



# **Alton Neighbourhood Plan**

## **Community, Health & Recreation Evidence Base April, 2015**

## Part 1 (Evidence to May 2014)

### Introduction

Information contained in this Part 1 of the Health, Community and Recreation Evidence Base is focussed on actions and information gathered and considered up to the Consultation Feedback presentation by Alton Neighbourhood Plan Steering Group to the public on 17 May 2014. Evidence generated and gathered after that date is covered at Part 2 of this document from on page 24.

A series of Objectives have been identified for the Alton Neighbourhood Plan. It is recognized that these and related policies should be built upon sound evidence. This document deals with the Health, Community and Recreation domain. The Evidence Base as a whole, including the views of Alton residents and consultees, has been used to define and enlarge upon the Objectives of the Plan. The most relevant source-references regarding Health are cited at the end of that section.

This section deals very much with the quality of life, which is such an important factor for Altonians, contributing greatly to the attractiveness of the town as a place in which to live.

The three areas covered in this section each have a main Objective and will be set out separately below. Much of the supporting data relates to areas which physically extend beyond that of the Alton Neighbourhood Plan either through the operational areas of the various responsible authorities and/or the catchment area of each local provider or facility.

#### **The Alton 2020 set out as follows its vision for. *Health, Community and Recreation***

- **Alton will continue to be a town that cares for all sections of its community where everyone feels and is safe. Police will regularly patrol the town centre.**
- **A purpose-built Community Centre will provide a wide range of educational, recreational and cultural courses and activities for residents of Alton, its outlying villages and beyond.**
- **A new Sports and Leisure facility will offer a comprehensive choice of leisure pursuits for all to enjoy.**
- **Local health, welfare and social services will be further strengthened, thereby reducing the need for residents to travel.**

The Alton Neighbourhood Plan has selected a key Objective from each area, whilst acknowledging the evolving situation as set out in the **Alton Study** prepared for the EHDC by Urban Initiatives Studio Ltd in June 2013.

### *The first Objective*

***Objective 3a. To support the development of a new/refurbished Community Centre and a new Sports and Leisure Centre in the town.***

**The Alton Study 2013** lists the town Community facilities as follows

- Alton Community Centre;
- Alton Sports Centre;
- Palace Cinema;
- Maltings Centre / Harvest Church;
- Alton Assembly Rooms;
- Bowling Green;
- Tennis Club;
- Library;
- Allen Gallery;
- Curtis Museum;
- Alton Public Gardens; and
- Alton College (including Berkhoff Centre and Forum).

The original vision statement set out in Alton 2020 ‘A Plan to shape Alton’s future’, evolved with inputs from stakeholders involved in the preparation of the 2013 ‘Study’.

### **Alton will become the focus for Leisure and a Cultural Hub in East Hampshire**

The proposal was that it would take advantage of Alton’s historic and landscape assets and build on these to attract more visitors to the town. Tourism would form an even stronger part of the local Economy as Alton offers:

- **Superb access to open countryside** and a base to visit the South Downs National Park (SDNP), the New Forest and other landscape attractions. Indeed, Alton has for several years described itself as a ‘gateway’ to the SDNP.
- **A wealth of history** presented through its buildings, museums, galleries, spaces and former residents including Jane Austen, and Gilbert White
- **A destination for a weekend break** in the country with top quality hotels
- Steam trains on the **Watercress Line**
- An attractive town centre with a **programme of events and activities** set within a high quality public realm
- **Specialist shops and markets** with a town centre manager providing support and helping to draw customers to the town
- **High quality sports facilities**

The 2020 Vision clearly identified the key desires of Altonians to achieve replacement of both the Community Centre and the Sports Centre with modern, purpose built centres of excellence, but for various reasons this has not proved possible.

The Neighbourhood Plan has therefore picked up the baton with its first objective.

### **Community Centre**

The **Alton Community Association (ACA)** has been operating Alton Community Centre since 1975 and continues to serve the needs of the town together with those of neighbouring villages. It is a registered charity.

The ACA sets out its activities in its latest Annual Report for 2013 as follows -



**Just look what happens here in the heart of Alton:**

- Our well-equipped Play Group was approved by OFSTED
- Our popular Youth Club runs three evenings a week
- We hold musical jamming sessions for young people with special needs
- We have regular social and live music events
- We host a huge Leisure Learning programme offering daytime and evening classes in a wide range of subjects
- We are home to the Alton University of the Third Age (U3A) which has over 500 members and provides courses, talks etc.
- We offer Shopmobility scooters on hire to those with walking difficulties.
- We have a Community Club for the elderly providing entertainment, visits and a hot meal on two days a week
- We are home to many other local services, clubs and societies.
- Our mini-bus is available for hire at competitive rates
- We have rooms of all sizes available for hire at affordable rates.
- We set out the rooms to meet the hirer's needs at no extra cost.
- Our café is open five days a week for coffees, lunches and teas
- We have a licensed bar which is opened for events and if required by a room hirer

**Each week about 1,000 people use the Centre which is thus a unique and very important resource for Alton and neighbouring communities**

**We will improve the Centre's appearance  
and its facilities as funds permit**

Volunteers from the membership make up a management committee of trustees who meet at least 6 times per year and are responsible for:

- Ensuring that the aims and objectives of the constitution are adhered to.
- Employing a qualified manager to administer, promote and advance the Centre.

- Keeping proper accounting records, which disclose the financial position at any time, and safeguarding the assets of the Association.
- Ensuring that all Legal and Health & Safety issues are properly addressed.

As a charity at the heart of the community, the ACA acknowledges that its role is to serve the town, but in return it also needs the support of both the three tiers of local government and the local population to maintain a high quality of services.

### **So ‘What is wrong with the current Community Centre?’ and ‘What user demand/need exists for such a Centre?’**

The Community Centre is strategically extremely well located adjacent to the Bank car park in the heart of town and almost opposite the town’s library. It is a fascinating piece of Alton’s history and was the first building to be built over the river Wey. With part dating from the mid nineteenth century, the building started life as a tannery and over the decades became a brewery and later an iron works with the river water being used in the production processes. It later became a fruit and vegetable store but during the Second World War it was used for assembling gas masks and its last commercial use was as a corset factory!

The building has grown over the years to provide ten rooms of various sizes available for hire to local organisations and individuals. Over a thousand people use the Centre every week.

### **Latest plans**

The Centre’s vice-chairman sets out the trustees’ present proposals as follows –

For several years, East Hants District Council planned to build a new Community Centre but the recent financial crises resulted in the plan being shelved indefinitely. With the new housing planned for Alton over the next few years, a vibrant, relevant Community Centre remains an essential requirement for the town.

To this end, the Trustees have agreed a phased development plan to improve the operating efficiency and facilities available.

These include:

Combine offices to improve efficiency and to create a new Meeting Room.

Improve heating in the popular Garden Room.

Improve the foyer to be more welcoming.

Re-decorate all rooms.

Enhance and enlarge the café.

Establish a rolling programme to replace lights with energy-efficient LEDs.

Fit photo-voltaic cells on the roof to reduce electricity costs.

Fit secondary double glazing to reduce heat loss.

Improve performance spaces with better lighting and sound systems.

The trustees are now working closely with the EHDC and funders to ensure that the first phase of the developments are completed during the quieter summer holiday period this year (2014).

**Encourage/Lobby EHDC to provide the funds needed now to bring the Community Centre up to sufficient standard to meet modern needs and an increasing population; then identify a suitable site on which to build a replacement Community Centre fit for the 21<sup>st</sup> century to open by 2020. The funding mix to come from EHDC resources, supported by developer contributions, S106 or CIL.**

**Seeking the updated opinion of residents, the Neighbourhood Plan asked –**

***Q19 How often do you or a member of your household use the following services and facilities in Alton?***

Although the focus of the Objectives in this section is the Community Centre and the Sports Centre, it was felt desirable to ask Altonians about their usage of a wider range of facilities.

The chart below lists the facilities and the frequency of use. Please note that not all of the 766 respondents completed this section.

	>once per week	> monthly	Occasionally	Never / Hardly ever
Community	79	88	330	246
Assembly	27	61	491	173
Village Hall	5	11	113	589
Church	111	80	210	332
Sports Centre	190	109	211	230
Playing Filed	123	105	198	295
Playground	78	93	172	374
Library	95	261	297	94
Flood Meadows	182	162	257	142
Gardens	136	191	345	64
Anstey Park	144	147	290	149

There were 122 additional comments on other facilities, with Kings Pond receiving 16 mentions. Of the others, only the Allen Gallery and the Curtis Museum exceeded 10 comments.

However the range of facilities available and general level of usage demonstrate the need to maintain and enhance the offering to an expanding population. Greater co-operation between related operators should achieve improved efficiencies as funding comes under more pressure.

**Encourage the Alton Town Council to offer a co-ordinating role to local organisations in order to improve and promote the usage and financial health of the town’s range of amenities.**

## **SPORTS CENTRE**

Sports Centre is used extensively and being more than 10 years past its anticipated life expectancy, needs urgent replacement or major renovation. A Consultant's report, commissioned by EHDC, concluded that Sports Centre replacement by 2017 was best option.

The original report was deemed unsatisfactory, so new consultants were appointed to confirm requirements, location and sources of funding.

The overall purpose of the commission is to establish a clear delivery strategy and programme covering design, planning, procurement and funding arrangements for a replacement Alton Sports and Leisure Centre at Chawton Park Road supported by a robust business plan. Aecom's consultant team will support East Hampshire District Council in the delivery of the new facility and associated development on the site. Stage 1 of the commission involves producing the development guidelines, providing feasibility advice & preparation of preferred design options for approval/selection by the council, based on funding advice and cash-flow modeling to be provided. Stage 2 comprises preparing a scheme for submission for planning and advising on procurement of a contractor/delivery partner.

### **1. BACKGROUND**

Alton Sports and Leisure Centre dates from the 1970s, although it has been added to over time. The centre is beyond its design life and is increasing difficult to keep operational. The current management contract of the sports centre expires in 2017.

The Council identified the replacement / refurbishment of the centre as a priority in its Leisure Built Facilities Strategy adopted in the Spring of 2012. It has also been identified in the JCS and the infrastructure delivery plan as being a priority.

Some work has been undertaken to look at available sites and the conclusion was that land adjacent to the existing sports centre offered the most promising opportunity. With the aim of building a new sports centre that would then allow a seamless transition and no break in service provision.

The aim is to fully explore the replacement sports and leisure facility as a Community Leisure facility, including ancillary retail, café and replacement space for the Cardiac Centre; with the potential surplus land released being redeveloped for housing.

### **2. SITE INFORMATION**

The Council owns the land on which the current Centre stands. It also leases some land from Alton Town Council (ATC) in order to provide sufficient car parking and the artificial turf pitch at the existing site. In addition, the Basingstoke and Alton Cardiac Rehabilitation Charity Ltd (Cardiac

Rehab) has an underlease for their building on ATC land leased to EHDC. It is the intention that if a replacement centre was built, this facility would be included as part of the new building.

DC Leisure Management Ltd (DCL) was awarded a five year contract to manage the Council's three Leisure Centres, including Alton Sports Centre, which commenced in April 2012. With the agreement of the Council, DCL has subcontracted to the 'not for profit' East Hampshire Leisure Community Association Ltd (EHLCA). There is also an arrangement via a lease at Alton Sports Centre for the provision of a Climbing Centre, operated by High Sports Ltd, for the same period.

In summary the lease arrangements are as follows:

- Alton Sports Centre - EHDC to DC Leisure. 5-year lease from 2012
- Alton Rehab Unit (the green area on the plan):
  - Alton Town Council to EHDC - 125 years from 1997
  - EHDC to Cardiac Rehab Centre - 125 years from 1997

### **3. THE SERVICES**

The commission involves assisting the council by advising how the new sports centre will be forward funded.

A decision will be needed on the future replacement of Alton Sports Centre by the end of the first quarter of 2015 in order to inform the retendering of the EHDC Leisure Management Contract (which includes centres in Alton, Petersfield and Bordon ) which expires at the end of March 2017. Timetables will need to be constructed to lead up to this decision making point and also to illustrate the procurement options / build timetable for new centre and how this links with the retendering of the Leisure Management Contract for the three EHDC Centres.

The existing sports centre comprises the following:

- 6 lane fixed floor swimming pool and spectator gallery
- Learner Pool
- Diving Pool
- Sports Hall – 6 courts with viewing gallery
- Health and Fitness Studio with 56 stations
- Health suite (Sauna/Steam room)
- Changing facilities for wet and dry side
- Climbing Wall
- 4 Squash Courts
- Café with Kitchen and vending space
- Reception, back office, administration suite and staff room
- 3 Flexible use studios
- Play Zone
- Half size Synthetic Turf pitch (floodlit)

It is envisaged that the new sports and leisure centre will include these facilities as a minimum but also consider other options including an enhanced facility with an 8 lane swimming pool.

The cash flow model will include financial contributions expected from development based on information contained with the Joint Core Strategy and other planning policy documents. including developers' contributions.

Development returns from housing either on site or on other potential publicly owned sites that may be identified by the consultants that are available.

Potential contributions will come from operator/lease income. Borrowing requirements from prudential borrowing , capital reserves etc are being analysed by EHDC

The cash flow model will illustrate the borrowing requirement to forward fund the 2 options and pay back period taking into account the expected income streams and contributions.

Investment appraisal including financial risks to EHDC should be identified such as potential delay/phasing of development contributions

#### **4. OBJECTIVES**

Development of a coherent vision for the Chawton Park Road site as the key community sport and leisure destination for the town and surrounding villages.

- Delivery of robust, deliverable and costed redevelopment options for the Chawton Park Road site. Redevelopment options should consider alternative approaches to providing the following facilities:
  - o replacement sports and leisure centre comprising existing core facilities, including associated access and car parking;
  - o additional optional or enhanced facilities within the sports centre, including potential retail/cafe unit(s), community space/rooms, replacement space for the Cardiac Centre and housing development on potential surplus land
  - o high quality design and sustainability
- Assess initial construction expenditure against costs in use/lifecycle costs

#### **5. SCOPE**

Aecom will be expected to co-ordinate the services of a multi-disciplinary team comprising:

- project leadership / management
- environmental services to provide due diligence, including site investigation comprising desk-top research and site surveys as necessary in relation to ground conditions/remediation strategy, services/utilities, flood risk, topography, ecology, trees, noise, traffic/transport, ar-

chaeology. Summarise findings in comprehensive site investigation/opportunities report, including services infrastructure pack including highways and utilities engineering;

- urban/landscape design to prepare redevelopment options of the Chawton Park Road site to accommodate new sports centre and associated uses, housing on any potential surplus land, together with associated access / car parking, with ground re-profiling and associated engineering works as required;
- architecture – redevelopment options to include concept design sports centre (RIBA stage B in Stage 1, RIBA stage C in Stage 2). Stage 1 architecture deliverables to include accommodation specification for sports centre and associated facilities; redevelopment options to consider phased delivery of the development;
- cost consultancy including advice on: capital (build) costs and revenue (operating) costs
- valuation advice, including cash flow modeling and investment appraisal, including leisure/sports visitor forecasting / revenue estimation and viability assessment of commercial development (including residential development);
- business planning, including procurement and financing advice including delivery programme, to be reported in Business Plan accompanying preferred site redevelopment option report;
- town planning advice, including preparation of high level planning strategy to accompany preferred redevelopment option report.
- Preparation of a planning application and Environmental Impact Assessment screening and scoping do not form part of Stage 1 of this commission. These are expected to be included in Stage 2.

## **6. DELIVERABLES**

- Procurement/financing options paper April 2014
- Production of a costed series of design options for member selection of preferred option (Oct 14) (stage 1)
- Preparation of plans , specification and supporting evidence documents to take project to Outline Planning Application stage 2
- Detailed project management support on planning, programme , procurement route and cash flow model advice
- EHDC Councillor decision to proceed

## 7. CONSTRAINTS

The first stage of the project must be completed by October 2014 and the second stages of the project must be completed by March 2015 with the submission of a planning application.

A period of one month is required for EHDC Councillor approval process between Stage 1 and 2

There were 155 additional comments relating to the Sports Centre in the responses to the **Neighbourhood Plan Questionnaire**, mostly relating to the location of a replacement centre, which for all but a handful should remain at or near the present site.

**Policy – Support the policy of EHDC to provide a replacement Sports Centre on land alongside the current site, ensuring that it is sufficient to meet the needs of the expanding population within its catchment area. The new Sports Centre to be open by 2018, being funded by developers contributions and the resources of the EHDC.**

### HEALTH.

**The Alton Study** reports that 83.9% consider themselves to be in good or very good health (SE average 83.6%; national average 81.4%); and 3.7% consider themselves to be bad or very bad health (SE average 4.4%; national average 5.4%).

#### *The second Objective*

***Objective 3b. To support the provision of adequate Health Services for a growing population.***

Evidence has been sought to understand the effectiveness and efficiency of current health provision and how providers and commissioners would respond to a significant growth in population.

#### **Who are the Health Providers for Alton?**

From April 2013, responsibility for NHS health provision for Alton is under the **North Hants Clinical Commissioning Group (NHCCG)** within the Wessex Area of NHS England. NHCCG is based in Basingstoke and is responsible for 216,000 patients, covered by 20 local GP practices. Alton is on the border of several Clinical Commissioning Groups and as part of NHCCG is linked with GP practices from Basingstoke, Tadley, Odiham, Hook & Hartley Wintney, Kingsclere, Oakley and Overton.

**West Hampshire CCG** starts at the western edge of Four Marks and covers a much larger population down through the New Forest and up to Andover. **NE Hants and Farnham CCG** starts just

beyond Bentley, and includes Crondall and Binsted. **SEHants CCG** includes practices in Bordon/Liss.

GP practices are the principal first port of call for routine health requirements for Altonians and the town is well served by two GP practices. **The Wilson Practice**, situated just beyond the eastern edge of the town centre, and **Chawton Park Surgery** at the western end of Alton. For historical, geographical, family and other reasons, both practices serve patients well beyond the town boundaries, which accounts for their combined patient numbers being well in excess of the town's current population. Beyond Alton, the Boundaries Surgery in Four Marks serves approx 3,500 people and Bentley Surgery approx 2,800.

**The Wilson Practice** operates from 'The Alton Health Centre' serving 13,800 people and has been providing health care for patients in Alton and surrounding villages for over 60 years.

The doctors practise family medicine offering 50,000 consultations a year, supported by a nursing team extending this capacity, the minor injuries unit treats some 1000 minor injuries every year.

The practice provides cover to seven nursing or residential homes and offers an occupational health service to local businesses. The team consists of **10 doctors, 6 nurses and 3 nursing assistants**, and a management/admin team of 9 receptionists and a total of 11 managers, secretaries and admin staff. Within the building there is a separately operated community pharmacy, Anstey Road Pharmacy.

**The Chawton Park Surgery** was established in 2005 after a review of health provision in Alton had established that additional physical capacity was required to meet the growing needs of the town. A team of doctors from the Alton Health Centre moved to new purpose built premises and now serves approx. 9,700 people. The team has since expanded to the current team of **10 doctors, 4 nurses and 3 nursing assistants**, supported by 10 administrative staff and 8 receptionists. The health provision has recently been enhanced by the addition of a pharmacy – Chawton Park Boots.

**Pharmacies** – In addition to the two pharmacies mentioned above, Boots and Lloyds are located in the High Street.

The financing of GP practices comes directly from the NHS, similarly for dentists and opticians, although excluding the private element of these businesses. However, North Hants Clinical Commissioning Group (**NHCCG**), is responsible for monitoring the operations of all these health providers, requiring the regular submission of a range of data.

The **NHCCG** officially came into existence on 1<sup>st</sup> April 2013 when PCTs and SHAs closed, and is now responsible for the commissioning of the local health services that it considers will meet the local needs of the resident population. The establishment of Clinical Commissioning Groups is intended to bring greater clinical (GPs, plus consultants and other specialists) input into the development and redesign of services for patients. Closer integration between health and social care provision is also a key objective of CCGs.

The **NHCCG** budget for 2013/14 was £208.5m after extracting £5.22m running costs, which produces an

expendable sum of £969 per patient. This places patients served by NHCCG at 204 out of 211 CCGs in England with regard to patient funding. (Average CCG gets £1150 per patient).

The main areas of expenditure are - Hampshire Hospitals £112m, Other hospitals £8m, Ambulance £12m, Mental Health (inpatient and community) £13.9m, Community Services (nursing, therapy, community hospital inpatients and related clinics) £15.7m, Continuing Care £13.8m, Prescribing £26.7m, GP out of hours services £1.57m, Enhanced Services £0.72m.

The large majority of Alton residents requiring hospital treatment would attend one of Hampshire Hospitals Foundation NHS Trust's facilities at either, Basingstoke and North Hampshire Hospital or the Royal Hampshire County Hospital in Winchester.

### **Basingstoke and North Hampshire Hospital**

Building work for Basingstoke District Hospital began in 1969 and it opened in 1974. 30 years later a purpose built Diagnosis and Treatment Centre (DTC) was added on the site.

Most of the services are provided from Basingstoke and North Hampshire Hospital, but also provided are outpatient and assessment services from **Alton and Bordon community hospitals**.

Basingstoke and North Hampshire Hospital has around 450 beds and provides a full range of planned and emergency services. These include specialist services for rare or complex illnesses for patients across the UK, including liver cancer, colorectal cancer and pseudomyxoma peritonei (a rare lower abdominal cancer).

The regional haemophilia service is based at Basingstoke and North Hampshire Hospital and there are also links with University Hospital Southampton NHS Foundation Trust, Frimley Park Hospital NHS Foundation Trust, Royal Surrey County Hospital NHS Foundation Trust and Royal Brompton and Harefield NHS Foundation Trust for some specialised services.

In 1999 it became the first hospital in Europe to perform surgery using equipment operated by voice commands.

### **Royal Hampshire County Hospital**

The first Hampshire County Hospital was founded in the centre of Winchester in 1736. It moved to its present site in Romsey Road in 1868, with support and advice from Florence Nightingale, and was granted its Royal prefix by Queen Victoria.

Royal Hampshire County Hospital provides a full range of general hospital services including accident and emergency, general and specialist surgery, general medicine, intensive care, rehabilitation, chemotherapy, diagnostic services, out-patient clinics and paediatric care.

The site also houses Florence Portal House (which provides maternity, neonatal, breast screening and some gynaecology services) and an education centre.

### **Southern Health NHS Foundation Trust**

Southern Health NHS Foundation Trust provides community health, specialist mental health and learning disability services for people across the south of England covering Hampshire (including Alton), Dorset, Wiltshire, Oxfordshire and Buckinghamshire. It is one of the largest providers of these types of service in the UK. It employs around 10,000 staff who work from over 225 sites, including community hospitals, health centres, inpatient units and social care services.

The services include:

- [Mental health services](#) – treatment and support to adults and older people experiencing mental illness. (Solent Health NHS Trust provides equivalent services for children and adolescents). Also treatment to adults and young people, in secure and specialised settings.

- **Community services** – community health services provide support and treatment to both adults and children. Care is delivered in community hospitals, health centres, GP surgeries and in patients’ homes. We also provide a stop smoking service (Quit4Life). Solent Health NHS Trust provides sexual health and family planning services to the population of Alton and the surrounding areas.
- **Learning disabilities services** – community learning disability teams work in partnership with local councils to provide assessment and support for adults with learning disabilities. SHNHST also provides specialist inpatient services for this group of patients.

**Southern Health NHS Foundation Trust operating income** in the year to 31 March 2013 was £332.6M, with operational costs of £326.1M. .

### Other Health Facilities

The Office for National Statistics (ONS) also records that Alton has 7 dentists, 2 orthodontists, 5 opticians, 2 chiropodists, 2 chiropractors, plus private osteopathy and physiotherapy clinics and a Cardiac REHAB (and preventative care) Centre adjacent to the Alton Sports Centre.

Alton also has 4 nursing/residential care homes offering accommodation for the elderly, with a capacity for 214 residents and a number of sheltered/supported housing schemes.

### Seeking the opinion of residents, the Neighbourhood Plan asked –

#### *Q20 Does healthcare provision (e.g. doctor, dentist, pharmacy) in Alton currently meet your needs and those of other family members?*

Over three-quarters of responses were positive (590 out of 755). There were 239 additional comments, both negative and positive, covering a range of health related issues but well over a half referred to the difficulty experienced in obtaining an appointment with one’s own doctor.



General practice nationally is under significant pressure as a consequence of an aging population, increasingly complex performance recording and reporting frameworks, greater requirement for GP involvement in commissioning issues, increased awareness that more patients can be treated closer to home (ie in the community rather than in an acute hospital setting) and increased demand from patients for minor/self-limiting complaints.

The Wilson Practice reports that it is working close to capacity currently, but in times of local or national crisis, such as a pandemic, all local practices have contingency plans, developed with the support of North Hampshire Clinical Commissioning Group (working under guidance/direction from the Department of Health) to shape how the practices prioritise patients and manage staff availability.

Chawton Park Surgery (CPS) reports that it is currently working to capacity in terms of personnel. Any further population increase would require an increase in the number of GPs, nurses, HCAs and ancillary staff. In the past this would have been met by an increase in "capitation" payments to the GP surgeries; in the current financial climate there is a "real" reduction in practice incomes, and we cannot assume that CPS will be able to increase capacity and run a viable practice. Some practices in Hampshire have become non-viable and have handed their contracts back to NHS England.

In terms of infrastructure, CPS is probably capable of handling a fifteen percent increase in patient numbers; however it would need to increase the number of parking spaces, by twenty percent.

Local practices note that it is becoming increasingly difficult to recruit good quality GPs and nurses due to the relative unattractiveness of General Practice, compared to Hospital specialties. The British Medical Association and the Royal College of General Practitioners have both recently launched major campaigns to highlight both the shrinking budget (in real terms), with which general practitioners and their teams are expected to do an increasing amount of work, and the pressure on services, low morale and consequent recruitment issues that are beginning to have a real effect on patient experiences locally and nationally.

The population, as a national phenomenon, is aging, but although this is to be welcomed, the number of patients with multiple health problems inevitably increases too, generating additional demand on hospital and community services. As this 'demographic time bomb' starts to impact, services for people with dementia are going to be hit especially hard, along with orthopaedics and diabetic services.

**The Alton 2020 Vision for Health stated –**

**Local health, welfare and social services will be further strengthened, thereby reducing the need for residents to travel.**

*The Questionnaire for Alton residents in 2014 asked -*

*Q21 How easy is it for you/other members of your household to access these services from your home at the current venues?*

- *Healthcare provision (e.g. access to GP etc.)*
- *Hospital facilities*
- *Health Centres (e.g. clinics for ongoing conditions)*

Respondents were asked to indicate whether it was A.Very Easy, B.Easy or C.Difficult

Whilst there were 755 respondents, not all answered every question in this section. There were 196 specific additional comments, particularly concerning difficulties in respect of transport to hospitals.



Although, as stated above, many Altonians found it difficult to obtain an appointment with their own doctor, approximately 51% considered it very easy and a further 42% easy to access their local GP facilities,

No specific hospitals were named, but for A&E etc Alton residents would normally visit either the North Hants Hospital at Basingstoke, or the Royal Hampshire County hospital at Winchester, the distances to each being approximately 13 and 20 miles respectively. Whilst both can be reached by bus, a change is required and the service is neither convenient nor frequent. Most visits would be undertaken by car, with those not owning a car relying on family or a dedicated band of volunteers. Hardly surprising therefore that question responses were much lower at 17% Very Easy, 55% Easy and 28%Difficult.

Treatment for ongoing conditions is largely carried out at the two GP surgeries in the town or Alton Community Hospital, where several specialists from Basingstoke hold regular clinics. Question responses of 38% Very Easy, 53% Easy and 9% Difficult, reflect the fact that most of the necessary support can be arranged locally.

A mobile cancer treatment unit has recently commenced regular visits to Alton.

A team of midwives from HHFT uses the Community Hospital as an admin hub and sees patients within their own GP practice.

There were no specific questions in the survey concerning dental, ophthalmic or other health requirements. Neither was there reference to the ambulance service, although it should be noted that the time taken for ambulance responses in Alton has regularly caused local concern and been the subject of local newspaper articles.

## **The Impact of 25% Population Increase in Alton**

The GP Practices were also asked to comment on anticipated additional difficulties/pressures, including premises constraints, if, as anticipated, the population of Alton increases by say 5,000 in the next few years. It is recognised that, historically, extra funding follows any increase in patient numbers, although the sums do not necessarily provide fully for additional doctor and ancillary staff that may be required. Furthermore, feedback from the local practices and recent national press comment has suggested there might well be increasing difficulty in obtaining suitable new staff. Other potential issues, including an aging, and therefore potentially increasing frail sector of the population, increasingly obesity in the younger population and the forecast that one in three people will die suffering from dementia and related conditions by 2030.

There is growing demand for health services from the existing population owing to an ageing population – an increasing number of people living with long-term conditions such as heart disease, asthma, diabetes, dementia and increased frailty, and the increasing pressure, appropriately so, to ‘treat people closer to home’ and keep them out of secondary care (general hospital), where possible.

**The Wilson Practice** supports the patient centred approach to health planning and is committed to being at the centre of first class primary care, but recognises the increased pressure on an already stretched community health network this is creating.

To cope with this, and an additional 25% increase in population will require an additional 20 – 25% ‘front line staff’ and, depending on technology, change in reporting requirements and efficiencies of scale, and increase in ‘back room’ staff of between 10 – 15%.

With regard to accommodating these additional personnel, **Alton Health Centre** has space that the practice, with forward planning and appropriate funding, could expand into, and sufficient parking to support this extra patient traffic.

The town is unlikely to be considered large enough to justify a branch surgery elsewhere and current thinking is that satellite operations divide attention and resources and are less efficient to operate. As long as the practice continues to be deemed accessible by town and village residents it would seem more appropriate to expand on the existing site.

A partner at the **Chawton Park Health Centre** comments –

“The NHS has always been a rationed system and always will be. The savings that are being made now are tightening this process and now services are being significantly restricted. An increase in population against this background represents a significant threat to services, and often it is the community services that suffer disproportionately. We cannot see this changing in the short to medium term.”

**Matthew Shehan**, Area General Manager – North Hants, of **Southern Health NHS Foundation Trust** comments -

“The NHS as a whole is facing challenges of increase population and increasing levels of complex patients in an aging population. This includes changes in people’s physical health needs but also in their mental health needs and the particular nationwide and local challenges for patients with dementia. Southern Health NHS Foundation Trust services within Alton also face these challenges and also challenges in growth of local towns through new housing. Whilst these challenges are not unique to Alton or even Hampshire any large population changes within small towns will have a bigger impact than similar changes in larger urban areas.”

“Our services within the Alton area are working within an Integrated Care Team, which is structured around the four GP practices in the area. The community services for both physical and mental health care are subject to the same pressures as GP surgeries currently. Any increase in the population would create the same pressures as the practices have already outlined and would therefore need similar considerations.”

**North Hampshire CCG Operating Plan 2013/14** notes –

### The Burden of Ill Health

Increasing life expectancy and rising levels of long term conditions will inevitably lead to an increased need for health and social care resulting in financial pressures across both health and social care systems. The main health conditions for provision or increase in adult social care are dementia (29%), cancer (14%), stroke (13%) and diabetes (10%).

Dementia is also the main condition mentioned in carer breakdown and for requiring care on discharge from hospital. Primary care and community services have a key role to play in prevention and delay in the numbers requiring social care.

The NHCCG Operating Plan goes on to highlight other areas of ongoing and potentially increasing concern including - Circulatory diseases, which are the main cause of death nationally and locally. Cancer, where the incidence is similar to the national average, Respiratory Disease, Diabetes, Mental Health, Falls and Musculoskeletal Conditions.

Dr Hugh Freeman, Chairman of NHS North Hampshire Clinical Commissioning Group, in his introduction to their Strategy 2014-19, states that:-

“Caring for more people in the community is high on our list of current projects that are beginning to transform the lives of local families. We have been working closely with the local authority to integrate our services on the ground, identifying people at risk of a serious decline in their health and then working with them to stop that decline before it happens. This is giving people the confidence and proper support to stay healthily and safely at home even with significant frailties. This project has a way to go and later this year will expand to include (when needed) a same day assessment by a consultant and then if possible the patient will return home. We will also have an increasing ability to rehabilitate people who, for whatever reason, begin to lose their independence. This is all designed to keep people independent for as long as safely possible.”

### **Summary**

Alton might therefore consider that at present Health provision is generally good and adequate for the current residents, apart from difficulties of access to main hospital facilities.; however an expectation of increasing financial pressures, together with an ageing population present possibly the areas of greatest concern in the future.

The two Alton GP Practices should be able to handle a 25% increase in the town’s population, through an appropriate increase in personnel and premises expansion, although harbouring concerns over potential financial constraints which pose a threat to services, especially the community services.

**Recommendation – Lobby/work with the NHCCG and all local providers to ensure that capacity is increased commensurate with population growth such that standards and levels of provision of all health services are maintained at least at the level currently available.**

**Health References** (in order of first citation)

*The Alton Study. Report by urban Initiatives Studio Ltd, June 2013 for EHDC*

*NHS North Hampshire Clinical Commissioning Group, Operating Plan 2013/14*

*The Wilson Practice*

*Chawton Park Surgery*

*Public Health England. Local Health. Report Rowan ICT (Alton & District) Map and statistics*

*A Demographic Profile of Hampshire, 2012 - 2019, HCC 2013*

*Alton 2020 A Plan to Shape Alton's Future, ATP 2005*

*Southern Health NHS Foundation Trust*

*Alton Neighbourhood Plan: Analysis of Results from Community Questionnaire and Other Public Consultation, February-March 2014 (CQ), ATC 2014*

**RECREATION**

***The third Objective***

***Objective 3c. To support the retention and development of new public open space and sport/recreational facilities, in line with population growth.***

**The Neighbourhood Plan asked –**

***Q22 Thinking about your surroundings and open space within the parish, which of the following would you like to see over the next 14 years? Please tick as many as you wish.***

There were 686 responses to this section, as charted below

Playing fields	440
Children's Play Area	418
Picnic Areas	318
Allotments	347
Sports Centre	558

Other	68
Comments - What	333
Comments - Where	333

Other	68
Sports Centre	558
Allotments	347
Picnic Areas	318
Children's Play Area	418
Playing fields	440

**The above responses give weight to several known areas of insufficient provision – Playing fields - junior football teams frequently have to travel to surrounding villages in order to find pitches available for hire.**

**Children’s play areas – many under severe pressure at peak times.**

**Allotments – the Town Council’s waiting list is now approaching 100. ??**

**Sports Centre Replacement – regularly tops the poll as ‘most wanted’ facility.**

### **PUBLIC OPEN SPACE IN ALTON**

**The Open Spaces of Alton are keenly guarded by its townsfolk, such that the premier response given by local residents during the 2020 Consultation was noted in the report as:-**

**“Protect and enhance all existing parks, defined green space and allotments, minimising development on green spaces”.**

The following is a brief description of public open space in Alton and properties and their basic uses.

The source is “LAND AND OTHER PROPERTIES MANAGED BY THE COUNCIL” produced by Alton Town Council 2011.

### **Parks and Open Spaces**

#### **Public Gardens**

The Public Gardens comprising 1.8 hectares is laid out with trees, shrubs, roses and flowerbeds which are planted out in the spring and summer months.

There is a bandstand, shelter and various items of children’s playground equipment.

The Bowling Green and Clubhouse is also situated in the Gardens and leased to the Alton Bowling Club, who carry out their own maintenance.

## The Butts

The Butts, which comprises 1.4 hectares, is an open space which was leased to the council until 1981 when the Lord of the Manor presented the freehold to the town.

It is designated as common land and its principal function is for the informal enjoyment of the general public.

## Chawton Park Road

This area comprising 2.4 hectares has not been designated for any specific use.

Planning permission has been granted to erect an outdoor bowling green and ancillary facilities to re-house facilities that may be displaced by the proposed redevelopment of the Coors Sports Ground in Anstey Road.

Parts of the land have now been leased to the Alton Tennis Club, the Indoor Bowling Club, Westbrook Guides and Rehab.

The hard-surfaced floodlit area adjacent to the Sports Centre is leased by the Town Council to the District Council at a peppercorn rent.

## Kings Pond

This area comprises 4.0 hectares in all, is a natural area with many species of wildlife, flowers and trees. In 1997 a major renovation took place as part of a detailed long-term management plan.

Kings Pond has a hard surfaced footpath around the perimeter for easy access and the grass area seen from Ashdell Road is well maintained.

There is a “Kings Pond Trail” which has been published and distributed throughout the town.

## Jubilee Playing Fields

This area comprises 5.2 hectares fully utilised by sports pitches as follows:-

- 2 Cricket Pitches
- 5 Football Pitches

Other occasional sports are accommodated as necessary (stoolball etc).

Town Council staff occupy two bungalows.

There are two pavilions, the Charles Read and Harry Baker situated at either end of the playing fields. The general public, when hiring pitches, uses the Charles Read Pavilion, whereas the Alton Cricket Club uses the Harry Baker Pavilion in the summer, and it is also used by local football teams in the winter.

There are skateboarding facilities (ramps and surfacing) for young people.

### Windmill Hill

This area comprising approximately 10 hectares has not been designated as a formal open space. Until recently the land had been let to a farmer on an annual grazing tenancy, but following a conviction for the ill treatment of animals, the lease was not renewed. The town Council is reviewing its options, with input from the public, for the best future use of this land.

There is a public footpath running across the land giving access to the public. The site of the TV mast is leased to the Independent Broadcasting Authority.

### Anstey Park

This is the largest of the open spaces in Alton comprising 16.4 hectares.

The sports facilities are as follows:-

- 1 Cricket Pitch
- 4 Rugby Pitches
- Rugby Training Area
- 2 Tennis Courts/Netball Courts
- 1 Football Ground Enclosure

The Anstey Park extension area is used for general recreational activities, public open space use and football.

The following clubs have leased sites for their premises within the park from the Town Council:-

- Alton United Youth Football Club
- Alton Royal British Legion
- 8<sup>th</sup> Alton Scouts
- Alton Rugby Club
- Physicals Fitness Club
- St John Ambulance
- Army Cadet Force

The Rugby Club, which pays an annual sum to the Town Council for this facility, provided the floodlights used for Rugby Training.

Anstey Park is used for a variety of functions as well as the recognised sports fixtures.

There is a children's playground, owned and maintained by the council, and a new skatepark facility has recently been added.

## Holybourne Play Area

Situated in London Road this playground is leased and maintained by the council. The Holybourne Play Area is the only publicly accessible recreational area near the centre of the village from which to enjoy nature and admire the outstanding views northwards to Holybourne Down, the nearest alternative play area being a mile away. It holds particular significance for its local community, including children from several local schools, and the many visitors with families and groups of all ages taking advantage of adjacent free parking. Revised description in chart:-  
This is public access land providing outstanding countryside views and recreational use of the play area. There is also some historical interest from Roman remains.

## Allotments

Each allotment is 250 sq m

### Borovere

This area comprises 26 allotments.

### Hawthorns

This is a new site which was released to tenants in April 2011, there are 45 allotments.

### Spitalfields and Wooteys

This area comprises approximately 115 allotments including 3 special needs plots, 2 raised beds and 1 level plot.

### Whitedown

This area comprises 68 allotments.

Total allotment area is 63,500 sq m or 6.35 hectares.

The supporting text also indicates a “recognised standard” for provision of allotments of 0.2 ha per 1,000 people.

Total needed for 17,500 people is 3.5 hectares. Total need for 22,500 people is 4.5 hectares.

## The Dell

The Council acquired this small wooded area of land on Ashdell Road opposite Kings Pond in 1997. It is intended that The Dell will be integrated within the long-term plans for Kings Pond.

## Greenfields Amenity Land

This is an extensive area of hillside, north of a housing development at Northanger Close, which was transferred by the developer to the Town Council in February 1998. The majority of the 16 hectare site, to which the public has access, is let for the grazing of cattle.

The council is also responsible for maintaining a small play area between the housing and the hillside, in addition to a grassed kick-about area and an earth BMX track.

### Flood Meadows

This area of approximately 6 hectares was transferred from East Hampshire District Council to the Town Council in September 2001.

### Chandos Lodge

This area is approximately 5 hectares and is part of the developer's contribution from the Chandos Lodge development. It will be handed over to the Alton Town Council in mid 2015.

### Treloar Heights (Windmill Hill)

This area is approximately 10 hectares and will be handed over by the developer to Alton Town Council if Treloar Heights (Phase 2) gets planning permission and is built out.

### Total current open space

Total current public open space is : 53.2 hectares.

### Increase in population and open space

The public open space if all anticipated development occurs will increase by 15 hectares and will be : 68.2 hectares

The current population of Alton is 17,500. If all the anticipated development occurs of 2,000 dwellings then the population will increase by an estimated 5,000. So the total population would then be 22,500.

Guidance on the provision of open space according to the following minimum standards (expressed as hectares per 1,000 people):

Playing fields 1.6 ha  
Children's playing space 0.6 ha  
Informal space 0.8 ha

Total 3.0 ha

Source is "Open Space, Sports and Recreation Study for EHDC, October 2008"

The supporting text provides some indication as to when it might be appropriate for developers to offer financial contributions in lieu of direct provision. It also contains brief guidance on the location and design of play provision for the different age groups.

Alton's current population of 17,500 people need 52.5 hectares compared to the current open space of 53.2 hectares (i.e. we currently have 0.7 hectares more than the minimum require-

ment). However within the mix of provision, there are insufficient laid-out pitches, especially for junior football.

If Alton's population increases to 22,500 people then we will need 67.5 hectares compared to the 68.2 hectares expected to be available if the current developers proposals are accepted (i.e. we will have 0.7 hectares more than the minimum requirement). However none of the current proposals include additional formal sports areas so there will be an even greater need for more pitches.

**Encourage ATC and EHDC to prioritise the urgent provision of additional playing fields especially for junior football, including within appropriate new developments.**

**Policy – Ensure that the requirements of EHDC JCS policy CP16 are fully met in all future development proposals, with a requirement that the land be handed over in a condition ready for immediate public use, together with sufficient funds needed to cover all normal maintenance of equipment and land for a period of 5 years.**

**Policy – Lobby ATC and EHDC to prioritise the identification of suitable land for additional allotments, either as part of new developments, or funded from developers contributions S106 or CIL.**

## **Part 2 (Evidence to May 2014 to April 2015)**

### **Alton Community Centre**

Progress has been made with trustees' plans (see P5 of this Evidence) for a phased updating of the building, with funding of approximately £20,000 received to facilitate completion of the first phase during late 2014. This comprised the combining of the office accommodation, the creation of a new small meeting room and a new dedicated room for the caretaking staff. Improvements to the heating in the Garden Room were also included.

The announcement of new capital works grants by both the Hampshire County Council and East Hants District Council encouraged the trustees to consider the more ambitious second phase works, including refurbishment of the ladies and gents toilets, soundproofing works to the Main Hall roof and interconnecting doors, plus reconfiguration of the kitchen area. The total cost was estimated to be £90,000 of which the HCC has recently announced grant support of £45,000. The trustees eagerly await the result of their other funding applications so that these works may be commissioned.

### **Alton Sports Centre**

The East Hants District Council received the requested new consultants' report covering the assessed requirements of a replacement Sports Centre (see P7 of this Evidence), following which an outline planning application was submitted on 13 April 2015 under the Ref No 21068/040 on the EHDC planning portal.

### **Health**

The NHCCG commissioned Verve Communications to undertake a wide ranging Alton Strategic Review of health and care services. The findings were initially considered at a well-attended stake-

holder meeting in July of last year and a full report issued on 11<sup>th</sup> August, 2014. The service providers are reviewing their strategic options in the light of the report and financial constraints.

Evidence collated by Councillors Graham Hill and David Willoughby. Updated 17.04.15