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BY ONLINE SUBMISSION ONLY

24 January 2025

RE: Consultation on draft Greater Cambridge Planning Obligations Supplementary Planning Document

Thank you for the opportunity to comment on the above document. The following comments are submitted by NHS Property Services (NHSPS) for and on behalf of NHS Cambridgeshire and Peterborough ICB (C&P ICB). C&P ICB has delegated authority from NHS England for the commissioning of most NHS health services in the Greater Cambridgeshire area. This includes consideration of estate requirements to deliver these services.

General Comments on Health Infrastructure to Support Housing Growth

The delivery of new and improved healthcare infrastructure is resource intensive. The NHS as a whole is facing significant constraints in terms of the funding needed to deliver healthcare services, and population growth from new housing adds further pressure to the system. Residential developments often have very significant impacts in terms of the need for additional healthcare provision for future residents, particularly primary care. To ensure the delivery of necessary health infrastructure, it is essential that new development makes a proportionate contribution to funding the health infrastructure needs arising from new homes.

Given health infrastructure's strategic importance to supporting housing growth and sustainable development, it should be considered at the forefront of priorities for infrastructure delivery. The ability to continually review the healthcare estate, optimise land use, and deliver health services from modern facilities is crucial. The health estate must be supported to develop, modernise, or be protected in line with integrated NHS strategies. Planning policies should enable the delivery of essential healthcare infrastructure and be prepared in consultation with the NHS to ensure they help deliver estate transformation.

Detailed Comments on draft Planning Obligations SPD

We support the inclusion of Chapter 22: Healthcare within the SPD and the provision of details of the means in which the Council expects developers to mitigate the impact of development on local health provision. It is noted that the SPD recognises the role of C&P ICB in assessing impact on local health infrastructure and in determining how this is to be mitigated within the local estate. This sets a clear expectation of the provision to be made for essential healthcare infrastructure through on-going engagement with the ICB as well as the methodology that will be followed in determining required level of additional primary care provision will support the effective implementation of the SPD.

Draft paragraph 22.23 details the standard wording to be used within the S106 Heads of Terms where a financial contribution towards primary care is required. The final two sentences of this paragraph should not form part of the standard wording example – appears that the document formatting has pulled this up into the example wording.

To ensure that the SPD accurately reflects the provision and commissioning standards of C&P ICB, the suggested wording amendments recommended to be made are (in *red italics*) as follows:

“22.23 Where a planning obligation is likely to be required, the applicant should indicate this in any draft *S106 Heads of Terms* proposed. For applications where financial contributions towards primary care are required, the following standard wording will generally be used:

‘Health Contribution: means the sum of £x (index linked) to be applied by the Cambridgeshire & Peterborough Integrated Care Board (ICB) or subsequent successor body towards the provision of additional primary care led capacity through the extension and/or remodelling of [insert name of facility], or through the extension or remodelling of other facilities within the local primary care networks (PCNs) – or subsequent successor - in which the development is located, or through the extension and/or remodelling of other facilities that would specifically provide services to serve the development <new paragraph added>

22.24 Expenditure of planning obligations related to primary care facilities will normally be area-based on facility within the local PCN(s) serving the development. In limited circumstances expenditure may be directed at a wider scale where this is deemed necessary to support service delivery objectives.

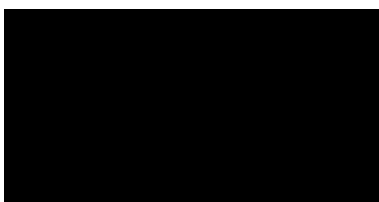
22.24 22.25 For smaller schemes, to enable the required additional capacity to be in place...”

Conclusion

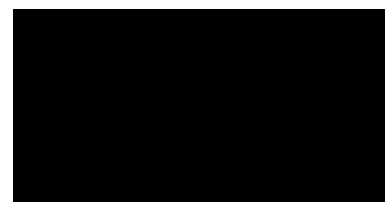
Health provision is an integral component of sustainable development – access to essential healthcare services promotes good health outcomes and supports the overall social and economic wellbeing of an area. We support the approach of the draft Planning Obligations SPD (Chapter 22) but consider the suggested amendments above will contribute to ensuring the SPD reflects adopted health commissioning standards.

Should you have any queries or require any further information, please do not hesitate to contact us.

Yours sincerely,



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For and on behalf of NHS Cambridgeshire and Peterborough ICB

