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## Central Bedfordshire Health and Wellbeing Board

Date: 13 July 2022

Title: Healthcare provision in Leighton Buzzard and Linslade

### Purpose of the Report:

To submit information to the Central Bedfordshire Health and Wellbeing Board from Leighton-Linslade Town Council and to seek urgent engagement in respect of local healthcare provision.

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## 1 RECOMMENDATIONS

1.1 The Health and Wellbeing Board is requested to urgently revisit the Integrated Care Hub programme with a view to:

- reviewing the priority order for the five hubs. **making the Leighton Buzzard hub a top priority**
  - clarifying the position regarding **creating a positive plan to access** capital funding.
  - clarifying **revising** the timescales for the ICH project.
  - ensuring that **urgently consulting Leighton-Linslade** stakeholders across the geographic area are involved and engaged early in the process, so that detailed local knowledge and experience can be taken into account.
- Planning for a fourth GP surgery to serve the eastern Leighton Buzzard developments, and a fifth GP surgery as a replacement local surgery for the 15,000 Linslade residents.**
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## 2 BACKGROUND

- 2.1 Leighton-Linslade Town Council (LLTC) has a longstanding ambition to ensure satisfactory provision of healthcare services for residents of Leighton Buzzard and Linslade. The town's Big Plan, published in 2007 following widespread community consultation, referenced proposals for a community hospital, a walk in health centre and a local emergency out of hours service.
- 2.2 Big Plan II, which followed in 2011, outlined an aspiration for development of a community hospital as well as an increase in the number and capacity of GP practices to keep pace with the town's growing population. Now, in 2022, healthcare provision remains a priority on the town's Partnership Project List.

- 2.3 Healthcare provision has been discussed in a number of local forums over the years. In 2007, a Community Hospital Task & Finish Group was created by the town council. Since then, the present town council administration created a Health Services Sub-Committee which in late 2019 evolved into the current Health Services Task and Finish Group. Meetings have brought in stakeholders including representatives of local GP practices and the M.P. for south-west Bedfordshire.
- 2.4 Elected Members are mindful that local healthcare provision is one of the most important concerns of residents and that, with significant and continuing local housing growth, there are growing frustrations with difficulties in accessing local healthcare services and in having to travel some distance for anything beyond basic primary care. **The town's three GP surgeries serve a local population of 50,000 who are having to make an average round trip of thirty miles for an estimated 88,000 outpatient appointments each year.**
- 2.5 Since an initial informal pre-meeting in December 2019, the current Leighton-Linslade Health Services Task & Finish Group has met formally on 7 occasions. A formal update was given by officers from BLMK Clinical Commissioning Group and Central Bedfordshire Council on two occasions (18 December 2020 and 18 October 2021).
- 2.6 The Task and Finish group has the following aims, agreed in March 2020:
1. To press Bedfordshire Clinical Commissioning Group (BCCG) and Central Bedfordshire Council's Health and Wellbeing Board (HWB) to bring forward proposals urgently for a Leighton-Linslade Health Hub as part of a planned approach to improved localisation of hospital services for local residents and to secure the town's fair share of Government investment in the localisation agenda.
  2. To press for the development of that Plan to include local GPs and professions ancillary, patient groups and the Town Council, to promote, encourage and support early and regular consultation with residents of the parish in terms of the services to be provided and the location of the Hub.
  3. To pursue, in consultation with the three groups mentioned above, that this comprehensive Plan shall include:
    - (a) A Leighton-Linslade Hub providing a range of services that are currently provided by hospitals or not at all
    - (b) The accommodation and investment requirements of existing GP surgeries in the town
    - (c) Planned GP surgeries serving the new developments on the eastern side of the town and also Linslade residents, who used to have two GP surgeries but now had none.

2.7 The Task and Finish Group notes the impact of the Covid pandemic on healthcare and local authority services and has placed on record its thanks to all those involved in the local response to the pandemic, including the vaccination and booster programme.

2.8 However, the lack of engagement and seeming lack of progress to expand healthcare capacity and **respond to Government guidance to transform the local delivery of hospital** services in Leighton-Linslade is leading to increased frustration. **Two small-scale Leighton Buzzard consultations in 2020 have been cited as evidence of “consultation” but in reality there has been no reputable engagement with the local community, councillors or GPs. The Town Council has asked several times for sight of the CCG’s Strategic Outline Case and been refused, in contradiction to the CCG’ publicly-announced commitment to transparency and consultation. That lack of consultation includes the candidate locations being used by the CCG, which in the Town Council’s view may be unsuitable.**

### 3 CURRENT STATUS

3.1 Following its meeting held 4 March 2022, correspondence was sent to the CCG and copied to the local authority (see below **Appendix A**). The letter repeated a request for access to information and the Task and Finish Group’s objection to the metric used to determine the priority order of the five Integrated Care Hubs being delivered in Central Bedfordshire, which sees the Leighton-Linslade Hub in fifth priority place. **The Town Council firmly believes that the urgent need for a Leighton Buzzard Health Hub and its specification of services should not depend on whatever space might be available in GP surgeries but recognise the size of population, the distance from surrounding hospitals, and the cost the patients and the environment in accessing them.**

3.2 An informal meeting held with representatives of the Primary Care Network on 8 April 2022 indicated **confirmed** that there is no available space at local GP practices. This is borne out by a description of the premises of Leighton Buzzard practices as “constrained” in a letter sent by BLMK CCG to CBC on 24 March 2022, in which S106 developer monies for healthcare provision were being sought. This contradicts the previous position presented by BLMK CCG and CBC that “housing growth will result in capacity constraints by 2025-27”. **The lack of spare space at the town’s surgeries chimes with the day to day experience of councillors and patients.**

3.3 The same informal meeting with representatives of the Primary Care Network noted an understanding that all three local GP practices were supportive of the provision of a 4<sup>th</sup> practice on the designated land on the eastern urban extension, in addition to being supportive of the development of an integrated

care hub which would expand the range of services available within the town for local residents.

- 3.4 At its meetings in December 2020 and October 2021, the Health Services Task and Finish Group heard about the difficulties in securing NHS capital funding for healthcare, which could be “fragmented” or have short timescales. Andrew Selous M.P. continues to press at Government level for funding to ensure healthcare services keep pace with planned housing development.
- 3.5 Mr Selous was advised in a letter from the Department for Levelling Up, Housing & Communities dated 10 May 2022 that Central Bedfordshire Council’s Infrastructure Funding Statement for 2020/21 states that £35,265,897.00 of S106 developer funds received prior to 2020/21 were retained by the authority and that £5.5m is earmarked for the provision of healthcare services across Central Bedfordshire. **The Town Council is also aware that BLMKCCG and its predecessor authority have in fact been bidding for CBC for health infrastructure funding for at least the past four years; it is not clear whether CBC have followed through with developers or what has been done with the money negotiated.**
- 3.6 The T&F Group was also advised that the Leighton-Linslade Hub was identified as a “pending” project in Central Bedfordshire’s reserve capital programme but an outline business case would not be developed until after service modelling work had been completed.
- 3.7 The T&F Group is concerned that in 2.5 years no apparent progress has been made, leading to the impossibility **including an absence of** bidding for NHS capital funding or allocating specific CBC capital funding. In the same period, the cost of living has risen, putting increased pressure on residents to fund transport to surrounding hospitals.
- 3.8 At a meeting of Leighton-Linslade Town Council on 4 April 2022, Members heard an estimate from one Councillor that if just one in five **hospital** Outpatient appointments could be provided within the parish, the cost saving to residents could be £1m per year – as well as a 2-tonne **p.a.** carbon saving.

#### **4. CONCLUSIONS**

- 4.1 The lack of healthcare provision in Leighton-Linslade and its surrounding villages is not a new concern but a longstanding infrastructure deficit which has thus far failed to be addressed.
- 4.2 In addition to the increasing pressure on Leighton GP practices arising from local housing growth, the rising cost of living and increased awareness of environmental factors and the need for sustainable travel means that continuing to travel at least 10 miles for hospital appointments is no longer acceptable to residents.

- 4.3 It is clear that unless progress is made with service modelling work and development of an outline business case, capital funding for this project cannot be secured. Furthermore, there are concerns that S106 developer contributions will be lost if they cannot be spent within the specified timeframe set out in the S106 agreement.
- 4.4 As the local government sector closest to residents, Town Councillors are aware of the increasing concerns of local people regarding the lack of adequate and accessible healthcare provision. The Town Council is also in a unique position to understand and comment on local considerations such as the potential location of an integrated health hub.
- 4.5 Despite repeated requests for access to information such as the strategic outline case, limited information has to date been provided.
- 4.6 Despite repeated requests for early engagement and involvement, the Town Council has not been pro-actively approached, consulted or involved in any discussions on either the promised provision of a 4<sup>th</sup> GP Practice or delivery of an integrated care hub.
- 4.7 It is the Town Council's understanding that the local GP practices and Patient Participation Groups have also failed to be approached, consulted or involved on either matter. **These stakeholders should be given the chance to add local knowledge and energy to the H&WBB's plans.**
- 4.8 The Health and Wellbeing Board is asked to urgently revisit the Integrated Care Hub programme with a view to:
- reviewing the priority order for the five hubs. **making the Leighton Buzzard hub a top priority**
  - clarifying the position regarding **creating a positive plan to access** capital funding.
  - clarifying **revising** the timescales for the ICH project.
  - ensuring that **urgently consulting Leighton-Linslade** stakeholders across the geographic area are involved and engaged early in the process, so that detailed local knowledge and experience can be taken into account.
- Planning for a fourth GP surgery to serve the eastern Leighton Buzzard developments, and a fifth GP surgery as a replacement local surgery for the 15,000 Linslade residents.**

## **APPENDIX A**

29 April 2022

Ms. Nikki Barnes  
Head of System and CCG Estates  
BLMK CCGs / BLMK ICS  
Capability House  
Silsoe  
Bedfordshire  
MK45 4HR

Dear Nikki,

You will recall recently receiving notification that the Leighton-Linslade Health Services Task and Finish Group was due to meet on 4 March 2022.

I write to enclose the draft minutes of that meeting for your information and to advise that the group is intending to meet again on Tuesday, 17 May.

You will see from the enclosed minutes that the group agreed to write to both BLMK CCG and to Central Bedfordshire Council as follows:

- (i) To object to the continuing use of the metric “number of patients per square metre” as a basis for prioritising the development of the five integrated care hubs. It was understood that an integral part of the reason for hub development was in order to migrate additional services from hospitals into the community, as well as bringing together a range of existing services and functions (which extended beyond those provided solely by existing GP practices). The distance which Leighton-Linslade patients had to travel to a hospital when compared with the other four hub locations and the size of population for the area did not seem to be taken into account when determining the priority order of the five hubs.
- (ii) To query why money was not being allocated to each of the five health hubs as to leave three unfunded did not appear to be an equitable use of public monies.
- (iii) To repeat the request made since December 2020 for sight of the strategic outline case for the Leighton-Linslade health hub.
- (iv) To request clarification on exactly when and how the service modelling work required for the development of the business case would be undertaken and to what extent the Town Council and local community would be involved in this work.
- (v) To ask the Central Bedfordshire Health and Wellbeing Board and BLMK CCG to engage more actively with the Town Council on these issues.

It was agreed that the key priorities for those bodies involved in developing and expanding the local healthcare provision in Leighton-Linslade were considered to be:

- (i) That engagement take place with GP practices and the wider community to develop a plan of what services were wanted for the town – the local vision.

- (ii) To ascertain which hospital services could be made available in the town.
- (iii) To ascertain how much space was needed across existing and new premises to deliver the services identified above.
- (iv) To determine how many more GPs and primary care staff would be needed for service delivery and when they could be available.

The draft minutes of the meeting on 4 March were received by the Council's Policy and Finance Committee on 11 April. Further discussion took place at that meeting and also at the Full Council meetings on 4 April and 25 April in respect of healthcare. Specifically, local GP practices were understood to have confirmed they are full (i.e. without capacity for additional staff/services) and furthermore, the CCG was understood to be seeking S106 developer monies from housing development in Leighton-Linslade towards the cost of a fourth GP practice. This information is what is due to be discussed further on 17 May.

I appreciate you have previously advised you would not have an update until June/July. However, we would welcome any information from the CCG in respect of the above points and would be very happy to invite you to join the meeting on 17 May. Should this not be possible, we would welcome any dates from you for a possible next meeting at which the CCG and CBC would be able to provide us with an update.

I look forward to hearing from you.

Yours sincerely,

Cllr Gordon Perham  
Chair – Health Services Task & Finish Group  
Leighton-Linslade Town Councillor & Central Bedfordshire Councillor

Cc: Beth Collins, BLMK CCG  
Patricia Coker, Central Bedfordshire Council