

Your Ref: Brentwood Local Plan 2013-2033 Our Ref: Brentwood Local Plan 2013- 2033 Mid and South Essex

Joint Commissioning Team

Wren House Hedgerows Business Park Colchester Road Chelmsford Essex, CM2 5PF

Development Management Brentwood Borough Council Town Hall Ingrave Road Brentwood Essex CM15 8AY

Tel: 01245 459473 Mobile: 07342 704868 Email: Kerryharding@nhs.net

Email Only: <a href="mailto:planning.policy@brentwood.gov.uk">planning.policy@brentwood.gov.uk</a>

20 March 2019

Dear Sir / Madam

## Brentwood Borough Council Brentwood Local Plan 2016-2033

#### 1.0 <u>Introduction</u>

- 1.0.1 Thank you for consulting the Basildon & Brentwood Clinical Commissioning Group (CCG) and the Mid and South Essex Sustainability and Transformation Partnership (STP) on the above emerging Local Development Plan (LP) Document.
- 1.1 In reviewing the context, content and recommendations of the LP Document and its current phase of progression, the following comments are with regard to the Healthcare provision on behalf of the STP

#### 2.0 Existing Healthcare Position in the Emerging Plan Area

- 2.1 The LP Document covers the administrative area of Brentwood.
- 2.2 Currently, within the administrative area, healthcare provision incorporates a total of 9 GP Practices, 13 pharmacists, 9 dental surgeries, 10 Opticians, 2 community clinics and 2 community hospitals.
- 2.3 These are the healthcare services available that this Local Plan must take into account in formulating future strategies.



Accountable Officer: Caroline Rassell



- 2.4 Growth, in terms of housing and employment, is proposed across a wide area and would likely have an impact on future service provision. Existing health care services do not have capacity to accommodate significant growth.
- 2.5 In terms of optimal space requirements to encourage a full range of services to be delivered within the community there is an overall capacity deficit, based on weighted patient list sizes, within the 9 GP Practices providing services in the area.
- 2.6 Of the 9 Practices in the area 1 currently has limited capacity for growth and development
- 2.7 Optimal space standards for primary care are set for planning purposes only. This allows us to review the space we have available and identify the impact development growth will have in terms of capacity and service delivery. Space capacity deficit does not prevent a practice from increasing its list size, however it may impact on the level and type of services the practice is able to deliver.
- 2.8 The STP are currently working together to help plan and develop new ways of working within our primary care facilities, in line with the Five Year Forward View and the NHS Long Term Plan, to increase capacity in ways other than increasing physical space. We endeavor to develop sustainable solutions through a proactive coordinated care approach, including the creation of hubs, rather than individual replacement of surgeries. There will also be greater focus on premises for training and increasing capacity through technology and increased workforce. The STP's emerging Estates Strategy will contain further detail on this.
- 2.9 Existing health infrastructure will require further investment and improvement in order to meet the needs of the planned growth shown in this LP document. The developments contained within would have an impact on healthcare provision in the area and its implications, if unmitigated, would be unsustainable.
- 2.8 It should be noted that the STP are currently working to assess utilisation at Brentwood Community Hospital in order to establish future plans for the facility to ensure appropriate and effective utilisation.

# 3.0 <u>Identification and Assessment of Policies and Strategies that have Healthcare Implications</u>

- 3.1 The LP proposes delivery of 7,752 dwellings between 2016 2033. This is likely to generate an additional 18,605 patients for which the local health economy will be required to provide services.
- 3.2 In progressing the Brentwood Local Plan, care should be taken to ensure that emerging policies will not have an adverse impact on healthcare provision within the plan area and over the plan period.





- 3.2 In instances where major policies involve the provision of development in locations where healthcare service capacity is insufficient to meet the augmented needs appropriate mitigation will need to be sought.
- 3.3 Policies should be explicit in that contributions towards healthcare provision will be obtained and the Local Planning Authority will consider a development's sustainability with regard to effective healthcare provision.
- 3.4 The exact nature and scale of the contribution and the subsequent expenditure by the STP will be calculated at an appropriate time as and if schemes come forward over the plan period to realise the objectives of the LP.
- 3.5 The Local Planning Authority should have reference to the most up-to-date strategy documents from NHS England which currently constitutes The Five Year Forward View and the NHS Long Term Plan. Reference should also be made to the emerging STP Estates Strategy and the Essex Health Places advice note for planners, developers and designers.
- 3.6 Plans and policies should be revised to ensure that they are specific enough in their aims, but are not in any way prescriptive or binding on the NHS to carry out certain development or delivery of objectives within a set timeframe, and do not give undue commitment to projects that do not yet have an approved business case.
- 3.7 Removal of any reference to additional GPs is also requested as this does not reflect the current strategies referred to above. 'Workforce' should be used in place of GPs to reflect the changing models of care and workforce mix across health. As an example of this the statement 'NHS England has identified an additional need for GPs subject to the location of future development.' On page 29, section 2.47 should be amended to read 'NHS England has identified the need for additional workforce to increase capacity to accommodate future development'.
- 3.8 We would suggest that the design of homes and housing can also have a positive impact on the physical, social, and mental health and well-being of communities and this should be reflected in Policy SP03
- 3.9 In order to ensure that the Infrastructure Deliver Plan remains current we would suggest a review of health infrastructure requirements on an annual basis.
- 3.10 We are pleased to note that the policies within the LP support our health and wellbeing objectives, in particular BE09/BE10 (Communication and Digital Infrastructure), BE13 (Sustainable Transport), BE20 (Allotments and Community Food Growing Space), HP01 (Housing Mix), HP12 Planning for Inclusive Communities).





3.9 As stated above the exact nature and scale of mitigation required to meet augmented needs of proposed developments will be calculated at an appropriate time, as and if schemes come forward over the plan period to realise the objectives of the LP. Anticipated mitigation for each proposed major site is detailed below; please note this is based on the current configuration of health care services and is subject to change:

Policy No.	Proposed site	Anticipated No. of additional Patients	Anticipated Mitigation	Notes
RO1	Dunton Hills Garden Village (4,000 dwellings 2,700 within plan period)	10,992 (7,872 within plan period)	New health facility	Development of a new health facility will be required to
RO2	Land at West Horndon Industrial Estates (580 dwellings)			be phased to align with housing delivery trajectory
				Collaboration agreement, secure Wi-Fi and clinical system installation and maintenance required as part of mitigation within Care Homes
RO3	Land North of Shenfield - Officers Meadow (825 dwellings & 60 bed care home))	2,028	Contribution towards increasing capacity by means of extension,	Collaboration agreement, secure Wi-Fi and clinical system installation
R20	The Eagle and Child Public House (20 dwellings)		reconfiguration, possible relocation of an existing service/s or/and recruitment costs	and maintenance required as part of mitigation within Care Homes
RO4 & RO5	Ford Headquarters and Council Depot (473 dwellings & 60 bed care home)	1,800	Contribution towards increasing capacity by means of	Collaboration agreement, secure Wi-Fi and clinical
RO6	Land off Nags Head Lane (125 dwellings)		extension, reconfiguration or	system installation and maintenance
RO8	Mascals Lane, Warley (9 dwellings)		refurbishment or/and recruitment costs.	required as part of mitigation within
RO9	Land off Warley Hill (43 dwellings)			Care Homes
R10	Brentwood Railway Station Car Park (100 dwellings)			
RO7	Sow and Grow Nursey , Pilgrims Hatch (38 dwellings)	91		
R11	Westbury Road Car Park (45 dwellings)	1,341	Contribution towards increasing capacity by means of	Collaboration agreement, secure Wi-Fi and clinical
R12	Hunter House, Western Road (48 dwellings)		extension, reconfiguration or refurbishment or/and	system installation and maintenance required as part of





R13	Chatham Way (31 dwellings)		recruitment costs	mitigation within Care Homes
R14	William Hunter Way Car Park (300 dwellings)			
R15	Wates Way Industrial Estate, Ongar Road (80 dwellings)			
R18	Land off Crescent Drive (55 dwellings)			
R19	Land at Priests Lane (75 dwellings & 40 bed care home)			
R16 & R17	Land off Doddinghurst Road (200 dwellings)	480	Contribution towards increasing capacity by means of extension, reconfiguration or refurbishment or/and recruitment costs	
R21	Land South of Ingatestone; former garden centre and A12 works site (161 dwellings)	523	Contribution towards increasing capacity by means of	
R22	Land Adjacent to the A12, Ingatestone (57 dwellings)		extension, reconfiguration or refurbishment or/and recruitment costs	
R23	Brizes Corner Field (23 dwellings)	251	Contribution towards increasing capacity by means of	
R24	Land off Stocks Lane (30 dwellings)		extension, reconfiguration or	
R25	Land North of Woollard Way, Blackmore (40 dwellings)		refurbishment or/and recruitment costs	
R26	Land North of Orchard Piece (30 dwellings)			
	Windfall Sites		Requirement to be assessed as planning applications are received for comment. It is likely, due to anticipated low numbers of dwellings within a development of this type, that contribution toward increasing healthcare workforce will be sought from this type of development	





### 4.0 Conclusions

- 4.1 This response follows a consultation by Brentwood Borough Council on Brentwood Borough Local Plan.
- 4.2 In its capacity as the healthcare commissioner and provider, the STP has requested that the Local Planning Authority identifies policies and strategies that are considered to directly or indirectly impact upon healthcare provision and has responded with recommendations as to how policy should be shaped in the future.
- 4.3 Assuming the recommendations are incorporated wholly within the future LP then the STP would not which to raise an objection to the Brentwood Borough Local Plan.
- 4.4 The CCG has identified shortfalls in capacity at existing premises covered by the LP. Provision needs to be made within the emerging LP to address the impacts of development on health infrastructure and to ensure timely cost-effective delivery of necessary infrastructure improvements, in the interests of pursuing sustainable development.
- 4.5 The recommendations set out above are those that the CCG deem appropriate having regard to the projected needs arising from the Brentwood Borough Local Plan. However, if the recommendations are not implemented then the CCG reserve the right to make representations about the soundness of the plan at relevant junctures during the adoption process.

Yours faithfully



Kerry Harding
Director of Estates
CCGs in Mid & South Essex

CC: Dave Fazey – Basildon & Brentwood CCG Sara Lingard– NHS England- Contracts Manager

