



## Property Services

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BY EMAIL ONLY

### **RE: Consultation on Dudley Local Plan Regulation 19 Consultation**

Thank you for the opportunity to comment on the above document. The following representations are submitted by NHS Property Services (NHSPS).

#### **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 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. NHSPS is part of the NHS and is wholly owned by the Department of Health and Social Care (DHSC) – all surplus funds are reinvested directly into the NHS to tackle the biggest estates challenges including space utilisation, quality, and access with the core objective to enable excellent patient care.

#### **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**

Our detailed comments set out below are focused on ensuring that the needs of the health service are embedded into the Local Plan in a way that supports sustainable growth. When developing any additional guidance to support implementation of Local Plan policies relevant to health, for example in relation to developer contributions or health impact assessments, we would request the Council engage the NHS in the process as early as possible.

### **Draft Policy DLP6 Infrastructure Provision**

Draft Policy DLP6 Part 1 states that all new developments should be supported by the necessary on and off-site infrastructure to serve its needs, mitigate its impacts on the environment and the local community, and ensure that it is sustainable and contributes to the proper planning of the wider area.

Part 2 states that unless material circumstances or considerations indicate otherwise, development proposals will only be permitted if all necessary infrastructure improvements, mitigation measures and sustainable design requirements and proposals are provided and /or can be phased to support the requirements of the proposed development. These will be secured through planning obligations, the Community Infrastructure Levy / Infrastructure Funding Statements, planning conditions or other relevant means or mechanisms as necessary, to an appropriate timetable that is prioritised, resourced, managed, delivered and co-ordinated.

NHSPS welcomes the wording of Draft Policy DLP6 and considers the policy to be sound as currently drafted. Whilst we consider Draft Policy DLP6 to be sound as currently drafted, we request that the Council continue its engagement with the NHS ICB to further refine the identified healthcare needs and proposed solutions to support the level of growth proposed by the Local Plan, as identified in the Infrastructure Delivery Plan (IDP), prior to submission. Further comments on IDP are provided below. This aligns with our response to Draft Policy DLP9.

Healthcare providers should have flexibility in determining the most appropriate means of meeting the relevant healthcare needs arising from a new development. Where new developments create 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. It should be clarified that the NHS and its partners will need to work with the Council in the formulation of appropriate mitigation measures.

### **Draft Policy DLP8 Health and Wellbeing**

Draft Policy DLP8 sets out the Council's commitment to making sure that new developments promote healthier lifestyles and improve overall health and wellbeing. NHSPS welcomes and supports the inclusion of policies that support healthy lifestyles, and the requirement for a full Health Impact Assessment for developments of 100 or more dwellings or non-residential development that extends to 5,000sqm or more, and a rapid Health Impact Assessment for developments of 20 to 100 dwellings or non-residential development that extends from 1,000 - 5,000sqm. There is a well-established connection between planning and health, and the planning system has an important role in creating healthy communities. The planning system is critical not only to the provision of improved health services and infrastructure by enabling health providers to meet changing healthcare needs, but also to addressing the wider determinants of health.

### Draft Policy DLP9 Healthcare Infrastructure

Draft Policy DLP9 seeks to protect existing healthcare infrastructure unless it has been demonstrated that the loss or partial loss of a facility or site arises from a wider public service transformation plan. NHSPS welcomes the amends made to Part 2 following the Regulation 18 consultation. This will ensure the NHS has flexibility with regards to the use of its estate to deliver its core objective of enabling excellent patient care and support key healthcare strategies such as the NHS Long Term Plan. In particular, the disposal of sites and properties which are redundant or no longer suitable for healthcare for best value (open market value) is a critical component in helping to fund new or improved services within a local area.

Part 6 of Draft Policy DLP9 states that proposals for major residential developments of ten units or more must be assessed against the capacity of existing healthcare facilities and / or services as set out in local development documents. Where the demand generated by the residents of the new development would have unacceptable impacts upon the capacity of these facilities, developers will be required to contribute to the provision or improvement of such services, in line with the requirements and calculation methods set out in local development documents. Part 5 sets out that in the first instance, infrastructure contributions will be sought to deal with relevant issues on the site or in its immediate vicinity. Where this is not possible, however, any contribution will be used to support offsite provision of healthcare infrastructure and / or related services.

NHSPS welcomes the wording of Draft Policy DLP9 and considers the policy to be sound as currently drafted. Whilst we consider Draft Policy DLP9 to be sound as currently drafted, we request that the Council continue its engagement with the NHS ICB to further refine the identified healthcare needs and proposed solutions to support the level of growth proposed by the Local Plan, as identified in the Infrastructure Delivery Plan (IDP), prior to submission. Further comments on IDP are provided below.

Healthcare providers should have flexibility in determining the most appropriate means of meeting the relevant healthcare needs arising from a new development. Where new developments create 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. It should be clarified that the NHS and its partners will need to work with the Council in the formulation of appropriate mitigation measures.

### Draft Policy DLP12 Delivering Affordable, Wheelchair Accessible and Self Build/Custom-Build Housing

Whilst NHSPS considers Draft Policy DLP12 to be sound as currently drafted, as part of preparing additional guidance to inform detailed delivery of this policy, we suggest the Council consider the need for affordable housing for NHS staff and those employed by other health and care providers in the local authority area. The sustainability of the NHS is largely dependent on the recruitment and retention of its workforce. Most NHS staff need to be anchored at a specific workplace or within a specific geography to carry out their role. When staff cannot afford to rent or purchase suitable accommodation within reasonable proximity to their workplace, this has an impact on the ability of the NHS to recruit and retain staff.

Housing affordability and availability can play a significant role in determining people's choices about where they work, and even the career paths they choose to follow. As the population grows in areas of new housing development, additional health services are required, meaning the NHS must grow

its workforce to adequately serve population growth. Ensuring that NHS staff have access to suitable housing at an affordable price within reasonable commuting distance of the communities they serve is an important factor in supporting the delivery of high-quality local healthcare services. We recommend that the Council:

- Engage with local NHS partners such as the local Integrated Care Board (ICB), NHS Trusts and other relevant Integrated Care System (ICS) partners.
- Ensure that the local need for affordable housing for NHS staff is factored into housing needs assessments, and any other relevant evidence base studies that inform the local plan (for example employment or other economic policies).
- Consider site selection and site allocation policies in relation to any identified need for affordable housing for NHS staff, particularly where sites are near large healthcare employers.

### Draft Policy DLP41 Increasing Efficiency and Resilience

Draft Policy DLP41 sets out that development should be designed to mitigate climate change impacts and provide adaptations that will help communities and individuals to continue to avoid or mitigate adverse effects on human health. The NHS requires all new development projects to be net zero carbon, and NHSPS fully support policies that promote carbon neutral development. In considering the implementation of policies related to net zero, we would highlight that NHS property could benefit from carbon offset funds collected if one were to be introduced. This would support the NHS to reach the goal of becoming the world's first net zero healthcare provider.

### Evidence Base Local Plan Viability Assessment

The draft policy requirements identified in the Plan are supported by the Local Plan Viability Assessment. Having reviewed the Assessment, we note that it includes a specific allowance for S106 contributions towards health of £3,107 per home applied to typologies over 10 units. Healthcare facilities are currently experiencing significant strain. If appropriate mitigation is not secured, the growth strategy outlined in the Plan is expected to exacerbate this situation. Without prejudice to any future representations the NHS or its partners may make on specific planning applications with respect to S106 obligations or applications for CIL funding, in our view the S106 contribution allowance towards health is generally sufficient to enable suitable financial contributions to be secured for healthcare. Therefore, we consider that overall, the assessment of plan-wide viability demonstrates that policy requirements in relation to healthcare infrastructure contributions are deliverable. This would also ensure that healthcare mitigation is appropriately weighted when evaluating the potential planning obligations necessary to mitigate the full impact of a development.

### Evidence Base Infrastructure Delivery Plan

The provision of adequate healthcare infrastructure is in our view critical to the delivery of sustainable development. A sound IDP must include sufficient detail to provide clarity around the healthcare infrastructure required to the level of growth proposed by the Plan, and to ensure that both planning obligations and the capital allocation process for the Community Infrastructure Levy (CIL) effectively support and result in capital funding towards delivery of the required infrastructure.

We welcome the engagement undertaken to date with the ICB and the detailed analysis of the potential impacts of new development on the proposed site allocations which has revealed specific areas of need.

To ensure that any mitigation options secured align with NHS requirements we suggest the following process (set out in red text below) for determining the appropriate form of contribution for the provision of healthcare infrastructure associated with new development is included in the IDP:

Proposed addition to Section 6 of the Infrastructure Delivery Plan relating to Healthcare Infrastructure:

*The requirement for a contribution towards healthcare infrastructure from new development will be determined by working with the ICB and other key stakeholders as appropriate, in accordance with the following process:*

- *Assessing the level and type of demand generated by the proposal.*
- *Working with the ICB to understand the likely impact of the proposals on healthcare infrastructure capacity in the locality.*
- *Identifying appropriate options to increase capacity to accommodate the additional service requirements and the associated capital costs of delivery.*
- *Identifying the appropriate form of developer contributions.*

### Conclusion

NHSPS thank Dudley Council for the opportunity to comment on their Local Plan consultation. 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 do not hesitate to contact me.

NHSPS would be grateful to be kept informed of the progression of the Local Plan and any future consultations via our dedicated email address, [town.planning@property.nhs.uk](mailto:town.planning@property.nhs.uk).

Yours faithfully,

**Daniel Fleet**  
**Town Planner**

**For and on behalf of NHS Property Services Ltd**