

## **Planning Statement | Acute Healthcare Matters**

Local Authority Planning Reference: 21/01830/FUL

Planning Inspectorate Reference: APP/Q1825/W/24/3350905

Site Address: Land West of Hither Green Lane, Redditch, Worcestershire, B98 9AZ

Proposed Development: Residential development (Class C3) with a vehicular access point onto Hither Green Lane, play areas, public open space including footways and cycleways, sustainable urban drainage systems and all other ancillary and enabling infrastructure

Date of Statement: 24<sup>th</sup> October 2024

### **Acute Healthcare Contribution Summary**

#### **Summary**

This planning statement ("Statement") has been produced to accompany the already submitted consultation response of Worcestershire Acute Hospitals NHS Trust (the "Trust"). In short: if the Inspector were to allow the appeal, the Trust would expect a contribution within the section 106 Agreement to secure contributions<sup>1</sup> to mitigate the impact of the Proposed Development on its ability to provide healthcare provisions in the local area as follows:

<b>Healthcare modality</b>	<b>Number of events generated</b>	<b>Contribution required towards</b>	<b>Contribution required<sup>2</sup></b>
Emergency attendances at A&E	62	Cost of additional provision	£24,339
Emergency admissions	21	Cost of additional provision	£106,946
Follow up outpatient attendances	91	Cost of follow up outpatient appointments and emergency follow-ups and appointments for which admission is not required	£19,999
Maternity Care	74	Cost of additional provision	£10,063
Diagnostic examination attendances referred	53	Cost of undertaking diagnostic examinations on patients referred by GPs and emergency diagnostics	£28,947

<sup>1</sup>Calculated using DHSC NHSPS cost multipliers outlined in Appendix 1

<sup>2</sup>Using DHSC NHSPS cost multipliers outlined in Appendix 1

by GPs		and treatment only	
<b>Total Contribution</b>			<b>£190,295</b>

## **1. Introduction**

This Statement sets out the reasons for which the Trust is seeking a contribution towards mitigating the detrimental impact arising from the Proposed Development. In addition:

- Appendix 1
  - This will set out the additional healthcare that will be needed by the residents of the Proposed Development. It also contains a detailed calculation of the impact of the Development
- Appendix 2
  - This outlines the Trust’s statutory responsibilities to provide acute healthcare and the current acute healthcare planning context in Worcestershire.
- Appendix 3
  - This provides the policy support for the request to mitigate the impact.
- Appendix 4
  - This demonstrates how this request meets the tests set out in Regulation 122 (2) of the Community Infrastructure Levy (“CIL”) Regulations 2010.

## **2. Additional requirements for Land West of Hither Green Lane, Redditch, Worcestershire, B98 9AZ**

### **2.1. Emergency attendances at A&E**

- 2.1.1. By calculation, the Trust anticipates that the Proposed Development of 214 homes would create 62 Emergency attendances at A&E.
- 2.1.2. Emergency attendances at A&E include people presenting from all age groups of the population.
- 2.1.3. The A&E at Alexandra Hospital is closest to this proposed development. In an emergency, people are known to attend their nearest Emergency Department (“ED”), whether by ambulance or as “walk-in” attenders. However, some types of conditions will always be conveyed to Worcester Royal Hospital irrespective of the patient’s place of residence as some of the specialist services are not provided at the Alexandra Hospital.
- 2.1.4. A contribution is required towards increasing A&E capacity due to the Proposed Development.

### **2.2. Emergency admissions**

- 2.2.1. By calculation, the Trust anticipates that the Proposed Development of 214 homes would create 21 Emergency Admissions to hospital.

- 2.2.2. Emergency admissions occur when a person who attends A&E requires admission to a hospital bed and an overnight stay of at least one night. Emergency admissions occur amongst all age groups. Anticipated demand is an average across all ages and types of treatment.
- 2.2.3. Emergency admissions for the population of the Proposed Development will take place. Increasing demand means that we have been admitting more emergencies than the Trust has capacity to accommodate. This trend will be exacerbated because of the Proposed Development.
- 2.2.4. The rate of emergency admissions is driven by demographic trends and population health. The hospital meets resultant capacity issues by:
- ❖ Employing additional staff;
  - ❖ Increasing its use of consumables/drugs/clinical supplies;
  - ❖ Increasing its use of hospital equipment such as scanners, and laboratory equipment; and
  - ❖ Increasing bed numbers to reduce utilisation rates to safer levels.

It is anticipated additional capacity will be needed to accommodate additional emergency admissions generated as a result of the Proposed Development.

- 2.2.5. A contribution is therefore required towards additional emergency admissions capacity through expansion.

### **2.3. Outpatient attendances**

- 2.3.1. By calculation, the Trust would anticipate that the Proposed Development of 214 homes would create a demand for 91 additional outpatient appointments.
- 2.3.2. Outpatient appointments include:
- Follow up treatments and reviews post emergency admission, with or without a procedure
  - Assessment and treatment following GP referral, without admission to hospital, with or without a procedure
  - Assessments and treatment before or after planned surgery, with or without a procedure. NHS Trusts are currently paid on a “pay as you go” basis for first outpatient appointments and outpatient appointments with a procedure, so a contribution towards the cost of this type of appointment is not required
- 2.3.3. Outpatient appointments usually take place at a patient’s local hospital (in this case, it would be the Alexandra Hospital). Although, some clinics are held only at one of the Trust’s locations to make best use of specialist resources (whether they be staff or equipment).
- 2.3.4. Outpatient capacity and attendances are closely matched. Additional Outpatient

attendances will be generated by the Proposed Development. It is therefore anticipated additional capacity will be needed and will be provided by:

- Additional clinics
- Increased use of or new equipment
- Additional staff for the above

2.3.5. A contribution is required towards increasing Outpatient capacity to mitigate the impact that the Proposed development will create.

## **2.4. Diagnostic examination attendances referred by GPs**

2.4.1. By calculation, the Trust would anticipate that the Proposed Development of 214 homes will increase a demand for 74 additional emergency or routine diagnostic attendances referred by GPs.

2.4.2. Alexandra Hospital is the closest hospital to the Proposed Development and undertakes routine and urgent radiological examinations (e.g. X-rays, MRI, CT scans) requested by GPs. Capacity and demand for radiological examinations are closely matched.

2.4.3. The Proposed Development will create additional demand for GP requested radiological examinations and reports. This demand will be met by:

- Additional appointments
- Increased use or additional of equipment
- Additional staff for the above

2.4.4. A contribution is required towards increasing the necessary radiology capacity caused by the Proposed Development.

## **Appendix 1 – Additional healthcare need created by the Proposed Development**

### **1. Impact on Costs | Expanding existing hospital capacity**

These are the amounts that the Trust will require by way of a developer contribution towards the cost of increasing the capacity of healthcare within existing facilities:

- Urgent and Emergency attendance: £362
- Urgent and Emergency admission: £4,601 per admission
- Follow up Outpatient attendance: £202 per attendance
- Maternity care: £503 per episode of care
- GP referred diagnostic attendances: £215 per test

The Proposed Development will create an additional 301 patient events and a total contribution of £190,295 is needed from developers to create capacity to care for them. A calculation of the total amount required is shown at the end of this appendix.

The contribution will be spent on the additional cost of care associated with increasing the capacity of the Trust to cater for the care needs of the population of the Proposed Development.

### **2. Impact of inflation on contributions**

The contribution is calculated at 2023/24 values. A degree of inflation-proofing will be necessary if the Proposed Development is not built and occupied within two years of the date of the Section 106.

## Section 106 Calculation

### WORCESTERSHIRE ACUTE HOSPITALS TRUST

<b>Application References</b>	21/01830/FUL   Land West Of Hither Green Lane			<b>Expenditure Profile £k</b>		
<b>Local Authority District/LSOA/Reference Postcode</b>	Redditch 001A	E01032226	-	<b>2023/24</b>		
<b>Population Estimate (LSOA)</b>	2,813	<i>(based on ONS Mid 2022)</i>			<b>Staff Pay</b>	£363,425
<b>Local Authority Population Estimate</b>	609,216	<i>(based on ONS Mid 2022)</i>			<b>Staff Pay - Premium (Agency &amp; Bank costs)</b>	£78,472
				<b>All other costs</b>	£295,536	
				<b>Total Costs</b>	£737,433	
<b>Development Dwellings</b>	216	of which 97 are households new to the population		97		
<b>Average Population per Dwelling (District)</b>	2.32				<b>Staffing Cost %</b>	49.3%
<b>Development Population</b>	501	of which 226 are people new to Worcestershire		226	<b>Premium Staff Cost %</b>	17.8%

	1	2	3	4	5	6	7	8	9	10
Activity Type	Trust Level Activity (2023/24)	% Activity Rate per Annum (Trust wide)	Activity for this LSOA (2023/24)	Activity Rate per Annum per head of Population (This LSOA)	Delivery Cost per Activity £	12 Months Activity for Proposed new Population	Delivery Cost for new population £	Premium Cost of Delivery £	Total Impact £	
Emergency Department Attendances	172,337	28.29%	770	27.37%	£362	62	£22,376	£1,964	£24,339	
Emergency Admissions	64,843	10.64%	266	9.46%	£4,601	21	£98,318	£8,628	£106,946	
Follow up outpatient attendances	357,984	58.76%	1,132	40.24%	£202	91	£18,386	£1,613	£19,999	
Maternity Care	139,235	22.85%	658	23.39%	£503	53	£26,612	£2,335	£28,947	
Diagnostic examination*	201,707	33.11%	918	32.63%	£125	74	£9,252	£812	£10,063	
<b>Total</b>	<b>936,106</b>	<b>-</b>	<b>3,744</b>	<b>-</b>	<b>-</b>	<b>301</b>	<b>£174,943</b>	<b>£15,352</b>	<b>£190,295</b>	

\* diagnostic examination on patients referred by GPs and emergency diagnostic & treatment only

**Total Development Contribution (new households only) £190,295**

## Appendix 2 – Background and Context

This appendix has been compiled to provide background and context to the detrimental impact that the new residents of the Proposed Development will have on the Trust's services.

### 1. Worcestershire Acute Hospitals NHS Trust's licenced undertakings

**1.1.** Under the terms of its licence, the Trust provides acute health care services to a catchment population, which includes the Proposed Development. The Trust has a statutory responsibility under the NHS Constitution, and the terms of its licence, to provide services to everyone who presents for treatment.

### 2. General Healthcare Capacity Planning Context

#### 2.1. National and local healthcare planning

Worcestershire's population has been changing significantly. As with many parts of the country, Worcestershire's population is growing, aging and is living longer with more complex health conditions. Sustainable healthcare capacity is, therefore, critically important to maintain.

The Trust's base capacity is frequently overfilled, so capacity expansion is often needed, some examples of which are as follows:

- Additional ward and bed capacity
- Additional emergency assessment and treatment unit capacity
- Additional radiology capacity (e.g. MRI, CT scanners, X ray)
- Additional diagnostic capacity (e.g. pathology, endoscopy)
- Additional operating theatre capacity
- Additional outpatient facilities capacity
- Additional maternity capacity

**2.2.** Safe hospital care is provided when the hospital is operating at or below 92% of full bed capacity. This is the standard set by NHS England for English acute hospitals. Our routine staffing and equipment ratios are set at this level.

However, the Trust's hospitals are frequently operating at greater than 92% capacity and it is frequently above 100% during surge periods. This happens when the requirement for A&E admissions exceeds the number of patient discharges it is safe to make. At these times, the Trust's infrastructure and equipment is over-used and additional staff are brought in, adding premium costs.

**2.3.** The residents of the Proposed Development will add further pressure to hospital services, as shown in the impact calculation in Appendix 1. This is the reason a developer contribution is required.

### **3. Allocative formula for NHS resource distribution to commissioners**

- 3.1.** The NHS funding allocation formula works in accordance with a "Weighted Population Index" that measures age and deprivation within a geographically defined target population. Successive governments since the seventies have supported its purpose which is to allocate "fair shares" of the annual NHS funding settlement to NHS commissioners (Integrated Care Boards (ICBs)), who are charged to purchase healthcare for their local population.
- 3.2.** The "growth" referred to in NHS allocations is the change in local population size from the previous baseline year to the new baseline year for which the ICB is receiving its allocation. This population change can be negative or positive, reflecting whether the population has shrunk overall, or grown. There is no forecast of future population change associated with new housing development within the allocation model.

### **4. NHS Trusts' Funding Model**

- 4.1.** NHS Trusts contract with their commissioners in ICBs, each year, to provide NHS care for local residents. The contracts are activity based and must use the previous year's activity as the baseline.
- 4.2.** If their funding allocation includes it, ICBs add to the year's contract baseline to account for inflation, pay growth and other factors specified by national health policy. This *per capita* payment is multiplied by local population size, provided by a count of local GP registered populations, to give a forecast of healthcare costs for the coming year. Generally, this amount is paid to the Trust in twelve monthly instalments irrespective of whether activity delivered exceeds the baseline - such arrangements are known as "block contracts".
- 4.3.** However, in the current iteration of the NHS funding regime elective activity, (i.e. that which is not emergency or urgent care, maternity care, follow up outpatient appointment and certain diagnostics), is paid for under a "pay as you go" arrangement, at "cost per case". This is designed to incentivise reduction of waiting lists and pays the Trust for work done each month. Elective activity is therefore not currently part of the Trust's developer contribution request.
- 4.4.** As there is no forecast of *future* population change within the NHS block contract changes in population size are, by default, applied retrospectively each year. This means funding for additional population arising from a new development is always behind and non-refundable following their arrival in an ICB's area. These health policy-driven constraints of the funding model is why ICBs do not forecast population growth due to in-migration in their contracts with Trusts, nor pay NHS Trusts for the cost of caring for new population until those people are counted in the population change included in a new contract baseline.

Therefore, the trust is requesting a one-off payment to create capacity to treat the demand



from patients generated by the additional population new to the area created by the Proposed Development.

## **Appendix 3 - The Current Development Plan and the Updated NPPF Policies in support of the request to mitigate the detrimental impact created by this Proposed Development**

Planning applications must be determined in accordance with the development plan unless material considerations indicate otherwise<sup>3</sup>. The creation of healthy communities is an essential component of sustainability as articulated in the Government's National Planning Policy Framework<sup>4</sup> (the "NPPF") and as set out below. The NPPF is material consideration.

Development plans must be in conformity with the NPPF and less weight should be given to policies that are not consistent with the NPPF. It follows that, local planning policies along with development management decisions must also be formulated with a view to securing sustainable healthy communities.

### **Development Plan Borough of Redditch Local Plan No.4 (Adopted 30 January 2017)**

#### **Health**

##### **Policy 1**

*"1.53 The 'Health Profile for Redditch 2012' (NHS) suggests that the health of people living in the Borough is mixed compared with the England average. Levels of alcohol-specific hospital stays among those under 18, smoking in pregnancy and estimated levels of healthy eating and obesity are worse than the England average. The rates of statutory homelessness, long term unemployment and drug misuse are lower than average."*

*"1.54 Redditch has the lowest amount of residents with limiting long term illnesses compared to all other Worcestershire districts; this may be attributed to Redditch's younger population profile. However, an ageing population is projected for the Borough. The 2011 Census indicates that the over-65 age group currently accounts for 14.3% of the total population. Rates of early death from heart disease and stroke and from cancer have fallen over the past ten years and are similar to the England average."*

*"1.55 Life expectancy for men living in the most deprived areas of Redditch is almost nine years shorter than for men living in the least deprived areas. For women, the corresponding difference is over 10 years. "*

##### **Policy 44:**

*"44.4 The Hierarchy of Centres, as set out in Policy 30 Town Centre and Retail Hierarchy states that Redditch Town Centre, at Tier 1 of the hierarchy should be the main location for uses that attract large numbers of people. District Centres, at Tier 2 should serve a community's day to day needs. The Town and District Centres also represent areas of the town which are accessible by a range of modes of transport. Consequently these locations are considered the most suitable and sustainable for*

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<sup>3</sup> Section 70 (2) of the Town and Country Planning Act 1990 and Section 38(6) of the Planning and Compulsory Purchase Act 2004

*the development of new health facilities. In addition, there is also land within the curtilage of the Alexandra Hospital safeguarded for health related purposes. A review of healthcare services provided at the Alexandra Hospital may, however, necessitate a more flexible approach to land use in the curtilage of the hospital where it relates to the functioning of the hospital."*

*"44.5 The Alexandra Hospital is the main provider of acute medical services in the Borough and is governed by the Worcestershire Acute Hospitals NHS Trust. The hospital is located in the south of the urban area of the Borough on a site currently dominated by healthcare and health-related facilities. This represents the highest concentration of key healthcare facilities in the Borough and is widely accessible by public transport making this an ideal location for increased health related provision."*

*"44.6 Genuine health-related facilities include:*

- GP premises*
- Dental practices*
- Nursing homes*
- Hospital related facilities directly related to the delivery of healthcare and any necessary supporting uses that enable the proper functioning of the hospital."*

## **NPPF Policies**

The following NPPF paragraphs are relevant to the Trust request to make sure that adequate health infrastructure capacity is available, and that the Proposed Development is sustainable:

*"NPPF Section 2 Achieving Sustainable Development*

*Paragraph 7:*

*"The purpose of the planning system is to contribute to the achievement of sustainable development, including the provision of homes, commercial development, and supporting infrastructure in a sustainable manner..... **as meeting the needs of the present without compromising the ability of future generations to meet their own needs.**" (our emphasis).*

*Paragraph 8:*

*"Achieving sustainable development means that the planning system has three overarching objectives, which are interdependent and need to be pursued in mutually supportive ways (so that opportunities can be taken to secure net gains across each of the different objectives):...*

*2) a social objective – to support strong, vibrant and **healthy communities**, by ensuring that a sufficient number and range of homes can be provided to meet the needs of present and future generations; and by fostering well-designed, beautiful and safe places, **with accessible services** and open spaces that reflect current and future needs and support communities' **health, social and cultural well-being**; and..." (our emphasis)*

*NPPF Section 8 | Promoting Healthy and Safe Communities*

Paragraph 97

*"To provide the social, recreational and cultural facilities and services the community needs, planning policies and decisions should:*

*a) plan positively for the provision and use of shared spaces, community facilities (such as local shops, meeting places, sports venues, open space, cultural buildings, public houses and places of worship) and other local services to enhance the sustainability of communities and residential environments;*

*b) take into account and support the delivery of local strategies to improve health, social and cultural well-being for all sections of the community;*

*c) guard against the **unnecessary loss of valued facilities and services**, particularly **where this would reduce the community's ability to meet its day-to-day needs**; (our emphasis)*

*d) ensure that established shops, facilities and services are able to develop and modernise, and are retained for the benefit of the community; and*

*e) ensure an integrated approach to considering the location of housing, economic uses and community facilities and services."*

Paragraph 100:

*"To ensure faster delivery of **other public service infrastructure** such as further education colleges, **hospitals** and criminal justice accommodation, local planning authorities should also work proactively and positively with promoters, delivery partners and statutory bodies to plan for required facilities and resolve key planning issues before applications are submitted."*

## Appendix 4 CIL compliance

### **Planning Obligations – Compliance Statement (24<sup>th</sup> October 2024) | 21/01830/FUL | Land West of Hither Green Lane, Redditch, Worcestershire, B98 9AZ**

**Paragraph 204 of the Framework and Regulation 122 of the Community Infrastructure Levy Regulations 2011 (as amended) set tests in respect of planning obligations. Obligations should only be sought where they meet the following tests:**

- Necessary to make the development acceptable in planning terms;
- Directly related to the development; and
- Fairly and reasonably related in scale and kind to the development.

The table below shows details of the contributions requested by Worcestershire Acute Hospitals NHS Trust.

<b>Planning Obligation</b>	<b>Test 1 Necessity</b>	<b>Test 2 Directly related to the proposed development</b>	<b>Test 3 Fair and reasonable in terms of scale and kind</b>
<p><b>Emergency attendances at A&amp;E</b></p> <p>£251 per new household for increased A&amp;E capacity at Alexandra Hospital or such other facility as can be demonstrated will serve the development</p>	<p>As the NHS Trust commissioned to provide local Urgent and Emergency acute health services, Worcestershire Acute Hospitals NHS Trust has a duty to provide comprehensive and efficient Urgent and Emergency care service for everyone who presents for treatment. The request is necessary to meet the resultant additional demand from this development.</p> <p>The request is in line with Policy 44 of Borough of Redditch Local Plan No. 4 (Health Facilities), notably paragraphs 44.1, 44.5 and 44.6.</p>	<p>The requested contributions are based on a formulaic approach to mitigate against the impact of the development upon the Urgent and Emergency care provision within the vicinity of the development and to increase capacity to accommodate such demand.</p> <p>The calculation is based on the number of expected inhabitants of development based on the average number of people per household stated within the Borough's Housing and Economic Development Needs Assessment (2022).</p> <p>The contribution will mitigate the detrimental impact of this development on A&amp;E services at the Alexandra Hospital or other such facility that will serve the development.</p>	<p>The Urgent &amp; Emergency care request for contributions is based on the number of expected inhabitants of the development, the average demand from residents local to the development's post code and the average cost per Urgent and Emergency care attendance</p> <p>It is therefore in line with the scale of the development and the certain impact additional residents will have on local healthcare services.</p>

<b>Planning Obligation</b>	<b>Test 1 Necessity</b>	<b>Test 2 Directly related to the proposed development</b>	<b>Test 3 Fair and reasonable in terms of scale and kind</b>
<p><b>Emergency admissions</b></p> <p>£1,103 per new household for increasing Urgent and Emergency admissions capacity at Alexandra Hospital or such other facility as can be demonstrated will serve the development</p>	<p>As the NHS Trust commissioned to provide local health care services, Worcestershire Acute Hospitals NHS Trust has a duty to provide comprehensive and efficient Emergency admissions care service for everyone who presents for treatment. The request is necessary to meet the resultant additional demand from this development.</p> <p>The request is in line with Policy 44 of Borough of Redditch Local Plan No. 4 (Health Facilities), notably paragraphs 44.1, 44.5 and 44.6.</p>	<p>The requested contributions are based on a formulaic approach to mitigate against the impact of the development upon the Urgent and Emergency care admissions provision within the vicinity of the development.</p> <p>The calculation is based on the number of expected inhabitants of development based the average number of people per household stated within the Borough’s Housing and Economic Development Needs Assessment (2022).</p> <p>The contribution will mitigate the detrimental impact of this development on emergency admissions services.</p>	<p>The emergency admissions request for contributions is based on the number of expected inhabitants of the development, the average demand from residents local to the development’s post code and the average cost per Urgent and Emergency care admission</p> <p>It is therefore in line with the scale of the development and the certain impact additional residents will have on local healthcare services.</p>

<b>Planning Obligation</b>	<b>Test 1 Necessity</b>	<b>Test 2 Directly related to the proposed development</b>	<b>Test 3 Fair and reasonable in terms of scale and kind</b>
<p><b>Outpatient attendances</b></p> <p>£206 per new household for increasing outpatient capacity at Alexandra Hospital or such other facility as can be demonstrated will serve the development</p>	<p>As the NHS Trust commissioned to provide local acute health services, Worcestershire Acute Hospitals NHS Trust has a duty to provide comprehensive and efficient outpatient care.</p> <p>The request is necessary to meet the resultant additional demand from this development.</p> <p>The request is in line with Policy 44 of Borough of Redditch Local Plan No. 4 (Health Facilities), notably paragraphs 44.1, 44.5 and 44.6.</p>	<p>The requested contributions are based on a formulaic approach to mitigate against the impact of the development upon outpatient care.</p> <p>The calculation is based on the number of expected inhabitants of development based on the average number of people per household stated within the Borough’s Housing and Economic Development Needs Assessment (2022).</p> <p>The contribution will mitigate the detrimental impact of this development on services at Worcestershire Acute Hospitals NHS Trust.</p>	<p>The outpatient attendances request for contributions is based on the number of expected inhabitants of the development, the average demand for outpatient care from residents local to the development’s post code and the average cost per outpatient appointment at Worcestershire Acute Hospitals NHS Trust</p> <p>The request is therefore in line with the scale of the development and the certain impact additional residents will have on outpatient services.</p>



<b>Planning Obligation</b>	<b>Test 1 Necessity</b>	<b>Test 2 Directly related to the proposed development</b>	<b>Test 3 Fair and reasonable in terms of scale and kind</b>
<p><b>Maternity attendances</b></p> <p>£298 per new household for increasing maternity capacity at Worcestershire Acute Hospitals NHS Trust</p>	<p>As the NHS Trust commissioned to provide local acute health services, Worcestershire Acute Hospitals NHS Trust has a duty to provide safe, comprehensive and efficient maternity care.</p> <p>The request is necessary to meet the resultant additional demand from this development.</p> <p>The request is in line with Policy 44 of Borough of Redditch Local Plan No. 4 (Health Facilities), notably paragraphs 44.1, 44.5 and 44.6.</p>	<p>The requested contributions are based on a formulaic approach to mitigate the impact of the development upon maternity care.</p> <p>The calculation is based on the number of expected inhabitants of development based on the average number of people per household stated within the Borough's Housing and Economic Development Needs Assessment (2022).</p> <p>The contribution will mitigate the detrimental impact of this development on services at Worcestershire Acute Hospitals NHS Trust</p>	<p>The maternity attendances request for contributions is based on the number of expected inhabitants of the development, the average demand for diagnostic care from residents local to the development's post code and the average cost per maternity episode of care at Worcestershire Acute Hospitals NHS Trust</p> <p>The request is therefore in line with the scale of the development and the certain impact additional residents will have on diagnostic services.</p>

<b>Planning Obligation</b>	<b>Test 1 Necessity</b>	<b>Test 2 Directly related to the proposed development</b>	<b>Test 3 Fair and reasonable in terms of scale and kind</b>
<p><b>Diagnostic attendances</b></p> <p>£103 per new household for increasing diagnostic capacity at Alexandra Hospital or such other facility as can be demonstrated will serve the development</p>	<p>As the NHS Trust commissioned to provide local acute health services, Worcestershire Acute Hospitals NHS Trust has a duty to provide comprehensive and efficient diagnostics for those referred by local GPs.</p> <p>The request is necessary to meet the resultant additional demand from this development.</p> <p>The request is in line with Policy 44 of Borough of Redditch Local Plan No. 4 (Health Facilities), notably paragraphs 44.1, 44.5 and 44.6.</p>	<p>The requested contributions are based on a formulaic approach to mitigate the impact of the development upon diagnostic care.</p> <p>The calculation is based on the number of expected inhabitants of development based on the average number of people per household stated within the Borough’s Housing and Economic Development Needs Assessment (2022).</p> <p>The contribution will mitigate the detrimental impact of this development on services at Worcestershire Acute Hospitals NHS Trust</p>	<p>The diagnostic attendances request for contributions is based on the number of expected inhabitants of the development, the average demand for diagnostic care from residents local to the development’s post code and the average cost per diagnostic appointment at Worcestershire Acute Hospitals NHS Trust</p> <p>The request is therefore in line with the scale of the development and the certain impact additional residents will have on diagnostic services.</p>