quality of service and care required.
  - A portion of the health centre could be built the early years, with space that is not required for healthcare to be let out on a short-term lease to other retail or commercial uses.
  - Decanting of some or all of Sellindge Surgery's facilities to the new site (subject to the considerations outlined above) could help with sustainability of a practice in the early years.
  - Delivery of a wider range of additional services (education, training, social care, specialist care) etc could support the sustainability of the surgery in the early years.

## Social Care

- 4.30 Provision of social care services and specialist housing to allow people with long-term limiting illness or age-related disabilities to live healthily and independently is priority for health services across the UK. Good provision of social care support reduces hospitalisation, reducing costs and improving health outcomes for people with long term conditions.
- 4.31 Otterpool Park is expected to deliver up to 648 specialist homes for older people (in the 8,500 home scheme). The extended services at the new health centre are expected to include care services for older people. The Applicants will explore options for social care, extra care specialist housing and integrated care pathways through partnerships within the local authority (and county) departments, the NHS and with specialist housing and service providers.
- 4.32 The Applicants will work with KCC and CCG through the Health and Wellbeing Steering Group (see below) to set out how objectives for integrated care will be achieved.

## GP Recruitment

- 1.4 The Kent and Medway Sustainability and Transformation Plan (STP) from 2017 points to shortages of staff and difficulties recruiting and retaining as crucial challenges for the NHS across Kent. In particular it notes that there are very high levels of vacancies at primary care level, with an estimated 136 GP vacancies (12% of the total) across Kent and Medway. There are also problems recruiting practice nurses and mental health service staff. This issue has been raised by community stakeholders in the context of the proposed development at Otterpool – and the healthcare provision the new community will need.

- 4.33 The STP states that the recruitment and retention of primary care staff (especially GPs) is a priority area for focus. The STP suggests a medical school might help overcome recruiting issues, since most doctors hold their first jobs in the same region as either their home, medical school or place of training.
- 4.34 Publications by South Kent Coast CCG and Ashford CCG both refer to recruitment issues as key challenges facing primary healthcare. The South Kent Coast Operational Plan 2017-19 refers staffing issues such as growing reliance on agencies and locums and states that the CCG has lost 20 GPs over 30 practices in two years. The document states an ambition to recruit GPs and nurses; in terms of solutions, it points to county-level STP ambitions to transform and consolidate services including rolling out new primary care models.
- 4.35 The Ashford and Canterbury & Coastal CCGs Primary Care Operating Plan 2017-19 also refers to a need to recruit primary care staff across all levels. The report states the CCGs will produce Workforce Operational Plans to identify gaps in practices and to identify recruitment solutions. It states that changes in primary care such as more patients being seen by nurses or pharmacists when possible can reduce pressure on GPs.
- 4.36 The operating plan sets out some steps to support recruitment and training, including attending recruitment fairs, working with Christ Church Canterbury University to develop medical training, and increasing placements and apprenticeships.

#### *Kent and Medway Medical School, Canterbury*

- 4.37 Canterbury Christ Church University and the University of Kent plan to open a joint medical school in Canterbury, which will be the first in Kent. This was granted government funding in March 2018 and will open in September 2020 with an initial intake of 100 undergraduates. Brighton and Sussex Medical School will act as a 'parent' institution to oversee teaching and organisation.
- 4.38 It will offer a five-year undergraduate medical course. The first two years will be based at university (on the campuses of both universities in Canterbury), with 'early clinical placements' in primary and community care settings in Kent and Medway for one day each week. Years 3-5 are clinical years, with students placed in secondary care setting such as in hospitals in Kent and Medway.
- 4.39 The universities have promoted this new medical school as supporting local healthcare provision in Kent and Medway. It aims to work with local health organisations and address workforce shortages by developing doctors in specialities that are under-represented, with placements in community, primary and hospital care. The placement model will place students in community-based 'hubs' in the first two years (starting 2020).
- 4.40 The first undergraduates will graduate with degrees in Bachelor of Medicine and Bachelor of Surgery in 2025. To become GPs, they will then need to complete two years of foundation training followed by three years of specialist GP training. The universities have not yet detailed what postgraduate training they will develop.

#### *The Role of Otterpool*

- 4.41 There are four key challenges which have been raised in respect to GP recruitment in rural areas in the UK:
- The need for partners and other family members to be able to find work where GPs are posted



- The desire for GPs to work in larger, dynamic practices where there may be opportunities for continued learning or specialisation
- The relative likelihood for GPs to stay in the area where they trained (which means that places without any medical training facilities may struggle more to recruit.)
- The need for high quality places to live

4.42 Otterpool Park presents an opportunity to attract GPs to FHDC. The new homes will provide a wide range of possible options for GPs and other health and care staff to rent, part own or own their homes. The setting of a Garden Town will provide a high quality environment which will attract skilled workers, including healthcare professionals. The employment space that will be delivered on-site, as well as the good transport connections, will help to ensure partners and families will also have employment opportunities.

4.43 The potential for an innovative and extended healthcare model such as an MCP or Treatment Centre will help to attract healthcare professionals and will offer opportunities for training and development, which will dovetail well with the new Kent and Medway Medical School.

4.44 The CCG is exploring opportunities for the Otterpool Park Health Centre to have an on-site education facility with potential for GP, health worker and social care training. The Health and Wellbeing Steering Group will continue to explore this potential going forward.

#### **The Otterpool Park Health and Wellbeing Steering Group**

4.45 The decision-making involved to deliver health provision for Otterpool Park will require a coordinated approach between stakeholders. The CCGs have suggested that a Health and Wellbeing Steering Group be set up to ensure that the appropriate stakeholders are involved in the decision making process from now until delivery and that milestones are set and met.

4.46 The Health and Wellbeing Steering Group will include representatives from the CCGs and may also include health, social care, housing and planning representatives from FHDC and KCC; representatives from the hospital trust and representatives on behalf of the Applicants. The Applicants support this approach.

#### **The Section 106**

4.47 The Section 106 Agreement will set out the legal terms under which GP surgeries will be funded and delivered and under which GP land will be leased to operators. It will set out the obligations committed to by the CCG and the Applicants.

4.48 The Section 106 agreement will:

- Establish the legal definition of the GP surgeries and land
- Establish a GP Site Specification including access and servicing arrangements.
- Establish the terms under which the lease or freehold of the GP land will be transferred and to which parties.
- Establish the approach to trigger dates for buildings, land and/or funds for the delivery of GPs.
- Establish the legal process under which this land or floorspace will be released, if not required
- Establish the scale of GP payments and if and where these will be applicable; the indexation rate that will apply to any such payments.

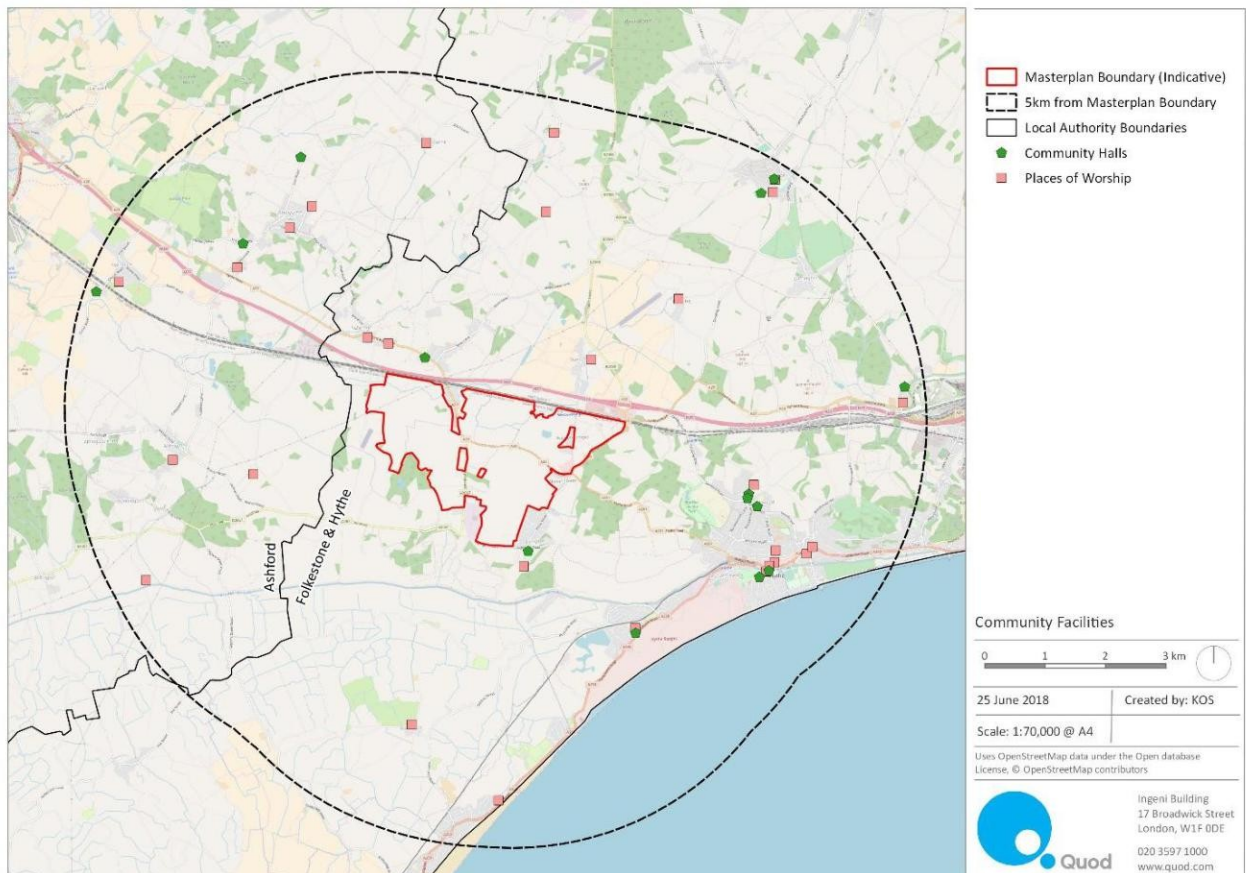
- Set out FHDC and the CCG's covenant with respect to progressing matters related to the GPs and GP delivery.

## Community Uses

### Baseline

- 5.1 Otterpool Park Garden Town will be a new town within a historic area. There are a number of established communities close to the Masterplan Area, from historic villages with ancient Roman roots like Lymgne to established towns like Hythe.
- 5.2 Several local community halls are located in surrounding areas. The two nearest halls are the Sellindge Village Hall and the Lymgne Village Hall. These are run by Sellindge and Lymgne Parish Councils respectively and are available to hire for community uses. For example, regular activities in Lymgne Village Hall include parish council meetings, karate, table tennis, dance and youth club meetings. There are also a large number of places of worship belonging to multiple congregations, including several historic parish churches. Figure 2.4 below shows existing community halls and places of worship within 5km of the Masterplan Area. There are currently 14 community halls and 28 places of worship within 5km of the Masterplan Area.
- 5.3 Evidence from community consultation has demonstrated that the existing community halls are successful and popular. The proposals at Otterpool Park should not aim to compete with these facilities but to provide alternative or complementary facilities.

Figure 2.4: Community Facilities



### Expected Demand

- 5.4 There are no set metrics for how much community floorspace needs to be delivered to meet the needs of a new community. A benchmark of 0.15-0.30 sqm per person can be used to calculate the need for community space. This equates to a small 100 sqm village hall per 650 people – or 3,750 sqm - 7,500 sqm for 10,000 homes. The Development Specification for Otterpool Park includes up to [8,000 sqm] of flexible community use floorspace. The shared use of school halls and other facilities can also provide excellent facilities for the community to meet, to hold events and to provide services such as adult education.

### Proposed Approach

- 5.5 In general, the management, flexibility and sustainability of community floorspace is more important than size or number of buildings. It is important to work with the community and with public, private and voluntary sector stakeholders to understand community needs and to carefully plan what facilities are needed, who will use them and how they will be funded (and allow for how this could change over time).
- 5.6 At this stage in the planning process, it is too early to have a detailed understanding of these needs. Therefore, the Development Specification includes a broad allocation of floorspace which could be used for community use. Relevant community uses could include:
- A community hall
  - A place of worship
  - A youth centre
  - An education centre/training centre/library
  - Exhibition or archive space for local heritage and archaeology.
- 5.7 The detailed planning process will require the Applicants to engage with the FHDC, KCC, local parish councils and other local stakeholders and future operators to understand need at the time of delivery. The primary objective of the approach at Otterpool Park is to ensure that any community floorspace:
- Is flexible to meet a wide range of needs or changing needs over time
  - Is sustainable, with long term management, maintenance and funding considered and secured as part of the Long Term Stewardship of the Garden Town as a whole
  - Does not threaten the sustainability of existing successful community facilities – working with them rather than competing with them.
  - Considers opportunities to use existing community capacity (such as successful existing community organisations) to help to get the new facilities started and build on local experience especially in early years.