



**Bath and North East Somerset,
Swindon and Wiltshire**
Integrated Care Board

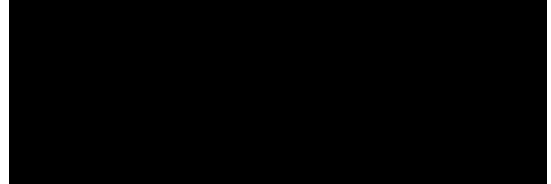


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NHS Bath and North East Somerset,
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BY EMAIL ONLY

RE: Consultation on draft Local Plan 2040 Regulation 18 Stage 2

Thank you for the opportunity to comment on the above document. The following representations are submitted by NHS Property Services (NHSPS) on behalf of Bath and North East Somerset, Swindon and Wiltshire (BSW) ICB. Our comments on the Local Plan consultation reflect how the ICB and various system partners are working together at the system level to deliver the health priorities as articulated within the BSW Integrated Care Strategy.

NHS Bath and North East Somerset, Swindon and Wiltshire ICB

The NHS BSW ICB covers a large and varied geographical area that includes the densely populated and growing town of Swindon to the north, the historic city of Bath, Salisbury plains to the south, and the rolling Mendip Hills to the west. The ICB commissions (plans, designs, and purchases) many of the health services that the local population use, including medicines, hospital care, urgent and emergency services, mental health care, GP services, community pharmacy, dentistry, general ophthalmology (eye care services), and various community services.

To ensure that our health and care services meet the healthcare needs of the population living across BSW, we have three localities, each represented by place-based partnerships called Integrated Care Alliances (ICAs). Each ICA is made up of local doctors, hospital chief executives, clinical commissioners, council officers, patient and voluntary and social enterprise sector groups who lead the detailed design and delivery of integrated services across their localities and neighbourhoods. The BSW ICB and its partners are therefore well placed to identify the implications of the Local Plan on healthcare infrastructure and services in the local area.

NHS Property Services

NHS Property Services (NHSPS) manages, maintains and improves NHS properties and facilities, working in partnership with NHS organisations to create safe, efficient, sustainable and modern healthcare environments. We are part of the NHS, and partner with local NHS Integrated Care Boards (ICBs) and wider NHS organisations to help them plan and manage their estates to unlock greater value and ensure every patient can get the care they need in the right place and space for them.

General Comments on Health Infrastructure to Support Housing Growth

The delivery of new and improved healthcare infrastructure is significantly 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 development adds further pressure to the system. New development should make a proportionate contribution to funding the healthcare needs arising from new development. 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.

Residential developments often have very significant impacts in terms of the need for additional primary healthcare provision for future residents. 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 Local Plan Policies

We note from the supporting documents published alongside the Plan that it has been informed by ongoing engagement with the Hampshire and Isle of Wight ICB to understand strategic and local clinical health needs. Our detailed comments set out below are therefore focused on policies with cross-boundary implications for BSW ICB, as related to healthcare infrastructure requirements arising from strategic sites in the vicinity of Ludgershall.

Policy SS6: Meeting the Housing Requirement

Northern Area Policy NA7: Land to the East of Ludgershall

Northern Area Policy NA8: Land to the South East of Ludgershall

The spatial strategy includes two strategic site allocations that together will deliver 1,500 new homes to the east/southeast of Ludgershall. These site allocations are proposed alongside Wiltshire Council's proposed site allocation of 1,220 homes at Land at Empress Way (Policy 40 in Wiltshire's Regulation 19 draft Local Plan). This level of growth will have a significant impact on the provision of healthcare services within Ludgershall, where services are commissioned by the BSW ICB. To support the proposed level of growth, there will be a requirement to deliver a significant increase in healthcare infrastructure capacity. We welcome the reference in paragraph 4.86 to the need for a co-ordinated approach to the masterplanning of the three sites across council boundaries, and request that further detail be added to the site allocations to provide clarity on how additional healthcare capacity required to meet the needs arising from proposed housing growth will be delivered.

To provide a sound basis for securing necessary contributions towards healthcare, both site allocations should include a specific requirement to deliver funding contributions towards healthcare. Doing so would improve the effectiveness of the strategic site allocations in addressing essential healthcare infrastructure needs and would align with the planning obligations identified in the Strategic Sites Viability Testing (Table 4.12.1, December 2023) and draft Infrastructure Delivery Plan (January 2024). Setting the expectation for developer contributions towards

healthcare within NA7 and NA8 would also ensure cross boundary consistency as the BSW ICB has identified a similar requirement in Wiltshire's emerging Local Plan.

In developing the masterplans for NA7 and NA8, the need to work with the BSW ICB to determine the most appropriate form of healthcare mitigation should be highlighted. While the IDP correctly states that the Castle Practice is the nearest primary healthcare facility, it fails to reference the BSW ICB as a relevant body. This should be clarified as part of updating the IDP in preparation for Regulation 19. As part of this BSW ICB would welcome engagement with the Council to further refine the primary healthcare infrastructure requirements and associated indicative capital costs of delivery.

The Castle Practice is part of the Sarum North Primary Care Network (PCN), which also includes sites in Amesbury as well as the Castle's branch surgery in Tidworth. The Castle Practice is currently operating close to space capacity for the provision of primary care services to the existing residential population. This means there is minimal space capacity in the locality that could accommodate additional primary care provision for new housing growth. It should be noted that other healthcare and social care services will be impacted by housing growth, and impacts on these wider services will need to be considered and factored in over time in coordination with both BSW ICB and the Hampshire and Isle of Wight ICB.

Based on BSW ICB's standard approach to determining the direct impact on local healthcare services from housing growth, the 1,500 homes proposed by NA7 and NA8 will together generate an approximate additional primary care floorspace requirement of 309sqm. The associated capital cost of delivery is estimated at between £1.7 million (extension and refurbishment) to £2.2 million (new build). These figures are initial estimates only, relying on assumptions regarding average household size in Test Valley from 2011 Census (2.4 persons per household), a floorspace requirement of 150sqm GIA per 1,750 patients (aligned to HBN 11-01), and NHSPS build cost benchmarks for primary care facilities in 2022, rebased to Test Valley. This equates to a per unit contribution in the range of £1,100 which is notably higher than the healthcare contribution of £621 per dwelling assumed in the strategic sites viability testing.

As the BSW ICB develops and refines its estates strategy, these assumptions may also be refined. Specific mitigation projects have not been identified at this time because these will depend on the specific location and timing of growth, as well as the model of care and PCN strategy at the time the development comes forward. The general expectation of BSW ICB is that mitigation of the direct impact on local healthcare services should be secured as a financial contribution in the S106s linked to the grant of planning permissions within the site allocations. It is important that the drafting of any S106 ensures that funds are secured for the BSW ICB as the commissioning body for services in Ludgershall, with appropriate flexibility to align with BSW ICB commissioning processes and estates plans.

Policy COM1: Delivering Infrastructure

Policy COM1 sets out the approach to ensuring the timely delivery of required on-site and off-site infrastructure to mitigate the impact of development, via direct provision and/or a financial contribution secured through legal agreement. Implementation of the policy is supported by the Infrastructure Delivery Plan (IDP), which sets out the borough's infrastructure requirements as well as identifying site-specific infrastructure requirements for the strategic site allocations. We support the general approach to infrastructure delivery set out within Policy COM1.

It would be helpful if the supporting text included examples of essential infrastructure, especially in relation to prioritisation of developer contributions where viability constraints are demonstrated. The provision of healthcare services to meet the needs of new residents is essential infrastructure and should be given a significant amount of weight in decision-making. Health infrastructure should be clearly identified in the Local Plan as essential infrastructure, with an expectation that development proposals will make provision to meet the cost of healthcare infrastructure made necessary by the development. Related to this, it would also be beneficial to include reference to the Infrastructure and Developer Contributions SPD (2023) as providing guidance on the implementation of the policy.

We also emphasise the importance of effective implementation mechanisms so that healthcare infrastructure is delivered alongside new development, especially for primary healthcare services as these are the most directly impacted by population growth associated with new development. The Local Plan should emphasise that the NHS and its partners will need to work with the Council in the formulation of appropriate mitigation measures. This is necessary to ensure that the assessment of existing healthcare infrastructure is robust, and that mitigation options secured align with NHS requirements.

Healthcare providers should have flexibility in determining the most appropriate means of meeting the relevant healthcare needs arising from a new development. Where new development creates a demand for health services that cannot be supported by incremental extension or internal modification of existing facilities, this means the provision of new purpose-built healthcare infrastructure will be required to provide sustainable health services. Options should enable financial contributions, new-on-site healthcare infrastructure, free land/infrastructure/property, or a combination of these.

Conclusion

NHS BSW ICB thank the Council for the opportunity to comment on the Test Valley draft Local Plan 2040 Regulation 18 Stage 2. We trust our comments will be taken into consideration, and we look forward to reviewing future iterations of the plan. Should you have any queries or require any further information, please don't hesitate to contact us.

Yours faithfully,

Kind regards,

Fiona Slevin-Brown

Director of Place - Wiltshire
NHS Bath and North East Somerset, Swindon
and Wiltshire Integrated Care Board

Karen Montgomerie

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NHS Property Services

For and on behalf of NHS BSW ICB