

Upper Lighthorne and Surrounding Parishes Primary Healthcare Objectives

1. **No resident of Upper Lighthorne should have to travel outside of Upper Lighthorne to receive GP services.**

We recognise that residents of Upper Lighthorne currently travel for primary healthcare, but the objective should be that this should no longer be necessary after a certain level of occupancy of the new Upper Lighthorne developments.

2. **No surrounding parish should suffer a degradation of GP services as a consequence of primary healthcare provision for Upper Lighthorne.**

A risk of relying on existing neighbouring GP services to take on Upper Lighthorne patients is that these services become over-stretched. Dedicated provision for Upper Lighthorne is essential, and will likely reduce load on neighbouring services, but must not result in a reduction of existing GP services in surrounding parishes.

3. **A new facility at Upper Lighthorne should be designed with the input of practitioners experienced in the running of such a practice.**

Recruitment and retention of staff is made easier where there is a facility that is fit for purpose. Retention of staff improves continuity of care. Adaptability allows for expansion, facilitates acting as a spoke for the main hubs at Warwick and Coventry, and enables response to situations such as COVID vaccinations.

4. **On site provision should be made available as soon a practically possible.**

The longer it takes to open a facility on site, the more new residents will attempt to register with facilities in surrounding villages, risking over-subscription, or difficulty in registering. The Integrated Care Board (formerly CCG) must reach a conclusion as soon as is practical so that options are not limited simply as a consequence of delay.

5. **There should be no shortage of funds for the capital investment needed for the appropriate solutions.**

GLH was presented as a landmark new settlement, the largest in the district outside of Stratford itself. Both SDC and the developers assert a desire for on site primary healthcare. As such there should be no question of a lack of capital funds being available for the optimal solution.

This is the settled view of the following parish councils:

- Avon Dassett
- Charlecote
- Ettington
- Gaydon
- Lighthorne
- Oxhill
- Ratley & Upton
- Upper Lighthorne
- Bishop's Itchington
- Chesterton & Kingston
- Farnborough
- Harbury
- Moreton Morrell
- Pillerton Hersey
- Shotteswell
- Warmington & Arlescote
- Burton Dassett
- Combroke
- Fenny Compton
- Kineton
- Newbold Pacey & Ashorne
- Radway
- Tysoe
- Wellesbourne & Walton