



Our ref: 22/0484/CB Your ref: 22/0484/FUL Wren House Hedgerows Business Park Colchester Road Chelmsford Essex CM2 5PF

EMAIL ONLY



Castle Point Borough Council Kiln Road Thundersley Benfleet Essex SS7 1TF Catherine Bicknell Email:

27 October 2022

Dear Sir / Madam

Planning application 22/01117/FUL

Construct 173No. dwellings including public open space, landscaping, access, drainage, parking, servicing, utilities and all associated infrastructure and ancillary buildings

Land At Brook Farm Daws Heath Road Hadleigh Essex

1.0 Further to a review of the application details the following comments are made in regard to the primary healthcare provision on behalf of the Mid and South Essex Integrated Care Board (ICB).

2.0 Existing Healthcare Position Proximate to the Planning Application Site

- 2.1 The proposed development is likely to have an impact on the services of the Surgeries which operate within the vicinity of the application site. The GP practices do not have capacity for the additional growth resulting from this development and cumulative development in the area.
- 2.2 The proposed development will be likely to have an impact on the NHS funding programme for the delivery of primary healthcare provision within this area and specifically within the health catchment of the development. The CCG would therefore expect these impacts to be fully assessed and mitigated.

3.0 Review of Planning Application

3.1 The health impact assessment (HIA) submitted in support of the planning application explains that the development has been designed to prioritise active

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travel with all key routes accessible by pedestrians and cyclists including wheelchair users. It is also noted that of the no.173 dwellings, no.57 meet M4(2) (accessible and adaptable dwellings) and no.7 meet M4(3) (wheelchair user dwellings).

- 3.2 The HIA also details the inclusion of greenspace within the proposed development. This includes areas of grassland, heathland, orchards, woodland planting and wetland planting. These spaces are accessible, with walking routes through them and benches provided within them to provide places to rest.
- 3.3 In relation to access to healthcare infrastructure, the HIA concludes that the size of the proposal does not warrant on-site health facilities. It proposes a financial contribution to meet the primary healthcare requirements of the development, if required.

4.0 Assessment of Development Impact on Existing Healthcare Provision

- 4.1 The existing GP practices do not have capacity to accommodate the additional growth resulting from the proposed development. The development could generate approximately 415 new residents and subsequently increase demand upon existing constrained services.
- 4.2 The primary healthcare services directly impacted by the proposed development and the current capacity position are shown in Table 1.

Table 1: Summary of position for healthcare services within a 2km radius of (or closest to) the proposed development

GP surgeries within 2km	Weighted List Size ¹	NIA (m²)²	Capacity ³ needed for current weighted list size	Spare Capacity (NIA m²)⁴
The Hollies	12,521	553.00	858.58	-305.58
Existing floorspace excess/deficit			Existing deficit of 305.58m ²	

Notes

- 1. The weighted list size of the GP Practice based on the Carr-Hill formula; this figure more accurately reflects the need of a practice in terms of resource and space and may be slightly lower or higher than the actual patient list.
- 2. Current Net Internal Area occupied by the Practice
- 3. Based on 120m² per 1750 patients (this is considered the current optimal list size for a single GP within the Mid and South Essex STP). Space requirement aligned to DH guidance within "Health Building Note 11-01: facilities for Primary and Community Care Services"

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- 4. Based on existing weighted list size
- 4.3 Table 1 shows that the capacity of primary healthcare facilities in the area of the proposed development is already below the recognised standards of provision for the existing population. Additional population growth in the area resulting from new development would add to the deficit and so would be unsustainable if unmitigated.

5.0 Healthcare Needs Arising From the Proposed Development

5.1 Table 2 shows the population likely to be generated from the proposed development, the primary care floorspace needed to support this additional population and the costs of doing so. Using the accepted standards set out below the table, the capital required to create additional floorspace for support the population arising from the proposed development is calculated to be £85.600.

Table 2: Capital Cost calculation of additional health services arising from the development proposal

Additional Population Growth (173 dwellings) ⁵	Additional floorspace required to meet growth (m²)6	Capital required to create additional floor space (£) ⁷
415	28.4	85,600

Notes:

- 5. Calculated using the Castle Point district average household size of 2.4 taken from the 2011 Census: Rooms, bedrooms and central heating, local authorities in England and Wales (rounded to the nearest whole number).
- 6. Based on 120m² per 1750 patients (this is considered the current optimal list size for a single GP within the Mid & South Essex STP). Space requirement aligned to DH guidance within "Health Building Note 11-01: facilities for Primary and Community Care Services"
- 7. Based on BCIS cost multiplier (£3,015) for new build and extensions to health centres and hospitals using rates for gross internal floor area for the building costs including prelims updated to 01/01/2022 and rebased for Essex, rounded to nearest £100.
- 5.2 The development would have an impact on healthcare provision in the area where there is already a deficit of primary care facilities. If unmitigated, the development would be unsustainable. Planning obligations could be used to secure contributions to mitigate these impacts and make an otherwise unacceptable development acceptable in relation to healthcare provision.
- 5.3 The ICB therefore requests that the sum of £85,600 be secured through a planning obligation in the form of a S106 agreement is linked to any grant of





planning permission in order to increase capacity for the benefit of patients of the Surgeries in the vicinity of the application site as shown in Table 1 above.

6.0 Conclusions

- 6.1 The ICB has identified that the development will give rise to a need for additional healthcare provision to mitigate impacts arising from the development and requests that these are secured through a S106 legal agreement attached to any grant of planning permission. In the absence of such mitigation the development would impose an unsustainable burden on local healthcare services.
- 6.2 The terms set out above are considered appropriate having regard to the formulated needs arising from the development and the ICB is satisfied that the basis and value of the developer contribution sought is consistent with the policy and tests for imposing planning obligations set out in the NPPF.
- 6.3 The ICB looks forward to working with the applicant and the Council to satisfactorily address the issues raised in this consultation response and would appreciate acknowledgement of the safe receipt of this letter.

Yours faithfully

Catherine Bicknell

Planning Policy Manager

Chair: Professor Michael Thorne CBE | CEO: Anthony McKeever