



# **Statement of Common Ground**

## **Castle Point Plan 2026 to 2043**

### **Regulation 19 Draft**

Between

Castle Point Borough Council

and

NHS Property Services

November 2025

## **1. Introduction**

- 1.1 This Statement of Common Ground (SoCG) has been prepared jointly by Castle Point Borough Council (CPBC) and NHS Property Services in relation to the Castle Point Local Plan (known as the Castle Point Plan).
- 1.2 The purpose of this SoCG is to set out the areas of agreement and any outstanding matters between the parties, in accordance with the requirements of the National Planning Policy Framework (NPPF, paragraph 28) and the Planning Practice Guidance.
- 1.3 CPBC has fully engaged with NHS Property Services on the development of the Castle Point Plan from the outset with regards its role as statutory consultee.
- 1.4 In accordance with the Town and Country Planning (Local Planning) (England) Regulations 2012, NHS Property Services has been formally consulted at Regulation 18 and 19 stages of consultation.
- 1.5 This SoCG identifies the matters on which CPBC and NHS Property Services are agreed, as well as any areas where differences remain.

## **2. Strategic Matters**

- 2.1 NHS property and CPBC agree and work collaboratively on Local Plan policies Had3 Hadleigh Clinic and Thun3a Thundersley Clinic.

## **3. Areas of Agreement (Common Ground)**

- 3.1 NHS Property Services submitted representations to the Castle Point Plan during the Regulation 19 Draft Consultation (August to September 2025) on 10<sup>th</sup> October 2025, having agreed a short extension of time. The NHS Property Services confirmed their position during the further consultation (October to December 2025) on 11<sup>th</sup> November 2025.
- 3.2 NHS Property Services and CPBC have agreed support and understanding in relation to several policies and principles, as follows:
- General principle: The importance of health infrastructure to support housing growth.
  - Policy Infra3: Improving Health and Wellbeing
  - Policy SD4: Net Zero Carbon Development (In Operation)
  - Site Allocations Had 3: Hadleigh Clinic
  - Site Allocation Thun 3A: Thundersley Clinic
  - Evidence Base: Castle Point Plan Viability Study

3.3 The entries in the table below set out the agreed modifications to the Castle Point Plan, which resolve all NHS Property Services representations. All modifications in this SoCG are also included in the Council's Modifications Schedule.

Rep Number	Policy/Paragraph Reference	Summary of Representation/comment from NHS Property Services	Agreed response and modifications
0353	Policy SP4: Development Contributions and Policy Infra 3: Improving Health and Wellbeing	<p>Draft Strategic Policy SP4 states that, where necessary, new developments will be required to provide for the necessary on-site or off-site infrastructure requirements arising from the proposal, including improvements and expansions of healthcare facilities in reference to the IDP (Supporting Paragraph 6.62). Policy Infra3 particularly concerns seeking planning obligations or CIL to mitigate impacts of new developments on health provision.</p> <p>As drafted Strategic Policy SP4 does not sufficiently reflect the engagement process required when assessing the likely level of healthcare infrastructure required to support the level of growth proposed by the plan. Supporting paragraph 6.64 stipulates the Council's consideration of the ECC Developers' Guide to Infrastructure Contributions, and we also note the published Healthcare Facilities Developer Contributions Guidance SPD (2023). Whilst both documents set out the process/methodology adopted to determine the type of contributions, the required level of engagement with the Integrated Care Board (ICB) as local health commissioners should be made clear within Strategic Policy SP4, in line with Policy Infra3.</p> <p>For purposes of consistency across the Local Plan, we recommend the Council make clear reference to Policy Infra3 in seeking contributions for healthcare infrastructure, making clear reference unto the engagement required with the NHS and in particular, the ICB. Healthcare providers should have flexibility in determining the most appropriate means of meeting the relevant healthcare needs arising from a new development, and should therefore be engaged with at the earliest stages possible.</p>	<p>Policy SP4, is a high level strategic policy, and the importance of working in partnership with the NHS regarding specific health related infrastructure is covered elsewhere in Policy Infra3.</p> <p>NPPF paragraph 16 notes that Plans should avoid unnecessary duplication. It is considered implicit in Policy Infra3 that the council will work 'in partnership with the NHS and Public Health' (paragraph a); that contributions will be sought to new or enhanced health facilities (paragraph b); that Health Impact Assessments should be undertaken 'at an early stage' (paragraph i); and agreed with 'public health professionals prior to commencement of the assessment at the earliest opportunity' (paragraph h).</p>

Rep Number	Policy/Paragraph Reference	Summary of Representation/comment from NHS Property Services	Agreed response and modifications
0353	Policy Infra1: Community Facilities	<p>Draft Policy Infra1 focuses on the provision of new and improvement of existing community facilities. Point 4 in particular sets out the requirements to be demonstrated where the development would result in the loss of a community facility. NHSPS welcomes the included wording under Point 4 (a), in line with our previous representation at early Regulation 18 stage (2024).</p> <p>For the avoidance of doubt in the interpretation of Policy Infra1 Point 4, we would request the Council to provide clarity in supporting paragraphs in reference to the disposal process of healthcare facilities. Where healthcare facilities are demonstrated as being surplus to requirements or will be changed as part of wider NHS estate reorganisation and service transformation programmes, we request that it is clarified and ensured that this will sufficiently satisfy the requirements under Point 4 (a) of the policy.</p>	<p>Policy element 4 states that ‘a. An assessment has been undertaken which demonstrates that the existing facility is surplus to requirement;’ would justify the loss of a facility.</p> <p><u>New paragraph 19.13</u></p> <p><b>The loss of any community facilities must be fully justified. The Local Planning Authority will require any application involving the loss of a facility to be supported by written evidence and applicants should contact the Local Planning Authority at the earliest stage to discuss the details.</b></p>

#### **4. Areas Without Agreement (Uncommon Ground)**

4.1 There are no areas without agreement.

#### **5. Ongoing Cooperation**

5.1 CPBC will continue to engage with NHS Property Services throughout the examination of the Castle Point Plan and through their role as statutory consultee for plan making and planning applications.

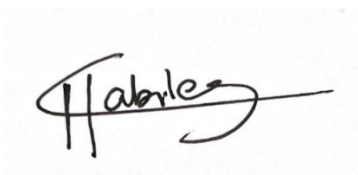
## Signatories

A handwritten signature in black ink, appearing to read 'A Parrott', written in a cursive style.

For and on behalf of Castle Point Borough Council:

**Name and Position:** Amanda Parrott, Assistant Director, Climate and Growth

**Date:** 25 November 2025

A handwritten signature in black ink, appearing to read 'Hyacinth Cabiles', written in a cursive style.

For and on behalf of NHS Property Services:

**Name and Position:** Hyacinth Cabiles MRTPI (Town Planner)

**Date:** 20/11/2025