

TO: THE EXECUTIVE  
DATE: 25 SEPTEMBER 2018

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**The Blue Mountain Programme (Phase 2)  
Delivery Strategy for the Community Hub at Blue Mountain  
Chief Executive**

**1. PURPOSE OF REPORT**

- 1.1 The purpose of this report is to seek approval of the delivery strategy for a co-located community centre and health care hub for the site at Blue Mountain. The project is being delivered by the Council in partnership with Binfield Parish Council, the East Berkshire Clinical Commissioning Group (CCG) and Binfield Surgery but is dependent upon appropriate funding being available from each partner. Alternative options of a standalone community centre (involving only the Council and Binfield Parish Council) or a smaller standalone community centre provided by the Council alone may be available, and would meet the Council's planning obligations, but the clear preference, of all four parties including the surgery, if a funding package can be agreed, is to provide a co-located health care hub and community centre.

**2. RECOMMENDATIONS**

That the Executive:

- 2.1 **Agree to progress the preferred option to provide a co-located community centre and health care hub at Blue Mountain in partnership with Binfield Parish Council, the East Berkshire Clinical Commissioning Group and Binfield Surgery subject to adequate funding from NHS England for the health care element.**
- 2.2 **Agree to enter into discussions with Binfield Parish Council on the appropriate joint funding of the enhanced community centre.**
- 2.3 **Agree to release funding of £200k from existing S106 income to support the next stages of the project.**

**3 REASONS FOR RECOMMENDATION**The Blue Mountain programme is a priority for the Council. The programme consists of Binfield Learning Village all-through school for 1851 pupils (operated as King's Academy Binfield) and a community centre required alongside 400 new homes at the Blue Mountain site. In the first phase, the Council has delivered the new school which has commenced in September 2018. The next phase requires the Council to deliver the community hub in line with the ongoing building of the new housing by Bloor and Linden Homes partnership.

- 3.2 The development of the Blue Mountain site in accordance with the Site Allocation Local Plan has been previously approved by the Executive. Planning Permission for the Binfield Learning Village and outline planning permission for the standalone community centre has been granted in June 2016. Subsequently, the Council received the land from the former site owner on the basis that an all-through school and community centre will be delivered by the Council. The residential parcel of land was part of the same outline planning permission, which was subsequently sold by

the land owner to Bloor Homes who are now building new homes in partnership with Linden Homes.

- 3.3 Bloor Homes currently estimate that approximately 100 dwellings will be built by winter 2019 or earlier. The S106 agreement does not have a specific trigger for completion of the community centre but there will be an expectation from the developers that the community centre at Blue Mountain is available for the residents between the occupation of the 50<sup>th</sup> to 100<sup>th</sup> dwelling. Based on the quickest delivery route (assuming no delays in scheme approval, procurement, design, planning & delivery) the earliest the Council could deliver the community centre and health care hub (with NHS/CCG funding) is winter 2020. A standalone community centre delivery at the earliest would be spring 2020. Overall, the programme also has several external dependencies, which could negatively impact the programme delivery.

## **4 ALTERNATIVE OPTIONS CONSIDERED**

- 4.1 The Executive agreed in September 2014 that the Council's preferred policy for the development of the new community hubs is to transfer the ownership and management to the Parish and Town Councils. The plan for the proposed community centre at Blue Mountain is based upon this policy and Binfield Parish Council (BPC) has expressed an interest to operate the community centre at Blue Mountain. Under the standalone community centre option, the Council would seek to provide BPC with a long term lease/freehold at a peppercorn rent.
- 4.2 As part of the Development Framework Agreement dated 15 May 2015 entered into with the former owner of the Blue Mountain site, the Council received the land and the former Golf Club house building along with the responsibility to deliver a community centre with a required minimum area of 783m<sup>2</sup>. In the event that the preferred option of a co-located community/health care hub is not achievable, the Council will still need to provide a standalone community centre. Two sub-options for a standalone community centre have been considered:
- 4.2.1 Refurbishment of the former clubhouse building – the existing building is approximately 2100m<sup>2</sup>. A detailed design analysis was completed in consultation with Binfield Parish Council for the refurbishment and partitioning of the building. The cost of an extensive refurbishment to meet the required size is estimated to be £2.57m with a part of the existing building to be mothballed.
- 4.2.2 New build standalone community centre – a new build 'L' shaped design was developed in consultation with Binfield Parish Council. At a cost of £2.91m this was the preferred option of the Parish Council in comparison to the refurbishment option.
- 4.2.3 If the co-located community and health care hub is not deliverable then the Council will need to deliver either of the above two options taking into consideration the available S106 income and any potential contribution from the Parish Council. It is envisaged the cost of the new build would be funded by the Council from existing and future S106 income with a contribution from the Parish Council based on their CIL receipts to cover any shortfall.

## **5 SUPPORTING INFORMATION**

## Background

### Community hub planning

- 5.1 The Council established a Community Facilities Working Group in 2015 chaired by the then Director of Resources. Membership to the group consists of Council officers as well as representatives from the Binfield Parish Council and a Ward Councillor regularly attended.
- 5.2 Originally the working group met to review the design and delivery of a standalone community centre. This included a design review with options of refurbishing the former clubhouse building as well as a new purpose built community centre. The refurbishment cost was estimated at £2.57m and the new build cost at £2.91m. The Parish Council preferred the new build option.
- 5.3 At the same time, there was enthusiasm to develop something of even greater community value to the Binfield area by including a relocated Binfield Surgery and health facilities into the design. As the discussion on a co-located community centre with health care provision gained momentum, the membership to the working group was expanded to include the East Berkshire CCG. The main focus of the group over the last year has been to develop a co-location design with the aim of seeking NHS funding towards the health care elements. The cost of the community centre element of the co-located design is significantly higher than the two standalone options and is estimated at £3.61m. This is now the preferred option of Binfield Parish Council and all other partners if funding is available.

In summary, the three options for the community centre are:

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|----------|--|
| Option A | Standalone community centre by refurbishment of the former clubhouse building at a cost of £2.57m.   |
| Option B | Standalone community centre as a new build at a cost of £2.91m.  |
| Option C | Co-located community centre with health care as a new build at a cost of £3.61m for the community centre element (currently preferred option). Plus an additional £6.34m cost attributable to the health elements. |

### Site Allocation Local Plan and Outline Planning Permission

- 5.4 The Site Allocations Local Plan (SALP) policy SA7 requires the provision of an on-site multi-functional community centre. The proposed area of community space within the former clubhouse will be a minimum of 783m<sup>2</sup>, which on the identified site could easily be accommodated within a new building on the same site, in accordance with policy SA7.
- 5.5 As per the outline planning application (2016), a new building could be proposed through the submission of a future reserved matters application. If that is pursued the building would be no higher than two storeys, with a minimum height of 8m, and a maximum of 9.7m, based on the height of the existing former clubhouse building. Alternatively, a new planning application could be submitted. The route will be decided based on pre-application advice from the Local Planning Authority.

### Concept Design: co-located community centre and health care hub

- 5.6 Assessment has been carried out of the feasibility of either adapting the current clubhouse building or building a new facility to meet the requirements of a collocated community/health care hub. It was not possible to meet the space requirements of the co-located facilities in the existing building and therefore a new build will be required. The preferred option of a new build co-located community/health care hub will require a new planning permission because the proposed area of the building will increase significantly and the use will incorporate health care provision. 31 parking spaces were identified in the outline planning permission. The new build co-located concept design illustrates c. 41 spaces. In addition 66 parking spaces adjacent to the site will be available on a sharing basis with the school. The parking provision is expected to be adequate for the co-located community centre and health care hub. However, at peak hours spaces will inevitably be at a premium.

### Capital Costs and Funding

#### Co-located Community/Health Care Hub

- 5.7 Based on the concept stage, the total cost of the new build is estimated at £9.95m (excluding VAT), which includes provision for estimated inflation 4.5% (2Q19 start on site to 4Q19 completion). Inflation rate will be reviewed and adjustment made on commencement of procurement activities. The apportionment of costs (excluding VAT) between the community centre and the health care areas are as follows:

	<b>Community Centre</b>	<b>Health Care</b>	<b>Total</b>
Area	886m <sup>2</sup>	1252m <sup>2</sup>	2138m <sup>2</sup>
Capital Cost*	£3.61m	£6.34m	£9.95m

\*VAT not included.

#### VAT

- 5.8 It is expected that the Council will develop the capital scheme and then lease the premises to the Binfield Parish Council as a provider of community services and to the Binfield Surgery for delivering health care. Hence, the assumption is that VAT on the capital build will be fully recoverable. The funding contribution from the NHS is expected to be provided as a S256 grant.

#### Community Centre Funding

- 5.9 The community centre funding requirement is £3.61m for a co-located hub. Whilst this is the preferred option, the current estimate of S106 income available to the Council for community centre use is £1.693m, but this is subject to the identified developments being constructed in line with the envisaged timetable. A further estimated £1.2m of S106 funding could be available if other large schemes, which could be expected to generate demand for the community centre and the health facility, are developed in line with current expectations, but this cannot be guaranteed. The breakdown of the sites with estimated S106 monies specifically for a community centre is as follows:

Reference	Development	Amount	Status	Comments
16/00020/OUT	Blue Mountain	Land & Clubhouse	Secured in s106/Developer Agreement	Agreement makes provision for the land and club house for community use.
14/00315/OUT	Amen Corner North	£0.806m	Secured in s106 Agreement	To be paid in 4 instalments. It is likely to be a greater amount due to indexation.
18/00242/OUT	Amen Corner South	£0.887m	Application under consideration	Amount to be secured will be dependent on number of dwellings approved and will be indexed.
<b>Total – current estimate</b>		<b>£1.693m</b>		
N/A	Other possible schemes	£1.2m	Preliminary	Large Schemes yet to be applied for.

### Key

Red	Scheme(s) not secured for S106 contribution.
Amber	Scheme(s) likely to be secured for S106 contribution.
Green	Scheme(s) secured for S106 contribution.

- 5.10 Of course, the estimated realisable income from S106 is unlikely to be aligned with the cashflow required for the project. The majority of the estimated S106 funding will need to be forward spent by the Council and repaid once the income has been realised.
- 5.11 It may also be possible to add S106 contributions for the community centre funding from other developments if the government were to lift the pooling restriction from a maximum of five sites for one scheme and there are smaller S106 sites that could provide an increased income towards the scheme. However, this is clearly outside of the Council's control.
- 5.12 That said, if no further S106 income is generated, an overall shortfall in funding of up to £1.917m (new build co-located community centre cost of £3.61m less current estimated S106 income of £1.693m) could remain for the community centre element of the preferred scheme and this would need to be met collectively by the partner organisations. As indicated above, any S106 income from the additional sites could reduce the funding gap for the community centre, but the remaining gap would need to be subject to a discussion and, hopefully, agreement between the Council and Binfield Parish Council concerning what contribution the Parish Council might make from its CIL receipts or other resources towards securing the enhanced facility.
- 5.13 The potential CIL income to be transferred to the Parish Council attributed to the Blue Mountain development is estimated at £1.957m, although it is, of course, a matter for the Parish Council to determine how that should be used for the benefit of the local area. Specific discussion with Binfield Parish Council for contribution of the parish CIL income has not taken place to date. However, the general principle of utilising CIL income has been discussed at the Blue Mountain Community Facilities Working Group meetings.

- 5.14 If the Executive agree the approach outlined in this report, the Council will discuss the relative contribution details with the Parish Council at the next stage of this project. Members may be interested to note that such an approach would be in line with that being adopted in Warfield, where Warfield Parish Council is also considering committing part of their CIL income towards the planned Warfield Community Hub.

#### NHS/CCG Funding Process

- 5.15 Whilst the Council is responsible for providing a community centre at Blue Mountain, the provision of health care is the responsibility of CCG/NHS. Initial capital outlay by the Council towards the project enabling costs and building works to ensure it goes ahead in a timely manner will need to be met from the subsequent rental income for the long term lease with the Surgery/CCG. The funding mechanism is further explained in Appendix 2.

#### Next Stage

- 5.16 The Council will need to develop the service charge and running cost model for the community centre/health care. Work will also be required to support the CCG in developing the outline business case (including appointment of a joint District Valuer) and the full business case. Similarly, financial modelling will be needed to agree CIL or other contribution with Binfield Parish Council during the next stage of the project. Therefore, it is recommended that the Executive agrees to forward fund the next stage of the project at a cost of £200k as per the recommendation in paragraph 2.3 of this report. Some elements of this cost would be recoverable after the NHS funding is obtained.

#### Procurement and Construction

- 5.17 The Council will act as the developer of the new hub. It will let the contract for the construction of the co-located Community Centre and Health Care hub. In order to deliver as per the outline timetable in Appendix 3, it is recommended that an OJEU compliant framework procurement is used.
- 5.18 For the Binfield Learning Village element (Phase 1 of the Blue Mountain programme) the Council procured the contractor via the Improvement Efficiency South East (IESE) framework. This project realised good value for money and timely delivery for the Council. Using the new generation of the IESE framework now called Southern Construction Framework or similar frameworks such as Scape is likely to provide a quick delivery route along with a high degree of control on design and cost. This will be achieved by developing a robust specification and active project management controls. An outline timetable is attached in Appendix 3.

#### Communications and Community Engagement

- 5.19 As this project has multiple stakeholders, there is a need for a comprehensive communication plan to support the implementation strategy, critical information sharing and achieving a common understanding. During the next stage, the Council will prepare a communications plan to support the delivery of the project.
- 5.20 A visioning workshop has been held on 21 September 2018 for stakeholder mapping, objective setting and outlining the key benefits of the project.
- 5.21 In addition to the meetings of the working group, design consultation will also be undertaken within the local community including patients at relevant stages.

## Conclusion

- 5.22 In summary, the co-located community centre and health care hub is expected to provide community wide benefits to the increasing population of Binfield. Subject to funding, the scheme has the support of Binfield Parish Council and the East Berkshire CCG and it is recommended that the Council also supports the enhanced facility, subject to appropriate funding being agreed by all parties. The funding model for the project is based on multi-stakeholder contribution including Bracknell Forest Council, CCG/NHS and the Parish Council. King's Group Academies as the school provider on the site has been supportive of the proposal to date.
- 5.23 The timetable has very little contingency, therefore, a focused and well managed delivery is essential. The Council will retain the freehold rights to the land and building and will receive part rent from the CCG/NHS as well as likely service charge from the Parish Council and the Surgery.
- 5.24 Commitment in principle has been issued by the CCG, Binfield Surgery and Binfield Parish Council. A PID is due to be submitted by the CCG as part of the bid to the NHS for funding. It is important before proceeding to the next stage of this project that the Executive agree this delivery strategy to secure the community centre and health care hub for the Blue Mountain site for the benefit of the local community.

## **6. ADVICE RECEIVED FROM STATUTORY AND OTHER OFFICERS**

### Borough Solicitor

- 6.1 The Council's Contract Standing Orders provide that decisions to award contracts in excess of £1 million should be taken by the full Executive.
- 6.2 Careful advice will need to be sought on the structure of the ownership and lease arrangements and whether an approval from the Secretary of State would be required.

### Borough Treasurer

- 6.3 The capital requirement will have a cost to the Council, however the exact amount will depend upon the financing of the overall project - which the Council will minimise by the effective use of capital resources (capital receipts, CIL/S106 and borrowing) as part of its overall Treasury Management strategy. Should the Council need to borrow to finance the expenditure every £1m of borrowing will have an approximate revenue impact of £50,000 p.a.

### Director: Place, Planning & Regeneration

- 6.4 The body of the report includes relevant matters from a planning and regeneration perspective.

### Equalities Impact Assessment

- 6.5 The new facilities will be designed and built to comply with current British Standards for accessibility for disabled people.

## Strategic Risk Management

- 6.6 There are several dependencies and risks that are being closely monitored and managed but may adversely affect the cost and programme. The strategic risks to the project are as follows:

### **Strategic Risks**

ISSUE		RISK	COMMENT
1	Affordability Risk	High	<ul style="list-style-type: none"> <li>a. Health care provision in the community hub is dependent upon NHS funding through the ETTF bidding process. If the funding will not be available then only the community centre could be provided to meet the Council's obligation.</li> <li>b. There is a gap in the available funding for the construction of the community centre. A strategy for how to meet the gap is included in this report.</li> <li>c. Rent modelling will need to be completed based on the NHS scenarios for shell &amp; core, first fix and second fix delivery.</li> <li>d. Service charge modelling will need to be completed and gain stakeholder agreement.</li> </ul>
2	Cost Risk	Medium	<ul style="list-style-type: none"> <li>a. The overall scheme is at concept stage, hence cost could shift upwards through design, planning and delivery stages. The cost plan includes a contingency and allowance for inflation.</li> <li>b. Utility companies e.g. Thames Water may require upgrading to their networks and seek such cost from the scheme. An allowance has been made but additional funding could be required.</li> <li>c. Below ground and demolition risks e.g. asbestos, unknown utilities, etc. could delay the programme and increase cost. Contingency is being recommended to cover unknown risk and for fast-tracking the construction programme if required.</li> <li>d. Construction contract will not be awarded unless it can be delivered within the available resources. Risk will remain in terms of site unknowns.</li> </ul>
3	Programme Risk	Medium	<ul style="list-style-type: none"> <li>a. The programme has several external dependencies, hence, may slip by a year to 2021.</li> <li>b. Legal agreements between all stakeholders will need to be completed.</li> </ul>
4	Planning Risk	Medium	Full planning protocols will be adhered to including pre-screening advice. Parking spaces will form a key consideration in the process.
5	Reputational Risk	Medium	The Council has worked extensively with the stakeholders (Parish Council, CCG and Surgery) to develop a co-located scheme including



			commissioning a feasibility study and partnership working. Information has been shared transparently with the stakeholders. With several external dependencies, such as NHS funding, the scheme may not be viable, in which case, the Council will endeavour to deliver a standalone community facility in keeping with the timetable stated in the report.
6	Communications Risk		As this is a multi-stakeholder project, a communications plan will be developed to support proper stakeholder engagement and a unified implementation strategy.
7	Contractor/Supplier Capability Risk	Medium	Optimum procurement route will be selected for the programme.
8	Legal Risk	Medium	Timetable will need to be managed for any planning permission related judicial review process. Approval from the Secretary of State may be necessary for long term lease arrangements.

## 7 CONSULTATION

- 7.1 At the relevant stages of the project consultation will be undertaken. The project team is working closely with the East Berkshire Clinical Commissioning Group, Binfield Parish Council, and the Binfield Surgery. In September, a workshop for the stakeholders to focus on the vision and outcomes has been arranged. The output from the workshop will contribute in developing the Outline Business Case for the NHS funding and also strengthen the partnership with the Parish Council and the Surgery.
- 7.2 At the appropriate stages, pre-planning public consultation as well as the statutory planning application consultation will be undertaken during the pre-construction stage. These will include open evenings and leaflet distribution.

### Background Information

- Concept Plan
- Concept stage cost plan
- CCG/NHS Project Initiation Document
- Letter of Supports from Binfield Parish Council and Binfield Surgery
- Letter of Support from East Berkshire CCG
- Letter of Support from Bracknell Forest Council

### Contacts for further information

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# Appendix 1 – Concept Plan



GROUND FLOOR PLAN 1:100



FIRST FLOOR PLAN 1:100

## Appendix 2

1. The East Berkshire CCG is seeking funding for this project from NHS through a bidding process. The CCG received approval for preliminary funding c. £49k from NHS England for preparing a Project Initiation Document (PID). In August 2018, the CCG submitted an initial funding request (PID) for the NHS England Estates and Technology Transformation Fund (ETTF). ETTF is a multi-million pound investment (revenue and capital funding) in general practice facilities and technology across England (between 2015/16 and 2019/20). It is part of the General Practice Forward View commitment for more modernised buildings and better use of technology to help improve general practices services for patients.
2. At the time of writing this report, it is estimated that the outcome of the PID will be determined by NHS within six weeks but can usually take longer to know the result. Assuming that the scheme is given a go ahead to move to the next level of submission, an Outline Business Case (OBC) will need to be prepared by the CCG for submission to the NHS.
3. The CCG will develop the OBC with input from the Council, the Parish Council and the Binfield Surgery. It is based on the Treasury guidance, which provides a practical “step by step” guide to the development of business cases, using the Five Case Model –using an approach which is both scalable and proportionate.
4. At OBC stage a District Valuer (DV) will be appointed to value the scheme. The Council has requested the CCG that this appointment is made jointly to ensure the valuation is agreeable to CCG/NHS, the Surgery and the Council. The DV will review in detail the build cost, rent payable by CCG/NHS and also review the service charge.
5. The OBC is timetabled to be submitted to NHS England October 2018 to January 2019. Based on CCG’s experience on other schemes, at this stage it is likely the project team will be required by NHS to submit the next stage – Full Business Case (FBC). The purpose of the FBC is to revisit and where required rework the OBC analysis and assumptions building in and recording the findings of the formal procurement.
6. At completion of the FBC stage, it is expected that the funding contribution from the NHS to the Council will be awarded in the form of S256 grant. As the NHS contribution will be a grant, it will not trigger any VAT implication for the capital cost of the project.
7. Based on the above described NHS funding route, CCG has informed us that NHS England has recently agreed the funding policy nationally. This project, along with other CCG schemes, are required to develop costings in two parts:
8. Part 1 – three options have been considered for cost analysis of the health care areas under part 1.
  - a. Shell and Core: construct the building framework that appears complete from the outside, is watertight and incoming services installed up to the health care area. The cost of option a. is £4.29m out of the total cost £6.34m plus VAT for the health care provision (excluding common areas).

- b. First Fix: shell and core plus the installation of internal walls, electrical and plumbing distribution, installing cables, heating and air conditioning ducting and external plant, toilets services, raised access floors if required, suspended ceilings frames where required, fire systems first fix. The cost of option b. is £5.14m out of the total cost £6.34m plus VAT for the health care provision (excluding common areas).
  - c. Second Fix: first fix plus the installation of fixtures and fittings, electrical sockets, radiators but excluding decorations and floor coverings. The cost of option c. is £6.27m out of the total cost £6.34m plus VAT for the health care provision (excluding common areas).
9. The common areas will be fully built by the Council in the above three options.
  10. Part 2 – Fit Out: Wall colours, floorings, furniture, glazed partitioning etc. based on the specific requirements of the Surgery, CCG and NHS.
  11. The cost for both parts will be reviewed by the District Valuer (DV). The overall cost estimate for the health care provision has been divided proportionately based on the cost split of the three options, however it is important to note that a cost breakdown at concept stage is a general estimate which is subject to a change. Under Part 1, one of the three options listed above is likely to be agreed between the Council and the CCG in consultation with the DV. The cost breakdown will then be compared against the capital contribution NHS expects the Council to make upfront against which rent will be paid over the duration of the lease to ensure that the Council is able to recover its cost of delivering the health care provision.
  12. NHS requires that the Council pay the capital cost for the Part 1 during the works stage. Hence the Council will need to forward fund the cost of such works. On completion of Part 1, NHS will pay rent (without abatement) to the Council attributed to Part 1. Such rent will be paid via the CCG/Surgery and adjusted for inflation. The rent will enable capital recovery for the Council on its initial investment. The rent will continue to be paid throughout the tenure of the lease (estimated over 25 years with a possible extension). Scenario modelling during the outline business case stage will determine the period for the capital repayment. Once the capital is recovered further rent receipts are likely to create a revenue stream for the Council.
  13. The NHS will separately pay 100% of the cost of Part 2 fit-out as a S256 grant to the Council. Hence this element will not attract rent payment.
  14. The Council will construct the community centre and common areas fully irrespective of the option selected for completion.

#### Ownership, Rent and Service Charge

15. As an exception to the approval by the Executive in September 2014, it is recommended that the Council retains the freehold interest in the land and the new community centre/health care hub building. Binfield Parish Council is in agreement that the combined facility will be beyond their scope to own and manage.
16. Binfield Parish Council will receive a long term lease from the Council at peppercorn rent for their area of the building. The Head of Terms will be developed and agreed during the next stage of the project.

17. The CCG/NHS requires a long term (probably 25 years with a provision for extension) lease only for the health care area. Rent will be paid via the CCG/Surgery against the capital contribution from the Council towards the initial build stage. The rent will be calculated and agreed during the OBC stage along with the Head of Terms.
18. The Council may manage the overall facility by levying a service charge. Scenarios will be reviewed at the next stage. The service charge is likely to be payable to the Council via the CCG and the Parish Council for their respective areas. This will be calculated and agreed during the OBC stage.

## Community/Health Care Hub outline timetable:

Item No.	Description	Timetable
1.	Concept Design Completed	June 2018
2.	Concept Stage Cost Plan Developed	July 2018
3.	Letter of Support from Binfield Parish Council	July 2018
4.	Letter of Support from Binfield Surgery and CCG	August 2018
5.	Project Initiation Document submitted by CCG to NHS	August 2018
6.	Community Centre Funding secured	Sep 2018 to Feb 2019
7.	Outline Business Case submitted by CCG to NHS	Oct 2018 to Jan 2019
8.	Full Business Case submitted by CCG to NHS	Jan to Feb 2019
9.	Health Care/NHS Funding secured	Feb to Mar 2019
10.	Procurement Plan Approved	February 2019
11.	Specification	February 2019
12.	Project Notification	March 2019
13.	First stage selection – The ‘mini competition’	
14.	The Contracting Authority issues mini competition document to all contractors.	March 2019
15.	The contractors submit mini competition part 1 to Contracting Authority.	April 2019
16.	The Contracting Authority evaluates and invites the top 3 or 4 contractors to submit mini competition part 2.	April 2019
17.	The contractors submit mini competition part 2 to Contracting Authority.	May 2019
18.	The Contracting Authority evaluates and identifies the best bid.	May 2019
19.	The Contracting Authority enters into a Pre-Construction Agreement with the successful contractor.	May 2019
20.	The Contractor completes the pre-construction service to the Authority’s satisfaction.	October 2019
21.	Second stage selection	
22.	The Contracting Authority enters into the enabling works contract.	November 2019
23.	The Contracting Authority enters into the underlying contract for the main works.	November 2019
24.	Construction Phase (subject to enabling works contract)	Nov 2019 to Dec 2020

## Initial Equalities Screening Record Form

<b>Date of Screening:</b>	<b>Directorate:</b> Office of the Chief Executive		<b>Section:</b> Chief Executive's Office
<b>1. Activity to be assessed</b>	The Blue Mountain Site Community Centre and Health Care Hub		
<b>2. What is the activity?</b>	<input type="checkbox"/> Policy/strategy <input type="checkbox"/> Function/procedure <input checked="" type="checkbox"/> Project <input type="checkbox"/> Review <input type="checkbox"/> Service <input type="checkbox"/> Organisational change		
<b>3. Is it a new or existing activity?</b>	<input checked="" type="checkbox"/> New <input type="checkbox"/> Existing		
<b>4. Officer responsible for the screening</b>	Head of Transformation and Engagement.		
<b>5. Who are the members of the screening team?</b>	Programme Manager, Head of Transformation and Engagement and Community Development Manager		
<b>6. What is the purpose of the activity?</b>	The Blue Mountain programme is a priority for Bracknell Forest Council. The programme consists of Binfield Learning Village all-through school for 1851 pupils (operated as King's Academy Binfield) and community centre required alongside 400 new homes at the Blue Mountain site. In the first phase, the Council has delivered the new school which has commenced in September 2018. The next phase requires the Council to deliver the community hub in line with the ongoing building of the new housing by Bloor and Linden Homes partnership. A co-located health care provision is also planned in consultation with East Berkshire CCG.		
<b>7. Who is the activity designed to benefit/target?</b>	Local community of the residents and businesses of Binfield and surrounding areas.		
<b>Protected Characteristics</b>	<b>Please tick yes or no</b>	<b>Is there an impact?</b> What kind of equality impact may there be? Is the impact positive or adverse or is there a potential for both? If the impact is neutral please give a reason.	<b>What evidence do you have to support this?</b> E.g. equality monitoring data, consultation results, customer satisfaction information, etc. Please add a narrative to justify your claims around impacts and describe the analysis and interpretation of evidence to support your conclusion as this will inform members decision making, include consultation results/satisfaction information/equality monitoring data
<b>8. Disability Equality</b>	Y	Positive	New buildings and facilities will be built according to the regulations complying with the Equalities Act 2010. As a community/health function, a review of the appropriate needs has been taken account of in the design.
<b>9. Racial equality</b>	Y	Positive	Community engagement in developing community hub has been undertaken. Surgery has been consulted for the Health Care. The hub will benefit the entire local community.
<b>10. Gender equality</b>	Y	Positive	Community engagement in developing community hub has been undertaken. Surgery has been consulted for the Health Care. The hub will benefit the entire local community. The hub will benefit the entire local community.
<b>11. Sexual orientation equality</b>	Y	Positive	Community engagement in developing community hub has been undertaken. Surgery has been consulted for the Health Care. The hub will benefit

				the entire local community.
<b>12. Gender re-assignment</b>	Y		Positive	Community engagement in developing community hub has been undertaken. Surgery has been consulted for the Health Care. The hub will benefit the entire local community.
<b>13. Age equality</b>	Y		Positive	Community engagement in developing community hub has been undertaken. Surgery has been consulted for the Health Care. The hub will benefit the entire local community.
<b>14. Religion and belief equality</b>	Y		Positive	Community engagement in developing community hub has been undertaken. Surgery has been consulted for the Health Care. The hub will benefit the entire local community.
<b>15. Pregnancy and maternity equality</b>	Y		Positive	Community engagement in developing community hub has been undertaken. Surgery has been consulted for the Health Care. The hub will benefit the entire local community.
<b>16. Marriage and civil partnership equality</b>	Y		Positive	Community engagement in developing community hub has been undertaken. Surgery has been consulted for the Health Care. The hub will benefit the entire local community.
<b>17. Please give details of any other potential impacts on any other group (e.g. those on lower incomes/carers/ex-offenders) and on promoting good community relations.</b>	None			
<b>18. If an adverse/negative impact has been identified can it be justified on grounds of promoting equality of opportunity for one group or for any other reason?</b>	None			
<b>19. If there is any difference in the impact of the activity when considered for each of the equality groups listed in 8 – 14 above; how significant is the difference in terms of its nature and the number of people likely to be affected?</b>	<p>The development team will be structured to include architect and designers who are experienced in designing community/health care provision to ensure that these particular needs are met.</p> <p>Community hub will be planned in consultation with the community. A Community Working Group has been set up attended by Binfield Parish Council, Binfield Surgery and the CCG with meetings every month or as required. A sub working group has been established to undertake the feasibility study, OBC and FBC for the community hub – meeting weekly or as required.</p>			
<b>20. Could the impact constitute unlawful discrimination in relation to any of the Equality Duties?</b>		N	None	
<b>21. What further information or data is required to better understand the impact? Where and how can that</b>	Please contact the Programme Manager for further information.			



information be obtained?			
22. On the basis of sections 7 – 17 above is a full impact assessment required?		N	Statutory consents for Planning and Building Control will ensure that the new accommodation and alternations to existing buildings meet with current statutory requirements for disabled access.
23. If a full impact assessment is not required; what actions will you take to reduce or remove any potential differential/adverse impact, to further promote equality of opportunity through this activity or to obtain further information or data? Please complete the action plan in full, adding more rows as needed.			
<b>Action</b>	<i>Timescale</i>	<i>Person Responsible</i>	<i>Milestone/Success Criteria</i>
Consultation with the Community on an on-going basis	On-going		<b>Ability to demonstrate that consultation has fed back into the design</b>
Consultation with internal and external stakeholders	On-going		
24. Which service, business or work plan will these actions be included in?	The Programme Team will be responsible for ensuring that the accommodation meets the particular needs of the end users and customers.		
25. Please list the current actions undertaken to advance equality or examples of good practice identified as part of the screening?	Community hub scoping to be carried out in partnership with a visioning workshop to be held in early September 2018.		
26. Officers signature Abby Thomas	<b>Signature:</b>  <b>Date: 30/08/2018</b>		