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8th March 2023

Dear Planning Policy Team,

Re: West Berkshire Local Plan review 2022-39 Proposed Submission document

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

Foreword

NHSPS manages, maintains and improves NHS properties and facilities, working in partnership with NHS organisations to create safe, efficient, sustainable, modern healthcare and working environments. NHSPS has a clear mandate to provide a quality service to its tenants and minimise the cost of the NHS estate to those organisations using it. Any savings made are passed back to the NHS.

Overview

In April 2013, the Primary Care Trust and Strategic Health Authority estate transferred to NHSPS, Community Health Partnerships and NHS community health and hospital trusts. All organisations are looking to make more effective use of the health estate and support strategies to reconfigure healthcare services, improve the quality of care and ensure that the estate is managed sustainably and effectively.

NHSPS support NHS commissioners to deliver a local health and public estate that can be put to better use. This includes identifying opportunities to reconfigure the estate to meet commissioning needs, as well as opportunities for delivering new homes (and other appropriate land uses) on surplus sites.

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 allowed to develop, modernise or be protected in line with integrated NHS strategies. Planning policies should support this and be prepared in consultation with the NHS to ensure they help deliver estate transformation.

Our comments on the policies set out within the West Berkshire Local Plan review 2022-39 Proposed Submission document are as follows.

Policy flexibility (enabling the NHS to be able to promptly evolve its estate)
Introduction
Policy DM39 Local Community Facilities states that proposals which would result in the loss of an existing local community facility will only be permitted where it can be clearly demonstrated that: <ul style="list-style-type: none">i. It is no longer viable to retain the facility in its current use; orii. The facility is no longer needed and any need arising from its loss can be accommodated within easily accessible existing facilities, or

- iii. To outweigh the loss of the existing facility, the proposal will deliver equivalent or, where possible, greater community benefit which is easily accessible to the community it is intended to serve.

NHSPS supports the provision of sufficient, quality community facilities, but objects to specific wording within this policy. We would request that policy wording amendments will be made to support the principle that where the NHS can demonstrate a health facility will be changed as part of NHS estate reorganisation programmes, this will be sufficient for the local planning authority to accept that a facility is neither needed nor viable for its current use, and therefore that the principle of alternative uses for NHS land and property will be fully supported.

Context

In order to enable the NHS to be able to promptly adapt its estate to changing healthcare requirements, it is essential that all planning policies enable flexibility within the NHS estate. On this basis, NHSPS would advise the Council that policies aimed at preventing the loss or change of use of community facilities and assets, where healthcare is included within this definition, can potentially have a harmful impact on the NHS's ability to ensure the delivery of facilities and services for the community. In instances where such policies are overly restrictive, the disposal of surplus and unsuitable healthcare facilities for best value can be prevented or delayed, which in turn delays vital re-investment in the NHS estate.

The NPPF is clear in stating that Local Plans should adopt policies that “take into account and support the delivery of local strategies to improve health, social and cultural well-being for all sections of the community” (Paragraph 93b).

It is important that policies consider that some public service providers, such as the NHS, routinely undertake strategic reviews of their estates. Reviews of the NHS estate are aimed at improving the provision of healthcare services by increasing efficiencies, including through the disposal of unneeded and unsuitable properties. This means that capital receipts from disposals, as well as revenue spending that is saved, can be used to improve facilities and services.

Where it can be demonstrated that health facilities will be changed as part of a wider NHS estate reorganisation programme it should be accepted that a facility is neither needed nor viable for its current use.

With this in mind, we are keen to encourage that flexibility be granted to the NHS via the wording of any planning policy and the expectations set out in supporting text. This will ensure that the NHS can promptly and efficiently respond to the healthcare requirements of residents through the evolution of its estate.

Amended Wording

We recommend the addition of the following amended wording (shown in red):

Proposals which would result in the loss of an existing local community facility will only be permitted where it can be clearly demonstrated that:

- i. It is no longer viable to retain the facility in its current use; or*
- ii. The facility is no longer needed and any need arising from its loss can be accommodated within easily accessible existing facilities, or*
- iii. To outweigh the loss of the existing facility, the proposal will deliver equivalent or, where possible, greater community benefit which is easily accessible to the community it is intended to serve; or*
- iv. the loss or change of use of an existing built community facility is part of a wider public service estate reorganisation.*

This change would directly address the issues outline above; they would ensure that the NHS is able to effectively manage its estate, disposing of unneeded and unsuitable properties where necessary, to enable healthcare needs to be met.

Policy (health considerations in policy/design)

NHSPS supports the principles identified in Policies DM3 and DM40

Context

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, enabling health providers to meet changing healthcare needs, but also to addressing the wider determinants of health.

The NPPF is clear in stating that “Planning policies and decisions should aim to achieve healthy, inclusive and safe places” (Paragraph 92).

Identifying and addressing the health requirements of existing and new development is a critical way of ensuring the delivery of healthy, safe, and inclusive communities. On this basis, we support the principle of policies which require an active consideration of health matters.

Policy (developer contributions)

Policy SP24 – NHSPS supports the principle of funding being allocated to health infrastructure projects.

Context

The NHS, Council and other partners must work together to forecast the infrastructure and costs required to support the projected growth and development across the borough. A vital part of this is ensuring the NHS continues to receive a commensurate share of S106 and Community Infrastructure Levy (CIL) developer contributions to mitigate the impacts of growth and help deliver transformation plans.

Paragraph 34 of The NPPF is clear that ‘Plans should set out the contributions expected from development. This should include setting out... infrastructure (such as that needed for... health)’

The significant cumulative impacts of residential developments on healthcare requirements in the area should be recognised and, given their strategic importance, health facilities should be put on a level footing with affordable housing and public transport improvements when securing and allocating S106 and CIL funds, in order to enable the delivery of vital NHS projects. It is imperative that planning policies are positively prepared, in recognition of their statutory duty to help finance improved healthcare services and facilities through effective estate management.

We request that when setting planning obligation policies, the Council seek to address strategic as well as local priorities in planning obligations and engage the NHS in the process as early as possible.

Summary

Within the NHS property portfolio, a number of sites are, or may become outdated and no longer suitable for modern healthcare without significant investment. In those cases, and where NHS commissioners can demonstrate that healthcare facilities are no longer required for the provision of services in that particular location, a more flexible approach for public

service providers should be applied when considering a change of use to non-community uses.

NHSPS thank West Berkshire Council for the opportunity to comment on the Proposed Submission Local Plan and hope the proposed amendments are considered constructive and helpful. We look forward to reviewing future iterations of the plan and receiving confirmation that these representations have been received. Should you have any queries or require any further information on the enclosed, please don't hesitate to contact me.

Yours sincerely,

Aahsan Rahman
Head of Town Planning