



*Dartford Gravesham and Swanley
Clinical Commissioning Group*

Ebbfleet Garden City and Wider Housing Development - Impact on Healthcare Services

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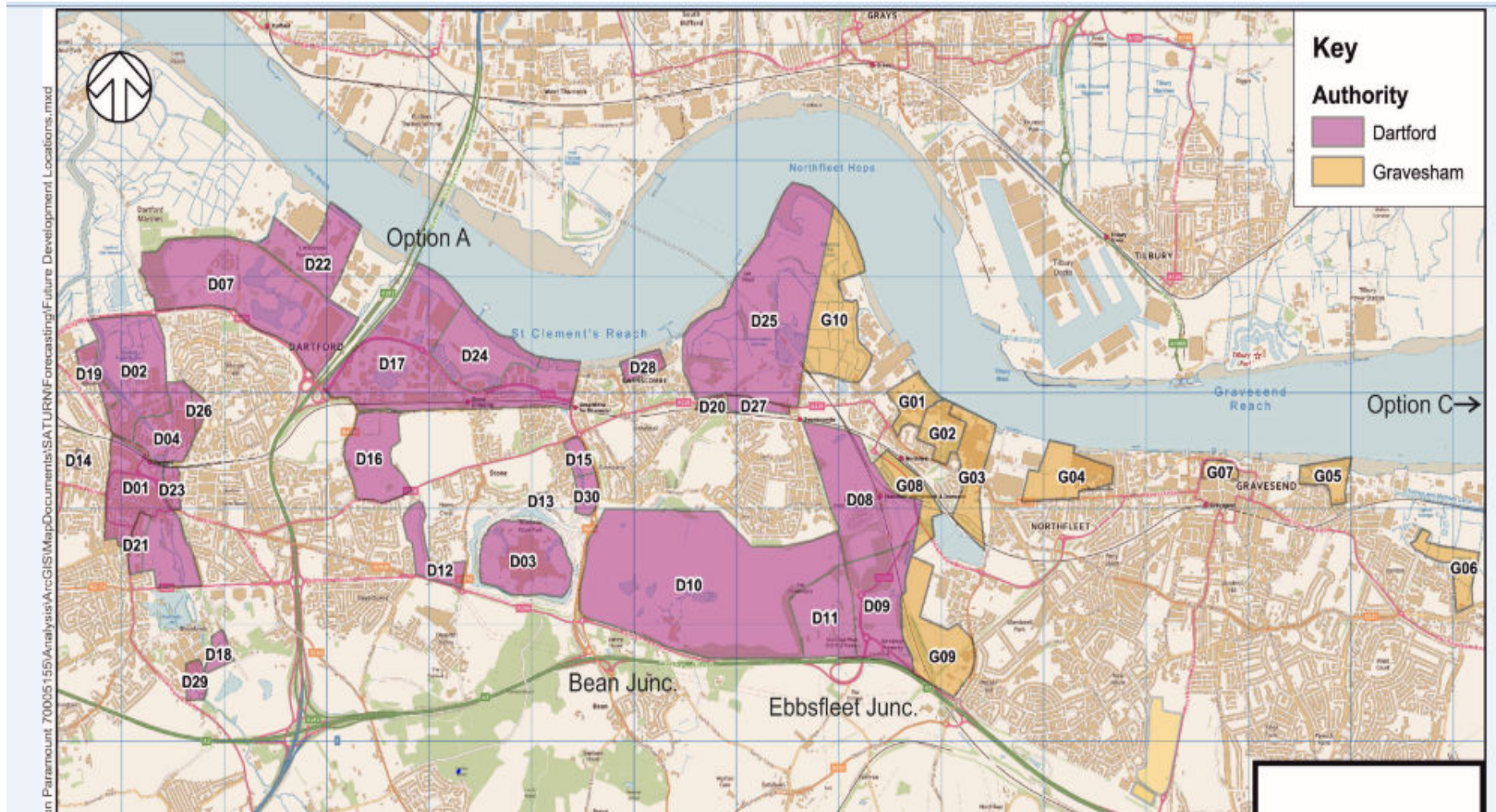
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Dartford, Gravesham & Swanley CCG

Work to date

- CCG led analytical group
 - LA planning policy teams
 - KCC infrastructure modelling team and Public Health Observatory
 - CCG Public Health Consultant
 - NHS Providers
 - NHS England
- Looking at
 - Population projections (indigenous growth & Ebbsfleet specific) ✓
 - Predicted impact of growth on existing health services (*underway*)
 - Predicted need for future health services (*underway*)
 - Wider determinants of health
 - (London Paramount to be added in at later stage)

Proposed development areas



Population predictions

- Dartford and Gravesham population predicted to be 252,000 by 2031 (increase of 49,000(24%) on 13/14 baseline)
- Includes Ebbsfleet growth which equates to c27000 residents by 2031
- Age breakdowns indicate larger young population (working age and families): 19% of population aged over 65 by 2031 but only 7% of Ebbsfleet population aged over 65.

Demographic impacts on health

- What will the demographics of new population look like?
- Age group probably strongest predictor of health need
- Hard to predict ethnic diversity – may have to assume similar to existing communities
- May affect planning for e.g. long term condition care provision

Wider determinants of health and well-being...

- Environmental surroundings and green space
– recreational areas, open spaces, pollution
etc.
- Transport – access to health services and
other services associated with well-being
- Leisure facilities

Impact on current health services

- Primary care: Current problems with GP capacity nationally. **Growth impact = 27 additional GPs**
- Acute Trusts – Growing A&E and bed pressures already. Mental health services under pressure
Growth impact = circa 20% increase in A&E attendances and ambulance journeys. Similar increases in outpatient and admissions.
- Community services under pressure given large numbers of frail elderly. Capacity issues with school nurses, health visitors etc. for child health.

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- **Ebbfleet equates to 50 to 60% growth. London Paramount not included in assumptions**

Health Services Requirements

- Primary care
 - General Practice
 - Community care
 - Community nursing & allied health professionals
 - Pharmacy, Dentists, Opticians
 - Acute care
 - Acute Trust (Darent Valley Hospital)
 - Mental Health services
 - Ambulance services and patient transport
-)
) Multi-disciplinary
) community services /
) hubs ?
)
) Unplanned (non A&E)
) provision?
)
) Access / transport
) solutions
)

CCG strategy

- Urgent & Emergency Care Review
- Community Services Review
- Better Care Fund – Integrated Discharge Team, Integrated Primary Care Teams

Financial implications for health

- Difference in ONS and IIFM/KCC projections significant
(By 2020 difference is 12,000 population)
- Health revenue funding projected on ONS and based on registered populations
- CCG budget – circa £1,200 per head of population
- Health budgets turned around over several years – no retrospective funding
- **Significant funding gap** expected given population growth
- **Major investment** required in capital infrastructure to support growth

Next steps

- Analysis of specialty data
- Develop healthcare models – may include existing facilities development to accommodate new population
- Ongoing meetings with local authority planners to determine future community solutions
- Financial costings with providers for proposed models
- Meeting with developers