

Planning Policy Manager
Ipswich Borough Council
Grafton House
15-17 Russell Road
Ipswich
IP1 2DE

Co. Reg. No. 5677777

17th September 2021

Dear Sirs,

Ipswich Local Plan Proposed Main Modifications (August 2021) – Representations on behalf of East Suffolk and North Essex NHS Foundation Trust (ESNEFT) concerning Ipswich Hospital Campus, Heath Road, Ipswich

1. On behalf of our client East Suffolk and North Essex NHS Foundation Trust (ESNEFT), we write to provide our representations on the Proposed Main Modifications consultation to the Emerging Local Plan for your consideration.
2. These representations build on our previous submissions dated 25th July 2017, 13th March 2019 and 25th February 2020 concerning the Local Plan, 'Call for Sites consultation (June – July 2017)', the Local Plan Review Preferred Options consultation (November 2018), and the Local Plan Final Draft consultation (January 2020). The initial submission was on behalf of Ipswich Hospital NHS Trust, with the following submissions on behalf of East Suffolk and North Essex Foundation Trust (ESNEFT) following its merger with Colchester Hospital University NHS Trust in 2017/18.
3. The matters raised address soundness issues concerning the proposed changes to the Main Modifications, which also relate to areas of uncommon ground referred to in the Statement of Common Ground (August 2020) signed by Ipswich Borough Council, ESNEFT and Ipswich and East Suffolk Clinical Commissioning Group.
4. Whilst the outstanding soundness matters remain unresolved, the content of our representations will in our view represent a material consideration in the determination of any related planning application where draft Policy CS19 is applied. Also, with our objections in mind, only limited weight may be applied to this policy, especially in advance of them being fully considered and tested through the Local Plan review process.

Summary

5. In summary, following our earlier representations to the Final Draft consultation in February 2020, it is acknowledged that the proposed Main Modifications document, through Main Modifications 66, 68, 69 and 70, has incorporated a proportion of our suggested amendments.

Managing Director:
John Lawson, BA (Hons), MPhil, MRTPI

Directors:
Sharon Lawson, BA (Hons), DipTP, MRTPI
Georgina Brotherton, BSc (Hons), MSc, MRTPI

Associate Director:
Natalie Makepeace, BA (Hons), MSc (Dist), MRTPI

Consultant:
James Lawson, BA (Hons), MA, MRTPI

**The Coach House, East Hill House,
76 High Street, Colchester, Essex, CO1 1UF
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6. Of note, it is welcomed that Policy CS17 (Delivering Infrastructure) now makes reference to acute hospital facilities and ESNEFT is content with these amendments which allow for developer contributions for essential healthcare services. Furthermore, within Policy CS19 (Provision of Health Services) it is acknowledged that 'further inpatient and outpatient accommodation and facilities' are identified as acceptable related uses.
7. However, Policy CS19's wording, along with its supporting text, continues to refer to 'safeguarding' the site for healthcare purposes. This runs contrary to ESNEFT's planning requirements and is also unnecessary and unreasonable. This policy basis is essentially overly restrictive and would not provide sufficient flexibility and discretion to ESNEFT to enable it to realise its development requirements and does not reflect the most appropriate strategy for the site. Consequently, whilst Policy CS19 remains as currently proposed to be amended by the Local Planning Authority (LPA), the draft Local Plan remains 'unsound' when considered against the tests set out in paragraph 35 of the NPPF, for the following reasons:
 - a. Not **Positively prepared** - The unnecessary planning conflict and inflexibility created by the safeguarding policy could prevent ESNEFT as a key NHS health care provider from meeting the area's acute healthcare needs and potentially preventing the delivery of sustainable development;
 - b. Not **Justified** – The overly restrictive approach created by the safeguarding policy does not represent an 'appropriate strategy' taking into account the more flexible reasonable alternative proposed by ESNEFT. ESNEFT's proposed approach reflects the current policy approach, which has worked well in the past, continues to be fit for purpose. The proposed approach would also enable the Hospital it to fulfil its development requirements and aspirations without the need to have to justify potential policy departures through planning applications related to the delivery of to deliver its health care services, which could be a likely consequence if the policy remains as currently drafted in the Main Modifications;
 - c. Not **Effective** – The restrictions imposed by the safeguarding policy could prevent ESNEFT from delivering its health care agenda over the plan period, which could otherwise be achieved with more appropriate policy wording as proposed;
 - d. Not **Consistent with National Policy** – The safeguarding policy which fetters ESNEFT's planning discretion, implies that the LPA is seeking to fulfil the role of a health authority, which lies beyond its legislative remit. The policy may, therefore, be ultra vires and vulnerable to challenge at both the plan making and planning application stages. In particular, to ensure faster delivery of public service infrastructure including hospitals, paragraph 96 of the NPPF refers to the need for planning authorities to work proactively with delivery partners and statutory bodies to plan for required facilities and resolve key planning issues before applications are submitted. Given the degree of potential and unnecessary conflict that could be generated by the safeguarding policy, the current proposed wording of CS19 essentially contravenes national policy guidance and therefore, needs to be rectified. It was hoped that this policy issue could have been discussed at the Examination in Public, although it was not identified as a specific matter to be considered at the time. Consequently, it is requested that the LPA and if necessary, the Local Plan Inspectors

give due consideration to resolving this important area of planning policy conflict as part of the Local Plan review process, to avoid potential unnecessary issues and tensions arising at the planning application stage.

8. In summary, ESNEFT considers that its estate provides sufficient land for the provision of acute healthcare services and surplus land may become available in the future and needed to help deliver key facilities. Such related developments should, therefore, be considered on their merits in line with an amended Policy CS19 as proposed by ESNEFT, without being automatically precluded by an unnecessary safeguarding requirement.
9. There are also additional legitimate concerns over the wording of parts of the supporting text at paragraph 8.230 in particular as included in the Main Modifications. Our representations in this regard, seek suitable amendments to the transport related requirements associated with Policy CS19, to acknowledge the travel mode opportunities and constraints associated with an acute hospital and to seek an equitable approach to assessing and addressing off-site parking occurrences within nearby streets.
10. Taking the above into account, it is therefore requested that further amendments are made to Policy CS19 and its supporting paragraphs 8.229 and 8.230 as detailed below.

Background

11. Following the merger of the two hospital trusts, ESNEFT is undergoing a Sustainability Transformation Plan (STP) to determine how acute hospital healthcare provision will be provided at each location. In addition, as part of a national initiative promoted by NHS England, acute hospital trusts are required to provide early delivery of additional inpatient bed spaces, which for Ipswich will support growth and resilience across the local health economy.
12. As part of these processes, significant investment in healthcare facilities and services is and will be taking place, to meet the requirements of the existing and future catchment population brought about in part by planned new housing growth included in the Local Plan. The provision of a new Emergency Department and Urgent Treatment Centre, which gained planning permission in 2019, is a key example of such investment and is due to be implemented in 2021/2022.
13. In addition to the STP workstreams, ESNEFT are also undergoing a Building for Better Care Programme which has a focus on the provision of elective care. Following an extensive public consultation process, a decision was made for a new Elective Orthopaedic Centre (EOC) to be provided on the Colchester Hospital site which permits all inpatient elective care surgery to be undertaken at Colchester. A planning application for the proposed new EOC building at Colchester was granted planning permission in June 2021.
14. To help deliver the STP and associated level of development linked with acute healthcare provision at Ipswich Hospital, a planning policy basis is required to provide for a suitable level of flexibility and certainty within which the Trust may bring forward its investment and development plans through planning applications.

Key Planning Policy Issues & Revisions Sought

15. With the above Local Plan 'soundness' issues, background and Trust estates strategy requirements in mind, our representations continue to focus on the wording of modified Policy CS19: Provision of Health Services and its associated supporting text.

CS17: Delivering Infrastructure

16. Within our representations to the Final Draft consultation in February 2020, we requested amendments to the wording of this policy that provides the basis for obtaining developer contributions towards essential infrastructure provision. We noted that while health and emergency services were referred to, there was no specific reference to acute hospital facilities.
17. The Trust are therefore content that within the Proposed Main Modifications document (Main Modification 66) the two requested amendments to this policy, to include reference to acute hospital facilities, have been incorporated. The Trust therefore supports the wording of this policy.

CS19: Provision of Health Services

18. Within our representations to the Final Draft consultation in February 2020, we requested amendments to the wording of Policy CS19, as well as to the supporting text which are referred to separately below.
19. Policy CS19 provides the basis for determining planning applications for development at the Ipswich Hospital Campus on Heath Road, however we previously raised concerns with the policies attempt to 'safeguard' the hospital site for health and ancillary uses, which was unnecessarily restrictive and inflexible.
20. As detailed in previous representations, as a statutory health authority and acute service provider, ESNEFT requires further flexibility in how it plans and develops the Hospital site, which in addition to a range of health care and ancillary uses, may also include non-health care provision should land become surplus to health care requirements over the local plan period. Therefore, it was considered the policy's wording would not enable sufficient flexibility to enable ESNEFT to realise its development requirements, reflect related legal or procedural requirements, or reflect the most appropriate strategy for the site.
21. Consequently, minor but important revisions to the Policy were requested to provide further flexibility by removing the overly restrictive safeguarding requirement and allowing for a wide range of health care and ancillary uses across the site, whilst also allowing for potential and appropriate non-health care uses to come forward as part of an overall planning strategy for the Hospital site.
22. Overall, while the modifications contained within MM68 provide for a slightly improved position to the policy wording within the Final Draft document, particularly with the inclusion of 'further inpatient and outpatient accommodation and facilities' being acceptable related uses, the changes do not go far enough, and the policy continues to be unnecessarily restrictive. This does not provide sufficient

flexibility to ESNEFT to realise its development requirements needed to provide for acute health services and facilities or reflect the most appropriate estate strategy for the site.

23. The complication is due to a continuing reference to safeguarding the site for healthcare and ancillary uses, which is an unnecessary and unreasonable policy basis and precludes the Trust's flexibility and discretion for non-healthcare related uses coming forward should the need arise.
24. The policy wording could be harmful to ESNEFT as landowner and health authority if an area(s) of land such as the surface car park at Pearson Road or at the northern part of the site, is subsequently declared surplus for healthcare purposes but needed to help cross subsidise the provision of acute care services and facilities. It would be reasonable that, in this scenario, any potential non-healthcare redevelopment option should be assessed on their individual merits rather than being restricted by a draconian safeguarding policy. This approach aligns with paragraph 96 of the NPPF (2021) which stresses the importance of proactive and positive engagement between statutory bodies and local planning authorities in planning for hospital sites and early resolution to key planning issues. With this in mind, Ipswich Borough Council (IBC) is required to work with ESNEFT to help enable appropriate public service infrastructure development to be delivered. ESNEFT's alternative proposed policy approach would provide the required flexibility to manage and develop the Ipswich Hospital site in line with its statutory function and reflected in its up to date Estates Strategy.
25. IBC, within its Statement of Common Ground (SoCG) dated August 2020, disagreed with the suggested removal of safeguarding the site and replacement wording relating to the masterplan, on the basis that the Local Plan covers an 18-year period compared to the Trust's Estate Strategy covering a five-year period. In summary, there was concern that the Trust's Strategy could form different versions across the longer Local Plan period. In addition, IBC were concerned that due to the Ipswich Hospital's location being amongst existing development, if the curtilage was to be curtailed this would impact on the ability for the hospital to expand in the future.
26. However, the site and land use are managed by ESNEFT, which has the delivery of acute health care as its statutory remit. It is therefore, for the Trust to determine what facilities and land are required to provide for its health care functions rather than the LPA which is not a health authority. If, through its Estate Strategy, ESNEFT determines that it has surplus land, the LPA should use this information as part of an evidence base and plan accordingly in consultation with the Trust. This would be a more conventional and proactive approach than resorting to the current proposed inflexible and unnecessary wording of the policy seeking to safeguard the site, which could prevent suitable development proposals from going ahead.
27. Furthermore, paragraph 93(b) of the NPPF requires local planning authorities to take account of and support the delivery of local strategies to improve health, social and cultural well-being for all sections of the community. In this regard IBC should be facilitating the implementation of ESNEFT's health care strategies rather than imposing an alternative inflexible preservation approach as set out in the currently worded draft policy. The impacts of the Covid-19 pandemic have demonstrated the necessity of undertaking different and more flexible approaches to delivering healthcare which will inevitably evolve further as the longer-term impacts on the land take and management requirements to acute health care are realised. Currently the wording of this policy does not allow ESNEFT to respond to these inevitable changes.

28. Therefore, it is requested that the policy be worded as below to incorporate our previously suggested amendments. This would provide flexibility to ESNEFT by removing the restrictive safeguarding requirement and allowing for a wider range of health care and ancillary uses across the site. IBC as Planning Authority would also maintain planning control over the type and quantum of development proposed and in consultation with ESNEFT would also be able to clarify whether sufficient land remains available for health care purposes. This approach would also allow for appropriate non-health care uses to come forward providing they would be consistent with ESNEFT's health care strategy and masterplan for the site as a whole and compatible with the prevailing pattern of land uses.
29. From ESNEFT'S perspective, IBC's current proposed planning policy approach could unnecessarily fetter its discretion, flexibility, and ability to deliver health care services through its Estates Strategy in the most appropriate way, whilst having regard to land use compatibility considerations. With this in mind, should the amendments below not be acceptable to IBC, we suggest that the Local Plan Inspectors consider the matter and if necessary, reopen the Public Examination to allow it to be discussed in further detail if necessary.

The Council supports the development of healthcare related facilities at the Heath Road Hospital Campus as identified on the policies map. Related uses may include:

- Further inpatient and outpatient accommodation and facilities;
- Staff accommodation;
- Residential care home;
- Intermediate facilities;
- Education and teaching centre;
- Therapies centre; and
- Other ancillary uses.

Proposals for new and improved healthcare, ancillary facilities and other compatible development at Heath Road Hospital Campus will be supported providing they form part of the Hospital Trust's Estate Strategy for the provision of healthcare facilities, consistent with an overall site wide masterplan prepared by the Trust and associated Transport Strategy including suitable travel plan measures and parking provision.

Paragraph 8.229

30. Within our previous representations we requested revisions to paragraph 8.229, to include additional sentences referencing Policy CS19 allowing for a range of healthcare and other compatible uses, with ancillary uses also including shared facilities to deliver a mutual benefit to other public sector organisations. In addition, it was requested that the final sentence of the paragraph, detailed below, be removed due to it covering healthcare matters beyond the scope of the Local Planning Authority's remit.

'Decisions on changes to acute care provision need to be considered in the context of their health impact, in particular the community's ability to access services appropriately and in a timely fashion.'

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31. This sentence has remained within the supporting text, with the IBC justification within the SoCG being that paragraphs 20(c) and 92(c) of the NPPF confirm strategic policies should make sufficient provision for health and guard against the unnecessary loss of valued facilities and services.
32. However, paragraph 93(b) of the NPPF requires local planning authorities to take account of and support the delivery of local strategies to improve health, social and cultural well-being for all sections of the community. Therefore, our previous concerns relating to the inclusion of this sentence remain, and we again request that it be deleted.
33. ESNEFT is pleased to note that the majority of our suggested wording has been incorporated within this paragraph, as shown within Main Modification 69. That notwithstanding, it is acknowledged that 'other compatible uses' within the second sentence has been replaced with 'ancillary uses', with IBC's SoCG justification for this being that the Hospital site should be safeguarded for health care and ancillary uses, and that other compatible uses could result in non-health care related development onto parts of the site that are safeguarded for healthcare uses.
34. However, 'ancillary uses' does not provide the Trust with sufficient flexibility and does not allow for the introduction of non-health care uses where appropriate and acceptable in planning terms. Therefore, the exclusion of 'other compatible uses', along with the emphasis on 'safeguarding' referred to above, could unnecessarily restrict appropriate development proposals and create planning policy tensions. Reference to 'other compatible uses' within this supporting text would avoid potential conflicts at the planning application stage in the event that such schemes come forward.
35. Given the above, it is requested that paragraph 8.229 is amended to read as follows:

The Heath Road Hospital is a strategic health facility serving Ipswich and the surrounding area. It is important that any rationalisation of uses there takes place in the context of a planned strategy for healthcare provision which itself takes account of the future growth of Ipswich and the Ipswich Strategic Planning Area. The policy allows for a range of healthcare and other compatible uses, including staff support services to assist with recruitment and retention. Additional ancillary uses may also include shared facilities to deliver a mutual benefit to other public sector organisations aligned with the one public estate agenda.

Paragraph 8.230

36. Within our representations to the Final Draft consultation, we requested revisions to paragraph 8.230 to link any parking issues to those directly associated with proposed hospital activity related to specific developments, rather than any parking issues that may be occurring in the area generally.
37. Whilst it is noted that reference to 'hospital related developments' is now included within the first sentence under Main Modification 70, the word 'specific' has been omitted. Within the SoCG, IBC confirmed it did not agree with its insertion due to a concern that this may prevent any 'ancillary uses' developed at the hospital from being assessed in terms of travel implications, which ESNEFT is content to agree with.

38. The removal of 'existing' and insertion of 'proposed' in relation to parking issues have not been incorporated within the Main Modifications. Previously within the SoCG, IBC considered that the management of any parking issues forms an important aspect of encouraging sustainable transport, and to remove reference to 'existing' parking issues and insert 'proposed' hospital activities would result in any mitigation being too limited and ineffective in terms of encouraging sustainable transport modes which should be seen within the context of the wider transport strategy.
39. However, ESNEFT considers it to be unreasonable to insist that proposed development should tackle existing parking issues, particularly when the issues may not be associated with the Hospital. It is acknowledged that some on street parking in the locality is associated with the hospital, which has occurred historically and is of course permitted providing parking restrictions and highway safety matters are observed. However, it is also noted that nearby on street parking is additionally generated by residents and their visitors, visitors to Rushmere Heath located adjacent to the east, and to Broke Hall Community Primary School and Heathlands Community Pre-School located to the south. Therefore, existing parking issues cannot be assumed to be solely related to the hospital and it is not a matter for ESNEFT Hospital to address all pre-existing situations.
40. Consequently, the traffic, travel and parking impacts of any proposed hospital development should be considered on its individual merits, with this being particularly important where certain developments will have only a minor impact on travel and parking, and in some cases no impact at all. Therefore, an appropriate policy basis is required to ensure that an equitable resolution can be achieved.
41. This approach is consistent with paragraphs 55-57 of the NPPF (July 2021), which links planning conditions and obligations to the tests of reasonableness linked to the impact of specific development proposals i.e. in the case of planning obligations they should be necessary, directly related and fairly and reasonably related to the scale of development proposed.
42. In addition, the replacement of 'possible' with 'practicable' has not been incorporated, as IBC feel it could be misinterpreted as allowing for economic or other reasons for not pursuing sustainable modes to be used. Therefore, IBC considers that 'possible' is a more effective and robust word to use and would better serve to meet the sustainable transport vision and objectives of the Local Plan and other policies.
43. However, ESNEFT disputes this point, and considers that 'practicable' is a more appropriate word in the context of the travel mode opportunities and constraints of a working acute hospital, which is very different from many other land uses, especially when applied to potential sustainable modes of travel used by staff, patients and visitors. Again, the travel patterns and characteristics of an acute hospital are materially different from other high traffic volume generating uses. For example, staff work shift times do not always coincide with public transport timetables and related unsociable hours are also not always compatible with cycling and pedestrian provisions/options.
44. Additionally, the physical and mental state of many patients and visitors and related hospital visiting times often result in sustainable travel modes not being a viable option. Therefore, while sustainable travel can be and is often possible, for the reasons explained above it is not always 'practicable', and the text within this paragraph should be amended to reflect this position.

45. Given all of the above, it is requested that paragraph 8.230 be amended to the following:

It is also essential that the travel implications of hospital related developments are fully considered and measures are put in place to encourage the use of sustainable modes where practicable by staff, out-patients, and visitors. In particular, measures should tackle parking issues in surrounding residential areas associated with proposed Hospital activity and the Hospital should put in place monitoring to ensure that any measures are proving to be effective.

46. We trust that you will find our representations to be helpful as part of the Local Plan review process, and please contact us if you require further clarification at this stage to help address the outstanding soundness matters and related objections.

Yours sincerely

Michael Pingram
Lawson Planning Partnership Ltd

Enc.

Ipswich Local Plan Review 2018-2036

Proposed Main Modifications

Consultation representation form for:

Core Strategy and Policies Development Plan Document Main Modifications
Site Allocations and Policies (Incorporating IP-One Area Action Plan) Development Plan
Document Main Modifications
Sustainability Appraisal of Main Modifications
Habitats Regulations Assessment of Main Modifications

Interested Parties can also comment on additional evidence submitted during and after the Hearing (these are listed in section K of the Core Documents on the Examination website documents K1-K6 and K8-K25) insofar as they relate to their representations on the Main Modifications

29th July 2021 (9.00am) – 23rd September 2021(11.45pm)

Consultation website: <https://ipswich.oc2.uk/>
Website: www.ipswich.gov.uk/mainmodifications
Email: planningpolicy@ipswich.gov.uk

Phone: 01473 432019

Council address:

Planning Policy
Planning and Development
Ipswich Borough Council
Grafton House, 15-17 Russell Road
Ipswich IP1 2DE



Please return to:	planningpolicy@ipswich.gov.uk Planning Policy Planning and Development Ipswich Borough Council Grafton House, 15-17 Russell Road Ipswich IP1 2DE
Return by:	23rd September 2021 11.45 pm
This form has two parts:	Part A – Personal details
	Part B – Your representation(s).

PART A Personal Details		
	1. Personal details*	2. Agent's details (if applicable)
Title		Mr
First name		Michael
Last name		Pingram
Job title (where relevant)		Senior Planner
Organisation (where relevant)	East Suffolk & Norfolk Essex NHS Foundation Trust (ESNEFT)	Lawson Planning Partnership Ltd
Address Please include post code	Heath Road Ipswich Suffolk IP4 5PD	The Coach House, East Hill House 76 High Street Colchester Essex CO1 1UF
E-mail		_____
Telephone No.		

Signature: **Date:17th September 2021.....**

Please note that representations cannot be kept confidential and will be available for public scrutiny. However, representations published on the Council's website will exclude your personal contact details.

* If an agent is appointed and details provided above, you only need to complete the Title, Names and Organisation under Personal Details.

PART B Please complete a separate Part B for each representation you wish to make.

Your name or organisation (and client if you are an agent):	East Suffolk & North Essex NHS Foundation Trust (ESNEFT) c/o Lawson Planning Partnership Ltd
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Please refer to guidance notes on completing this form.

3. Please indicate below which proposed Main Modification this representation relates to.

Main Modification number <i>Please use modification reference number, e.g. MM1, MM2 etc</i>	
MM66	

4. Please indicate below which section(s) (if any) of the Sustainability Appraisal of the Main Modifications, Habitats Regulations Assessment of the Main Modifications and/or Additional Evidence (K1-K6 and K8-K25) this representation relates to, and relate your representation to the MM specified in 3. above.

Sustainability Appraisal of Main Modifications <i>Please state which part of the SA Report</i>	Para 3.1.13
Habitats Regulations Assessment of Main Modifications <i>Please state which part of the HRA Report</i>	N/A
Additional evidence submitted during and after the Hearing <i>Please use the Core Document Library reference number</i>	N/A

5. Do you consider the proposed Main Modification is:

	Please tick		Please tick	
5. (1) Legally compliant	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
5. (2) Sound	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

6. If you consider the proposed Main Modification would render the Plan unsound, please specify your reasons below (please tick all that apply below). See below for definitions.

- ☐ **It would not be positively prepared**
☐ **It would not be justified**
☐ **It would not be effective**
☐ **It would not be consistent with national policy**

Positively prepared – providing a strategy which, as a minimum, seeks to meet the area's objectively assessed needs; and is informed by agreements with other authorities, so that

unmet need from neighbouring areas is accommodated where it is practical to do so and is consistent with achieving sustainable development;

Justified – an appropriate strategy, taking into account the reasonable alternatives, and based on proportionate evidence;

Effective – deliverable over the plan period, and based on effective joint working on cross-boundary strategic matters that have been dealt with rather than deferred, as evidenced by the statement of common ground; and

Consistent with national policy – enabling the delivery of sustainable development in accordance with the policies in this Framework and other statements of national planning policy, where relevant.

7. Please give details of why you consider the Proposed Main Modification (including reference to the Sustainability Appraisal/Habitats Regulations Assessment/Additional Evidence where relevant) is not legally compliant or is unsound. Please be as precise as possible.

If you wish to support the legal compliance or soundness of the proposed Main Modification (including reference to the Sustainability Appraisal/Habitats Regulation Assessment/Additional Evidence where relevant), please also use this box to set out your comments.

Please provide details of your representation here:

Within our representations to the Final Draft consultation in February 2020, we requested amendments to the wording of this policy that provides the basis for obtaining developer contributions towards essential infrastructure provision. We noted that while health and emergency services were referred to, there was no specific reference to acute hospital facilities.

The Trust are therefore content that within the Proposed Main Modifications document (Main Modification 66) the two requested amendments to this policy, to include reference to acute hospital facilities, have been incorporated. The Trust therefore supports the wording of this policy.

Please see attached Lawson Planning Partnership Ltd representation letter dated 17th September 2021 for further details.

8. Please set out the changes to the Main Modification you consider necessary to make the Local Plan legally compliant and/or sound, having regard to the test you have identified at 6 above where it relates to soundness. You will need to say why this will make the Local Plan legally compliant and/or sound. It will be helpful if you are able to put forward your suggested revised wording of any policy or text. Please be as precise as possible.

Please specify the changes to the Main Modification you consider necessary here:

Not applicable.

Please provide a concise summary of your representation here (up to 100 words):

Following our representations within the Final Draft consultation in February 2020, our requested amendments have been incorporated within the Proposed Main Modifications document. The Trust therefore support these changes and the wording of this policy.

Please note your representation should cover succinctly all the information, evidence and supporting information necessary to support/justify the representation and any suggested changes.

Please ensure that Part B of your form is attached to Part A and return both to the address provided by 11.45pm on 23rd September 2021.

Ipswich Local Plan Review 2018-2036

Proposed Main Modifications

Consultation representation form for:

Core Strategy and Policies Development Plan Document Main Modifications
Site Allocations and Policies (Incorporating IP-One Area Action Plan) Development Plan
Document Main Modifications
Sustainability Appraisal of Main Modifications
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Return by:	23rd September 2021 11.45 pm
This form has two parts:	Part A – Personal details
	Part B – Your representation(s).

PART A Personal Details		
	1. Personal details*	2. Agent's details (if applicable)
Title		Mr
First name		Michael
Last name		Pingram
Job title (where relevant)		Senior Planner
Organisation (where relevant)	East Suffolk & Norfolk Essex NHS Foundation Trust (ESNEFT)	Lawson Planning Partnership Ltd
Address Please include post code	Heath Road Ipswich Suffolk IP4 5PD	The Coach House, East Hill House 76 High Street Colchester Essex CO1 1UF
E-mail		_____
Telephone No.		

Signature: **Date:** **17th September 2021**

Please note that representations cannot be kept confidential and will be available for public scrutiny. However, representations published on the Council's website will exclude your personal contact details.

* If an agent is appointed and details provided above, you only need to complete the Title, Names and Organisation under Personal Details.

PART B Please complete a separate Part B for each representation you wish to make.

Your name or organisation (and client if you are an agent):	East Suffolk & North Essex NHS Foundation Trust (ESNEFT) c/o Lawson Planning Partnership Ltd
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Please refer to guidance notes on completing this form.

3. Please indicate below which proposed Main Modification this representation relates to.

Main Modification number <i>Please use modification reference number, e.g. MM1, MM2 etc</i>	
MM68	

4. Please indicate below which section(s) (if any) of the Sustainability Appraisal of the Main Modifications, Habitats Regulations Assessment of the Main Modifications and/or Additional Evidence (K1-K6 and K8-K25) this representation relates to, and relate your representation to the MM specified in 3. above.

Sustainability Appraisal of Main Modifications <i>Please state which part of the SA Report</i>	Para 3.1.14
Habitats Regulations Assessment of Main Modifications <i>Please state which part of the HRA Report</i>	N/A
Additional evidence submitted during and after the Hearing <i>Please use the Core Document Library reference number</i>	N/A

5. Do you consider the proposed Main Modification is:

	Please tick		Please tick	
5. (1) Legally compliant	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
5. (2) Sound	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

6. If you consider the proposed Main Modification would render the Plan unsound, please specify your reasons below (please tick all that apply below). See below for definitions.

- ☒ It would not be positively prepared
- ☒ It would not be justified
- ☒ It would not be effective
- ☒ It would not be consistent with national policy

Positively prepared – providing a strategy which, as a minimum, seeks to meet the area's objectively assessed needs; and is informed by agreements with other authorities, so that

unmet need from neighbouring areas is accommodated where it is practical to do so and is consistent with achieving sustainable development;

Justified – an appropriate strategy, taking into account the reasonable alternatives, and based on proportionate evidence;

Effective – deliverable over the plan period, and based on effective joint working on cross-boundary strategic matters that have been dealt with rather than deferred, as evidenced by the statement of common ground; and

Consistent with national policy – enabling the delivery of sustainable development in accordance with the policies in this Framework and other statements of national planning policy, where relevant.

7. Please give details of why you consider the Proposed Main Modification (including reference to the Sustainability Appraisal/Habitats Regulations Assessment/Additional Evidence where relevant) is not legally compliant or is unsound. Please be as precise as possible.

If you wish to support the legal compliance or soundness of the proposed Main Modification (including reference to the Sustainability Appraisal/Habitats Regulation Assessment/Additional Evidence where relevant), please also use this box to set out your comments.

Please provide details of your representation here:

Within our representations to the Final Draft consultation in February 2020, we requested amendments to the wording of Policy CS19, as well as to the supporting text which are referred to separately below.

Policy CS19 provides the basis for determining planning applications for development at the Ipswich Hospital Campus on Heath Road, however we previously raised concerns with the policies attempt to 'safeguard' the hospital site for health and ancillary uses, which was unnecessarily restrictive and inflexible.

As detailed in previous representations, as a statutory health authority and acute service provider, ESNEFT requires further flexibility in how it plans and develops the Hospital site, which in addition to a range of health care and ancillary uses, may also include non-health care provision should land become surplus to health care requirements over the local plan period. Therefore, it was considered the policy's wording would not enable sufficient flexibility to enable ESNEFT to realise its development requirements, reflect related legal or procedural requirements, or reflect the most appropriate strategy for the site.

Consequently, minor but important revisions to the Policy were requested to provide further flexibility by removing the overly restrictive safeguarding requirement and allowing for a wide range of health care and ancillary uses across the site, whilst also allowing for potential and appropriate non-health care uses to come forward as part of an overall planning strategy for the Hospital site.

Overall, while the modifications contained within MM68 provide for a slightly improved position to the policy wording within the Final Draft document, particularly with the inclusion of 'further inpatient and outpatient accommodation and facilities' being acceptable related uses, the changes do not go far enough, and the policy continues to be unnecessarily restrictive. This does not provide sufficient flexibility to ESNEFT to realise its development requirements needed to provide for acute health services and facilities or reflect the most appropriate estate strategy for the site.

The complication is due to a continuing reference to safeguarding the site for healthcare and ancillary uses, which is an unnecessary and unreasonable policy basis and precludes the Trust's flexibility and discretion for non-healthcare related uses coming forward should the need arise.

Cont'd...

The policy wording could be harmful to ESNEFT as landowner and health authority if an area(s) of land such as the surface car park at Pearson Road or at the northern part of the site, is subsequently declared surplus for healthcare purposes but needed to help cross subsidise the provision of acute care services and facilities. It would be reasonable that, in this scenario, any potential non-healthcare redevelopment option should be assessed on their individual merits rather than being restricted by a draconian safeguarding policy. This approach aligns with paragraph 96 of the NPPF (2021) which stresses the importance of proactive and positive engagement between statutory bodies and local planning authorities in planning for hospital sites and early resolution to key planning issues. With this in mind, Ipswich Borough Council (IBC) is required to work with ESNEFT to help enable appropriate public service infrastructure development to be delivered. ESNEFT's alternative proposed policy approach would provide the required flexibility to manage and develop the Ipswich Hospital site in line with its statutory function and reflected in its up to date Estates Strategy.

IBC, within its Statement of Common Ground dated August 2020, disagreed with the suggested removal of safeguarding the site and replacement wording relating to the masterplan, on the basis that the Local Plan covers an 18-year period compared to the Trust's Estate Strategy covering a five-year period. In summary, there was concern that the Trust's Strategy could form different versions across the longer Local Plan period. In addition, IBC were concerned that due to the Ipswich Hospital's location being amongst existing development, if the curtilage was to be curtailed this would impact on the ability for the hospital to expand in the future.

However, the site and land use are managed by ESNEFT, which has the delivery of acute health care as its statutory remit. It is therefore, for the Trust to determine what facilities and land are required to provide for its health care functions rather than the LPA which is not a health authority. If, through its Estate Strategy, ESNEFT determines that it has surplus land, the LPA should use this information as part of an evidence base and plan accordingly in consultation with the Trust. This would be a more conventional and proactive approach than resorting to the current proposed inflexible and unnecessary wording of the policy seeking to safeguard the site, which could prevent suitable development proposals from going ahead.

Furthermore, paragraph 93(b) of the NPPF requires local planning authorities to take account of and support the delivery of local strategies to improve health, social and cultural well-being for all sections of the community. In this regard IBC should be facilitating the implementation of ESNEFT's health care strategies rather than imposing an alternative inflexible preservation approach as set out in the currently worded draft policy. The impacts of the Covid-19 pandemic have demonstrated the necessity of undertaking different and more flexible approaches to delivering healthcare which will inevitably evolve further as the longer-term impacts on the land take and management requirements to acute health care are realised. Currently the wording of this policy does not allow ESNEFT to respond to these inevitable changes.

Therefore as further detailed within paragraph 7 of the attached Lawson Planning Partnership Ltd representation letter, dated 17th September 2021, the draft Local Plan remains unsound when considered against the tests set out in paragraph 35 of the NPPF.

It is requested that the policy be worded to incorporate our previously suggested amendments. This would provide flexibility to ESNEFT by removing the restrictive safeguarding requirement and allowing for a wider range of health care and ancillary uses across the site. IBC as Planning Authority would also maintain planning control over the type and quantum of development proposed and in consultation with ESNEFT would also be able to clarify whether sufficient land remains available for health care purposes. This approach would also allow for appropriate non-health care uses to come forward providing they would be consistent with ESNEFT's health care strategy and masterplan for the site as a whole and compatible with the prevailing pattern of land uses.

From ESNEFT'S perspective, IBC's current proposed planning policy approach could unnecessarily fetter its discretion, flexibility, and ability to deliver health care services through its Estates Strategy in the most appropriate way, whilst having regard to land use compatibility considerations. With this in mind, should the amendments below not be acceptable to IBC, we suggest that the Local Plan Inspectors consider the matter and if necessary, reopen the Public Examination to allow it to be discussed in further detail if necessary.

Please provide a concise summary of your representation here (up to 100 words):

Policy CS19's wording, along with its supporting text, continues to refer to 'safeguarding' the site for healthcare purposes. This runs contrary to ESNEFT's planning requirements and is also unnecessary and unreasonable. This policy basis is essentially overly restrictive and would not provide sufficient flexibility and discretion to ESNEFT to enable it to realise its development requirements and does not reflect the most appropriate strategy for the site. Consequently, whilst Policy CS19 remains as currently proposed to be amended by the Local Planning Authority, the draft Local Plan remains 'unsound' when considered against the tests set out in paragraph 35 of the NPPF.

8. Please set out the changes to the Main Modification you consider necessary to make the Local Plan legally compliant and/or sound, having regard to the test you have identified at 6 above where it relates to soundness. You will need to say why this will make the Local Plan legally compliant and/or sound. It will be helpful if you are able to put forward your suggested revised wording of any policy or text. Please be as precise as possible.

Please specify the changes to the Main Modification you consider necessary here:

It is requested that Policy CS19 reads as follows:

The Council supports the development of healthcare related facilities at the Heath Road Hospital Campus as identified on the policies map. Related uses may include:

- ❖ Further inpatient and outpatient accommodation and facilities;
- ❖ Staff accommodation;
- ❖ Residential care home;
- ❖ Intermediate facilities;
- ❖ Education and teaching centre;
- ❖ Therapies centre; and
- ❖ Other ancillary uses.

Proposals for new and improved healthcare, ancillary facilities and other compatible development at Heath Road Hospital Campus will be supported providing they form part of the Hospital Trust's Estate Strategy for the provision of healthcare facilities, consistent with an overall site wide masterplan prepared by the Trust and associated Transport Strategy including suitable travel plan measures and parking provision.

Please see attached Lawson Planning Partnership Ltd representation letter dated 17th September 2021 for further details.

Please note your representation should cover succinctly all the information, evidence and supporting information necessary to support/justify the representation and any suggested changes.

Please ensure that Part B of your form is attached to Part A and return both to the address provided by 11.45pm on 23rd September 2021.

Ipswich Local Plan Review 2018-2036

Proposed Main Modifications

Consultation representation form for:

Core Strategy and Policies Development Plan Document Main Modifications
Site Allocations and Policies (Incorporating IP-One Area Action Plan) Development Plan
Document Main Modifications
Sustainability Appraisal of Main Modifications
Habitats Regulations Assessment of Main Modifications

Interested Parties can also comment on additional evidence submitted during and after the Hearing (these are listed in section K of the Core Documents on the Examination website documents K1-K6 and K8-K25) insofar as they relate to their representations on the Main Modifications

29th July 2021 (9.00am) – 23rd September 2021(11.45pm)

Consultation website: <https://ipswich.oc2.uk/>
Website: www.ipswich.gov.uk/mainmodifications
Email: planningpolicy@ipswich.gov.uk

Phone: 01473 432019

Council address:

Planning Policy
Planning and Development
Ipswich Borough Council
Grafton House, 15-17 Russell Road
Ipswich IP1 2DE



Please return to:	planningpolicy@ipswich.gov.uk Planning Policy Planning and Development Ipswich Borough Council Grafton House, 15-17 Russell Road Ipswich IP1 2DE
Return by:	23rd September 2021 11.45 pm
This form has two parts:	Part A – Personal details
	Part B – Your representation(s).

PART A Personal Details		
	1. Personal details*	2. Agent's details (if applicable)
Title		Mr
First name		Michael
Last name		Pingram
Job title (where relevant)		Senior Planner
Organisation (where relevant)	East Suffolk & Norfolk Essex NHS Foundation Trust (ESNEFT)	Lawson Planning Partnership Ltd
Address Please include post code	Heath Road Ipswich Suffolk IP4 5PD	The Coach House, East Hill House 76 High Street Colchester Essex CO1 1UF
E-mail		_____
Telephone No.		

Signature: **Date:** **17th September 2021**

Please note that representations cannot be kept confidential and will be available for public scrutiny. However, representations published on the Council's website will exclude your personal contact details.

* If an agent is appointed and details provided above, you only need to complete the Title, Names and Organisation under Personal Details.

PART B Please complete a separate Part B for each representation you wish to make.

Your name or organisation (and client if you are an agent):	East Suffolk & North Essex NHS Foundation Trust (ESNEFT) c/o Lawson Planning Partnership Ltd
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Please refer to guidance notes on completing this form.

3. Please indicate below which proposed Main Modification this representation relates to.

Main Modification number <i>Please use modification reference number, e.g. MM1, MM2 etc</i>	
MM69	

4. Please indicate below which section(s) (if any) of the Sustainability Appraisal of the Main Modifications, Habitats Regulations Assessment of the Main Modifications and/or Additional Evidence (K1-K6 and K8-K25) this representation relates to, and relate your representation to the MM specified in 3. above.

Sustainability Appraisal of Main Modifications <i>Please state which part of the SA Report</i>	Para 3.1.14
Habitats Regulations Assessment of Main Modifications <i>Please state which part of the HRA Report</i>	N/A
Additional evidence submitted during and after the Hearing <i>Please use the Core Document Library reference number</i>	N/A

5. Do you consider the proposed Main Modification is:

	Please tick		Please tick	
5. (1) Legally compliant	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
5. (2) Sound	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

6. If you consider the proposed Main Modification would render the Plan unsound, please specify your reasons below (please tick all that apply below). See below for definitions.

- ☒ It would not be positively prepared
- ☒ It would not be justified
- ☒ It would not be effective
- ☒ It would not be consistent with national policy

Positively prepared – providing a strategy which, as a minimum, seeks to meet the area's objectively assessed needs; and is informed by agreements with other authorities, so that

unmet need from neighbouring areas is accommodated where it is practical to do so and is consistent with achieving sustainable development;

Justified – an appropriate strategy, taking into account the reasonable alternatives, and based on proportionate evidence;

Effective – deliverable over the plan period, and based on effective joint working on cross-boundary strategic matters that have been dealt with rather than deferred, as evidenced by the statement of common ground; and

Consistent with national policy – enabling the delivery of sustainable development in accordance with the policies in this Framework and other statements of national planning policy, where relevant.

7. Please give details of why you consider the Proposed Main Modification (including reference to the Sustainability Appraisal/Habitats Regulations Assessment/Additional Evidence where relevant) is not legally compliant or is unsound. Please be as precise as possible.

If you wish to support the legal compliance or soundness of the proposed Main Modification (including reference to the Sustainability Appraisal/Habitats Regulation

Please provide details of your representation here:

Within our previous representations we requested revisions to paragraph 8.229, to include additional sentences referencing Policy CS19 allowing for a range of healthcare and other compatible uses, with ancillary uses also including shared facilities to deliver a mutual benefit to other public sector organisations. In addition, it was requested that the final sentence of the paragraph, detailed below, be removed due to it covering healthcare matters beyond the scope of the Local Planning Authority's remit.

'Decisions on changes to acute care provision need to be considered in the context of their health impact, in particular the community's ability to access services appropriately and in a timely fashion.'

This sentence has remained within the supporting text, with the IBC justification within the Statement of Common Ground being that paragraphs 20(c) and 92(c) of the NPPF confirm strategic policies should make sufficient provision for health and guard against the unnecessary loss of valued facilities and services.

However, paragraph 93(b) of the NPPF requires local planning authorities to take account of and support the delivery of local strategies to improve health, social and cultural well-being for all sections of the community. Therefore, our previous concerns relating to the inclusion of this sentence remain, and we again request that it be deleted.

ESNEFT is pleased to note that the majority of our suggested wording has been incorporated within this paragraph, as shown within Main Modification 69. That notwithstanding, it is acknowledged that 'other compatible uses' within the second sentence has been replaced with 'ancillary uses', with IBC's SoCG justification for this being that the Hospital site should be safeguarded for health care and ancillary uses, and that other compatible uses could result in non-health care related development onto parts of the site that are safeguarded for healthcare uses.

However, 'ancillary uses' does not provide the Trust with sufficient flexibility and does not allow for the introduction of non-health care uses where appropriate and acceptable in planning terms. Therefore, the exclusion of 'other compatible uses', along with the emphasis on 'safeguarding' referred to above, could unnecessarily restrict appropriate development proposals and create planning policy tensions. Reference to 'other compatible uses' within this supporting text would avoid potential conflicts at the planning application stage in the event that such schemes come forward.

Therefore as further detailed within paragraph 7 of the attached Lawson Planning Partnership Ltd representation letter, dated 17th September 2021, the draft Local Plan remains unsound when considered against the tests set out in paragraph 35 of the NPPF.

Assessment/Additional Evidence where relevant), please also use this box to set out your comments.

Please provide a concise summary of your representation here (up to 100 words):

Following our representations to the Final Draft consultation, ESNEFT are pleased the majority of our suggested wording has been incorporated within paragraph 8.229, as shown within Main Modification 69. However a sentence previously requested to be removed due to it covering healthcare matters beyond the scope of the Local Planning Authority's remit remains, while 'other compatible uses' within the second sentence has been replaced with 'ancillary uses'. This does not provide the Trust with sufficient flexibility or allow for the introduction of non-health care uses where appropriate and acceptable in planning terms, which could result in future planning policy tensions within any future planning application.

8. Please set out the changes to the Main Modification you consider necessary to make the Local Plan legally compliant and/or sound, having regard to the test you have identified at 6 above where it relates to soundness. You will need to say why this will make the Local Plan legally compliant and/or sound. It will be helpful if you are able to put forward your suggested revised wording of any policy or text. Please be as precise as possible.

Please specify the changes to the Main Modification you consider necessary here:

It is requested that paragraph 8.229 is amended to read as follows:

The Heath Road Hospital is a strategic health facility serving Ipswich and the surrounding area. It is important that any rationalisation of uses there takes place in the context of a planned strategy for healthcare provision which itself takes account of the future growth of Ipswich and the Ipswich Strategic Planning Area. The policy allows for a range of healthcare and other compatible uses, including staff support services to assist with recruitment and retention. Additional ancillary uses may also include shared facilities to deliver a mutual benefit to other public sector organisations aligned with the one public estate agenda.

Please see attached Lawson Planning Partnership Ltd representation letter dated 17th September 2021 for further details.

Please note your representation should cover succinctly all the information, evidence and supporting information necessary to support/justify the representation and any suggested changes.

Please ensure that Part B of your form is attached to Part A and return both to the address provided by 11.45pm on 23rd September 2021.

Ipswich Local Plan Review 2018-2036

Proposed Main Modifications

Consultation representation form for:

Core Strategy and Policies Development Plan Document Main Modifications
Site Allocations and Policies (Incorporating IP-One Area Action Plan) Development Plan
Document Main Modifications
Sustainability Appraisal of Main Modifications
Habitats Regulations Assessment of Main Modifications

Interested Parties can also comment on additional evidence submitted during and after the Hearing (these are listed in section K of the Core Documents on the Examination website documents K1-K6 and K8-K25) insofar as they relate to their representations on the Main Modifications

29th July 2021 (9.00am) – 23rd September 2021(11.45pm)

Consultation website: <https://ipswich.oc2.uk/>
Website: www.ipswich.gov.uk/mainmodifications
Email: planningpolicy@ipswich.gov.uk

Phone: 01473 432019

Council address:

Planning Policy
Planning and Development
Ipswich Borough Council
Grafton House, 15-17 Russell Road
Ipswich IP1 2DE



Please return to:	planningpolicy@ipswich.gov.uk Planning Policy Planning and Development Ipswich Borough Council Grafton House, 15-17 Russell Road Ipswich IP1 2DE
Return by:	23rd September 2021 11.45 pm
This form has two parts:	Part A – Personal details
	Part B – Your representation(s).

PART A Personal Details		
	1. Personal details*	2. Agent's details (if applicable)
Title		Mr
First name		Michael
Last name		Pingram
Job title (where relevant)		Senior Planner
Organisation (where relevant)	East Suffolk & Norfolk Essex NHS Foundation Trust (ESNEFT)	Lawson Planning Partnership Ltd
Address Please include post code	Heath Road Ipswich Suffolk IP4 5PD	The Coach House, East Hill House 76 High Street Colchester Essex CO1 1UF
E-mail		_____
Telephone No.		

Signature: **Date:** **17th September 2021**.....

Please note that representations cannot be kept confidential and will be available for public scrutiny. However, representations published on the Council's website will exclude your personal contact details.

* If an agent is appointed and details provided above, you only need to complete the Title, Names and Organisation under Personal Details.

PART B Please complete a separate Part B for each representation you wish to make.

Your name or organisation (and client if you are an agent):	East Suffolk & North Essex NHS Foundation Trust (ESNEFT) c/o Lawson Planning Partnership Ltd
---	---

Please refer to guidance notes on completing this form.

3. Please indicate below which proposed Main Modification this representation relates to.

Main Modification number <i>Please use modification reference number, e.g. MM1, MM2 etc</i>	
MM70	

4. Please indicate below which section(s) (if any) of the Sustainability Appraisal of the Main Modifications, Habitats Regulations Assessment of the Main Modifications and/or Additional Evidence (K1-K6 and K8-K25) this representation relates to, and relate your representation to the MM specified in 3. above.

Sustainability Appraisal of Main Modifications <i>Please state which part of the SA Report</i>	Para 3.1.14
Habitats Regulations Assessment of Main Modifications <i>Please state which part of the HRA Report</i>	N/A
Additional evidence submitted during and after the Hearing <i>Please use the Core Document Library reference number</i>	N/A

5. Do you consider the proposed Main Modification is:

	Please tick		Please tick	
5. (1) Legally compliant	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
5. (2) Sound	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

6. If you consider the proposed Main Modification would render the Plan unsound, please specify your reasons below (please tick all that apply below). See below for definitions.

- ☒ It would not be positively prepared
- ☒ It would not be justified
- ☒ It would not be effective
- ☒ It would not be consistent with national policy

Positively prepared – providing a strategy which, as a minimum, seeks to meet the area's objectively assessed needs; and is informed by agreements with other authorities, so that

unmet need from neighbouring areas is accommodated where it is practical to do so and is consistent with achieving sustainable development;

Justified – an appropriate strategy, taking into account the reasonable alternatives, and based on proportionate evidence;

Effective – deliverable over the plan period, and based on effective joint working on cross-boundary strategic matters that have been dealt with rather than deferred, as evidenced by the statement of common ground; and

Consistent with national policy – enabling the delivery of sustainable development in accordance with the policies in this Framework and other statements of national planning policy, where relevant.

7. Please give details of why you consider the Proposed Main Modification (including reference to the Sustainability Appraisal/Habitats Regulations Assessment/Additional Evidence where relevant) is not legally compliant or is unsound. Please be as precise as possible.

If you wish to support the legal compliance or soundness of the proposed Main Modification (including reference to the Sustainability Appraisal/Habitats Regulation Assessment/Additional Evidence where relevant), please also use this box to set out your comments.

Please provide details of your representation here:

Within our representations to the Final Draft consultation, we requested revisions to paragraph 8.230 to link any parking issues to those directly associated with proposed hospital activity related to specific developments, rather than any parking issues that may be occurring in the area generally.

Whilst it is noted that reference to ‘hospital related developments’ is now included within the first sentence under Main Modification 70, the word ‘specific’ has been omitted. Within the Statement of Common Ground, IBC confirmed it did not agree with its insertion due to a concern that this may prevent any ‘ancillary uses’ developed at the hospital from being assessed in terms of travel implications, which ESNEFT is content to agree with.

The removal of ‘existing’ and insertion of ‘proposed’ in relation to parking issues have not been incorporated within the Main Modifications. Previously within the SoCG, IBC considered that the management of any parking issues forms an important aspect of encouraging sustainable transport, and to remove reference to ‘existing’ parking issues and insert ‘proposed’ hospital activities would result in any mitigation being too limited and ineffective in terms of encouraging sustainable transport modes which should be seen within the context of the wider transport strategy.

However, ESNEFT considers it to be unreasonable to insist that proposed development should tackle existing parking issues, particularly when the issues may not be associated with the Hospital. It is acknowledged that some on street parking in the locality is associated with the hospital, which has occurred historically and is of course permitted providing parking restrictions and highway safety matters are observed. However, it is also noted that nearby on street parking is additionally generated by residents and their visitors, visitors to Rushmere Heath located adjacent to the east, and to Broke Hall Community Primary School and Heathlands Community Pre-School located to the south. Therefore, existing parking issues cannot be assumed to be solely related to the hospital and it is not a matter for ESNEFT Hospital to address all pre-existing situations.

Consequently, the traffic, travel and parking impacts of any proposed hospital development should be considered on its individual merits, with this being particularly important where certain developments will have only a minor impact on travel and parking, and in some cases no impact at all. Therefore, an appropriate policy basis is required to ensure that an equitable resolution can be achieved.

Cont'd...

This approach is consistent with paragraphs 55-57 of the NPPF (July 2021), which links planning conditions and obligations to the tests of reasonableness linked to the impact of specific development proposals i.e. in the case of planning obligations they should be necessary, directly related and fairly and reasonably related to the scale of development proposed.

In addition, the replacement of 'possible' with 'practicable' has not been incorporated, as IBC feel it could be misinterpreted as allowing for economic or other reasons for not pursuing sustainable modes to be used. Therefore, IBC considers that 'possible' is a more effective and robust word to use and would better serve to meet the sustainable transport vision and objectives of the Local Plan and other policies.

However, ESNEFT disputes this point, and considers that 'practicable' is a more appropriate word in the context of the travel mode opportunities and constraints of a working acute hospital, which is very different from many other land uses, especially when applied to potential sustainable modes of travel used by staff, patients and visitors. Again, the travel patterns and characteristics of an acute hospital are materially different from other high traffic volume generating uses. For example, staff work shift times do not always coincide with public transport timetables and related unsociable hours are also not always compatible with cycling and pedestrian provisions/options.

Additionally, the physical and mental state of many patients and visitors and related hospital visiting times often result in sustainable travel modes not being a viable option. Therefore, while sustainable travel can be and is often possible, for the reasons explained above it is not always 'practicable', and the text within this paragraph should be amended to reflect this position.

Therefore as further detailed within paragraph 7 of the attached Lawson Planning Partnership Ltd representation letter, dated 17th September 2021, the draft Local Plan remains unsound when considered against the tests set out in paragraph 35 of the NPPF.

Please provide a concise summary of your representation here (up to 100 words):

Within MM70, the replacement of 'existing' with 'proposed' in relation to parking issues hasn't been incorporated. ESNEFT considers it unreasonable to insist proposed development should tackle existing parking issues, particularly when they may not be associated with the Hospital. Traffic, travel and parking impacts of hospital development should be considered on its individual merits, consistent with NPPF paragraphs 55-57.

In addition, the replacement of 'possible' with 'practicable' hasn't been incorporated as it could be misinterpreted as allowing for economic or other reasons for not pursuing sustainable travel modes. ESNEFT dispute this and consider 'practicable' more appropriate in the context of the travel opportunities and constraints of a working acute hospital.

8. Please set out the changes to the Main Modification you consider necessary to make the Local Plan legally compliant and/or sound, having regard to the test you have identified at 6 above where it relates to soundness. You will need to say why this will make the Local Plan legally compliant and/or sound. It will be helpful if you are able to put forward your suggested revised wording of any policy or text. Please be as precise as possible.

Please specify the changes to the Main Modification you consider necessary here:

It is requested that paragraph 8.230 be amended to the following:

It is also essential that the travel implications of hospital related developments are fully considered and measures are put in place to encourage the use of sustainable modes where practicable by staff, out-patients, and visitors. In particular, measures should tackle parking issues in surrounding residential areas associated with proposed Hospital activity and the Hospital should put in place monitoring to ensure that any measures are proving to be effective.

Please see attached Lawson Planning Partnership Ltd representation letter dated 17th September 2021 for further details.

Please note your representation should cover succinctly all the information, evidence and supporting information necessary to support/justify the representation and any suggested changes.

Please ensure that Part B of your form is attached to Part A and return both to the address provided by 11.45pm on 23rd September 2021.