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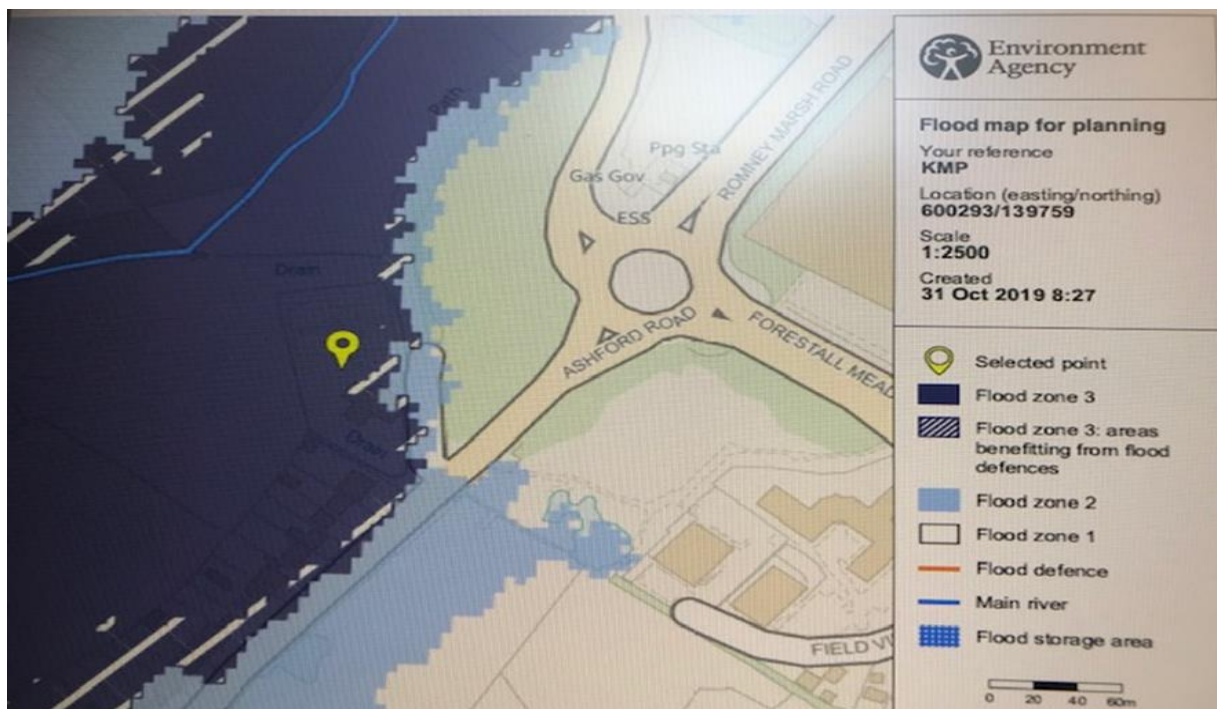
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Kingsnorth Medical Practice; Supporting statement.

**Background:** Kingsnorth Medical Practice currently leases premises on the rapidly growing southern fringe of Ashford. The lease has just under 7 years until expiry. There is no out of hospital provision in the area. KMP has been a chief proponent of remote consultation, operating telephone triage for 20 years and “total triage” for the last 5 years.

The practice has outgrown its current premises (16 pts/sqm) by current NHSE standards (target is 12.5 pts/sqm) and manages to keep an open list by optimising the use of technology for remote consultation and innovative sharing of clinical space. It is one of four CQC rated “Outstanding” practices in Ashford and has higher than average patient satisfaction and clinical quality indicators. We are a training practice and has been successful in GP recruitment and retention but this has been limited but current space constraints.

KMP’s current site is within a flood plain and this compromises development on the site. The practice has performed a detailed independent feasibility which ascertained the building could be only cope with a 200m<sup>2</sup> extension and the site would continue to be compromised by regular flooding. KMP received 5 flood warnings from the environment agency in Dec 2019 and 3 in Feb 2020 and in the last 2 months has had 6 further. see map and current location marked with yellow pin below.



**Aspiration:** The practice has long held the view that relocation to a new site with state of the art premises was an urgent necessity.

We have written to (and had meetings with) ABC Planners and the boroughs Health and Wellbeing board over the last decade in an attempt to identify a suitable site on which to develop a new facility preferably within the confines of Kingsnorth.

We plan to accommodate both existing patients and the the new developments at Kingsnorth Green and Court Lodge as well as and other local windfall developments within the current in the practice boundary. The proposal would allow the practice to immediately extend its boundary to the east of the railway line to incorporate current residence of “Bridgefield” and Park Farm south east.

Chilmington Green was removed from the current practice boundary to protect services to currently registered patients. Kingsnorth Medical Practice historically had a practice boundary which included the whole of this proposed South of Ashford Garden Community area. In 2017 Kingsnorth, with limited space in its current premises, and with the support of its PPG, withdrew its boundary to exclude Chilmington Green in order to protect itself from uncontrolled growth and to allow the maintenance of excellent quality care to its current patient population. There *may* be an opportunity for the CCG to support Ashford Borough Council in renegotiating the Section 106 Agreement for this development to expand the capacity of the proposed facility at a later date.

The CCG’s estates strategy accepted that “New or expanded premises are required to manage the population growth in that area as there is no additional capacity within existing premises”.

**Scoping:** To this end KMP set about scoping possible relocation sites within the area and approached the local planners, parish councilors, landowners and developers. A long list and **short list** of options were considered;

**Option 0: Business as usual; Yes**

**Option 1: Small scale reconfiguration on existing site; Yes (as per CCG sponsored report on site 200m2 extension)**

Option 2: Large scale extension to existing site; No (flood plain issues prohibit as per independent site survey)

**Option 3: New build on Court Lodge development; Yes**

**Option 4: New build in Kingsnorth village, Mill Hill; Yes**

Option 5: New build on “Entrance Park”. No (Borough Council approached in 2018 land allocated for recreation and ABC not minded to re-designate for healthcare.)

Option 6: New build on Farmers field Magpie Hall Road; No (discussed with farmer but land showing as subject to flooding as per Environment agency flood map )

Option 7: New build on land currently in multiple ownership on edge of Court Lodge site; No (discounted as no access to site)

**Pending a formal options appraisal the Practice identified a preferred site option 4 and began working up a scheme with Jarvis Homes.**

**Consultation:** In co-operation with the PPG and staff, the practice held a **formal online consultation** with reaching out via SMS to all on the patient list. Over 8,000 text messages were sent with a link to an online survey on the **option 4** draft proposal in June/July 2020.

**Over 94% of the 2054 patient respondents were in favour of the proposal.**

The response rate of 25% is huge in comparison to most online surveys and the fact almost 50% of the respondents took the time to comment, shows how passionately our patients feel about the proposal.

KMP PPG and KMP Staff were universally supportive of the proposal following online meeting in June 2020.

Kingsnorth and Shadoxhurst Parish councils were briefed on the proposal.

Ashford Stour PCN Board (of which KMP is a member practice) was unanimous in its support for the proposal. They are aware that the evolution of Local Care depends upon the stability of Primary Care and this proposal builds on that foundation locally.

Recruitment retention and training; Though this is a proposal for a GMS Training Practice, the new premises have the potential to be a “Health Campus” for Southern Ashford and be transformational, not only in terms of service delivery, but also in terms of recruitment and retention for medical and paramedical staff, which would be the backbone of the future NHS in the community. Such a transformative project is absolutely necessary in order to incentivise recruitment. Stour PCN (supported by KMP) have been accommodating medical students for community placements from the new Kent and Medway Medical School in Canterbury since last year.

**Support:** The CCG agreed and granted the practice permission to proceed to OBC in 2021 after accepting the Project initiation Document in late 2020.

**Appraisal:** With this permission the practice commissioned a formal site options appraisal with a panel of local stakeholders who scored the 4 shortlisted options.

1 Do Nothing

Services will continue to be offered with no expansion or integration. There would be no ability to provide additional services and no capacity to meet future growth from housing developments or indeed the current demand. Retained as a point of comparison as it will not address the objectives or satisfy the CSFs.

2. Extension to existing site. This would allow limited integration and permit some extra space to absorb upcoming population growth and deliver local care services. It removes need to find, negotiate and buy land and hence not increase cost due to purchase. It would also minimise disruption to service delivery. However the premises would quickly become too small for the increased population.

3. New build on alternative Court Lodge. Land is at a premium and there is a lack of suitable sites in the Kingsnorth locality. Financing the acquisition of land would be an additional cost and this would be achieved by forgoing any section 106 contribution in exchange for land. There would be added pressure on the timescales for delivery due to the scale of the development. The Kingsnorth Practice is also reluctant to relocate due to the location of the potential land available which would take the practice out of Kingsnorth and also the limited public transport services. Due to these reasons this was not considered further.

***Kingsnorth Medical Practice has been rated “Outstanding” by the Care Quality Commission***

**4. New build on Kingsnorth Green. Land would be made available at no cost and the potential for further extension in the future exists should a local care project be required. The site is 500 m from the existing premises and would benefit from the good transport services. Whilst there are planning issues to be resolved, the project could be delivered within 3 years and hence accommodate the already increasing population.**

The qualitative benefits appraisal was undertaken and summarised the views of specific members on the major qualitative benefits of the scheme. A weighting and scoring exercise was carried out as described below following discussions with the main stakeholders in the project. The appraisal panel consisted of;

Dr James Kelly	Partner of Kingsnorth Medical Practice
Sharon Young	Staff representative
Cheryl Vander	Chair of Patents Participation Group
Dr Sadia Rashid	PCN Clinical Director
Rt Honourable Damien Green MP	MP for Ashford
Neil McElduff	Estates consultant

The benefits appraisal meeting then considered the relative importance of the benefits criteria, and agreed numerical weightings for them:

Benefit	Weighting %
Supports the development of the PCN	5
Improves sustainability of practice	15
Allows delivery of core general practice to new population	15
Enables 7 day a week services and delivery of wider range of services closer to patients home	10
Improves recruitment and retention of staff	10
Supports the modernisation and development of modern fit for purpose premises and future proofing of key infrastructure	15
Is accessible for practice list population (transport links)	15
Is deliverable	5
Allows for future growth	10
	100

Each project was scored (0-10) per option, and the results can be seen in the table below. The parameters for the scoring was agreed to be as follows:

0-2 Does not meet requirements 3-4 Below satisfactory 5-8 Satisfactory 9-10 Exceed expectation

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Benefit	Option1 Weighted Score	Option2 Weighted Score	Option3 Weighted Score	Option4 Weighted Score
Supports the development of the PCN	10	25	40	<b>45</b>
Improves sustainability of practice	15	60	120	<b>135</b>
Allows delivery of core general practice to new population	20	60	120	<b>135</b>
Enables 7 day a week services and delivery of wider range of services closer to patients home	60	60	80	<b>90</b>
Improves recruitment and retention of staff	10	50	80	<b>90</b>
Supports the modernisation and development of modern fit for purpose premises and future proofing of key infrastructure	15	60	120	<b>120</b>
Is accessible for practice list population (transport links)	120	120	75	<b>120</b>
Is deliverable	25	40	15	<b>30</b>
Allows for future growth	10	40	60	<b>80</b>
	285	515	710	<b>845</b>
Rank	4th	3rd	2nd	<b>1st</b>

**Preferred option** Option 4 was found to be the preferred option and scored highly in comparison to other options available. The option proposes a new build on a site close to the current surgery to meet capacity for current demand, from future population growth and develop space for integrated care provision. It meets both national and local strategic visions, allows for the provision of the preferred model of care and preferred business model to be implemented. It can provide a single site solution for local care which facilitates optimum operation by removing the constraints on services of small buildings. The project will add significant new space to the existing building size. This space will be used for what are currently defined as GMS services (including new PCN activities).

**Summary;** The (Jarvis homes) outline planning application, brings a “once in a generation” opportunity to secure a “Landmark” healthcare and educational facility within this most rapidly expanding suburb of Ashford. The benefits to both new and existing borough residents would be far reaching and has the full support of our patients, staff, neighbouring practices and our Local MP. To refuse this application (on the grounds of 15 extra homes on this site) would seriously damage capacity within our local NHS and the morale of all NHS workers who have stepped up during this current pandemic. We urge you to “see the bigger picture” and grant permission for this application.

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