



Publication Draft Colchester and Tendring Local Plans: Section One

Statement of Common Ground with North East Essex Clinical Commissioning Group and East Suffolk & North Essex Foundation Trust

REVISED DECEMBER 2019

Colchester Borough Council and Tendring District Council Section 1 Local Plan

Statement of Common Ground

Between North East Essex Clinical Commissioning Group, East Suffolk & North East Essex Foundation Trust, Colchester Borough Council, and Tendring District Council

1. This Statement of Common Ground has been prepared to identify the areas of agreement between the North East Essex Clinical Commissioning Group (NEECCG), East Suffolk & North East Essex Foundation Trust (Hospital Trust) and Colchester Borough Council and Tendring District Council as the Local Planning Authorities (LPAs) on matters relating to the LPAs Section 1 Local Plan and the representations submitted by the NEECCG concerning that document.

2. General Matters

The LPAs have worked with the health sector, including the NEECCG and the Hospital Trust, on a range of planning and development issues, including in particular a reliance on health sector input to the Councils' Infrastructure Delivery Plans' health and social care chapters. As recognised stakeholders, the NEECCG and Hospital Trust have been formally consulted at every stage of consultation.

The NEECCG, on behalf of and representing NHS England, East of England Ambulance Service NHS Trust, Essex Partnership University Trust, Strategic Estates Planning Team (NHS Improvement) East Suffolk & North East Essex Foundation Trust and other commissioned providers submitted representations to Section 1 of the Local Plan during the Publication Draft Local Plan consultation period ending 11 August 2017.

The NEECCG and the Hospital Trust are in agreement with the Local Authorities that the health economy should be fully engaged in the development of Local Plans and Garden Communities master planning to ensure the appropriate provision of healthcare infrastructure to meet the needs of the growing population are provided in advance of the population growth to prevent capacity constraints and to meet the needs and demands of the local population. Suffolk & North East Essex Integrated

Care System (ICS) has a clear strategy for the prioritisation for improving health and wellbeing for all at a locality level which has resulted in the North East Essex Alliance being created which includes Local Authority and providers of healthcare services to enable locality based focus on healthy communities, health promotion and illness/dependency prevention. The garden communities must support citizens/families independence, patient activation and exercise participation and reduction of isolation to ensure the dwellers are healthy, employed and part of a community to reduce their need for mental and physical health services. Suitable healthcare facilities will include primary care facilities in a suitable location and secondary care facilities at the local hospital to meet the needs of the population. The provision of the funding for these facilities will be agreed between all parties involved and is a pre-requisite to the developments we all support. The fully established joint working group of health and local authority planning representatives, known as North Essex Health and Local Authority Strategic Planning Working Group works collectively on behalf of the Integrated Care System (ICS) to address these objectives with a commitment to meeting at least bi-monthly as Local Plan work progresses. Additional workshop events will be scheduled with appropriate parties where it is felt necessary to do so.

The table below shows the views of NEECCG and the Hospital Trust on Section 1 of the Local Plan and identifies areas of common ground and potential amendments to the plan:

COLCHESTER BOROUGH COUNCIL AND TENDRING DISTRICT COUNCIL /NEECCG AGREED AMENDMENTS TO LOCAL PLAN SECTION ONE

CBC Rep number	Local Plan Section or Policy	Summary of Representation	Agreed response
S1.012/6206 and S1.380/LPPD48	SP2	The NHS would like to ensure that appropriate healthcare facilities are sited to support the Garden Community Developments. The Councils should ensure that the NHS and relevant health partners are fully engaged in the Master-planning process as the Garden Community projects	The Councils agree that full engagement with the health sector will be required to progress work on Garden Communities and considers that this point is adequately addressed in Policy SP7 (i), providing for Community and stakeholder empowerment in the design and delivery of each

		unfold (SP7 iii) Early discussion with health partners on health impact assessment requirements for the GC, with specific reference to SP7, would be encouraged. This could be facilitated through the established Strategic Planning working group and other relevant forums	garden community from the outset and SP7 (ii) providing for a comprehensive approach to design and delivery of infrastructure. The working group that has been established between the health sectors and the LPAs is considered to be an appropriate vehicle to ensure this can be achieved.
S1.012/6208 and S1.380/LPPD49	SP3	To ensure that the NHS and health & social care partners are fully engaged in the planning process to ensure health infrastructure is positioned in suitable locations to enable access for both new and existing communities to healthcare.. The suggested amended wording provided by the local authorities is acceptable to the Health and Social Care system. The NHS commissioner of primary care services can confirm that primary care services will need to be delivered within the identified garden community development; however, this may not be in the form of a standalone surgery. As strategies and national policy continues to develop, Health partners will work with local authority colleagues to ensure suitable facilities are provided for new populations in line with agreed timescales.. It is anticipated that a modular build to reflect the growing population would be the best solution.	<p>The Councils agree that the health sector should be fully engaged in the planning process and consider that this point is addressed in Policy SP5 which states that healthcare infrastructure is provided as part of new developments. The update to the health chapters of the Colchester and Tendring IDPs (examination references CBC/0006 and TDC/023) prepared by the various health bodies will help inform the infrastructure requirements.</p> <p>The Councils agree that amended wording to policy SP5 would be appropriate and suggest the following:</p> <p>Health and well-being</p> <ul style="list-style-type: none"> • Healthcare infrastructure will be as part of new developments of appropriate scale in the form of expanded or new facilities including primary and acute care; pharmacies; dental surgeries; opticians, supporting community services including hospices, treatment and counselling centres. • Require new development to maximise its

			<p>positive contribution in creating healthy communities and minimise its negative health impacts, both in avoidance and mitigation, as far as is practicable.</p> <ul style="list-style-type: none"> • The conditions for a healthy community will be provided through the pattern of development, good urban design, access to local services and facilities; green open space and safe places for active play and food growing, and which are all accessible by walking, cycling and public transport.
S1.126/7208	SP3	<p>The Hospital Trust request to be kept fully abreast with housing estimates and to work closely with local authority colleagues on expected estimated population growth to ensure a better informed approach to consequential impact on health services.</p> <p>It is agreed that a joint review of potential demographic and population profiles undertaken through the Strategic Planning working group in conjunction with ICS data analysis work stream and will be beneficial and can be part of all future decision making processes as master-planning develops.</p>	<p>The Councils have clarified with the Hospital Trust that the IDP focuses on the strategic infrastructure requirements associated with larger housing developments and that the Plan as a whole has not underestimated the need for housing and associated health services. It is agreed by all parties that changes in the identified need for acute services will need to be addressed through joint working on demand, delivery mechanisms, and site requirements, with the funding mechanism for those agreed as a pre-requisite to development.</p>
S1.012/6209 and S1.380/LPPD50	SP5	<p>The CCG continue to draw attention to the requirement for improved technology infrastructure, to access internet services through broadband across the borough and as such may</p>	<p>The Councils agree that improved broadband connections will be an integral component of future growth, and that digital infrastructure will be key enabler for the health sector in addressing</p>

		request mitigation for IT Solutions and improved connections associated with any major developments. Technology will also become increasingly more vital in the self-care arena, health promotion and disease prevention and connecting GP practices to Acute hospital to prevent admissions and aid the transfer of high resolution diagnostic images and video conferencing.	growth, as confirmed by the Department of Health. Policy SP5 requires that all new properties should allow for the provision for superfast broadband in order to allow connection to that network as and when it is made available.
S1.126/7197	SP5	<p>East Suffolk and North Essex NHS Foundation Trust (the Trust) is responsible for Colchester Hospital. The view of the Trust is that planning relating to health and care services must be undertaken with the Suffolk and North East Essex Integrated Care System (ICS). This is the best way to ensure that the whole-system impact of these proposals is understood.</p> <p>The impact on Colchester Hospital – the catchment area of which the majority of the growth is predicted to take place - is difficult to model accurately because health care will continue to change significantly over the 13-year period of the Local Plan. We recognise that the planning is at an early stage. Further detailed work within the Integrated Care System, of which the Trust is a part, is required.</p>	The Councils have clarified with the Hospital Trust that the IDPs focus on the strategic infrastructure requirements associated with larger housing developments and that the Plan as a whole has not underestimated the need for housing and associated health services. The health chapter of the Colchester and Tendring IDPs (examination references CBC/0006 and TDC/023) have been updated in accordance with information provided by the health bodies. It is agreed by all parties that changes in the identified need for Primary, Community and acute services will need to be addressed through joint working on demand, delivery mechanisms, and site requirements.
S1.012/6212	SP8 and SP9	SP8 Tendring/Colchester Borders Garden Community, point E item 13 and Policy SP9 point	Policies will be amended as suggested - SP8 E.13 and SP9 E. 14–‘Primary healthcare facilities

		<p>E item 14 should be amended to read 'Primary healthcare facilities as appropriate'.</p> <p>The Health sector agrees that the amended wording suggested by the Councils overcomes the concerns raised.</p>	<p>as appropriate'</p> <p>The amendment being suggested by the Councils reads:</p> <p>Increased Primary healthcare facilities capacity will be provided to serve the new development as appropriate. This may be by means of new Infrastructure or improvement, reconfiguration, extension or relocation of existing medical facilities.</p>
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Signed:

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Colchester Borough Council	Tendring District Council	East Suffolk & North East Essex Foundation Trust	North East Essex Clinical Commissioning Group