

Filtered Data Export

Full name: Malcolm Dicken

Organisation (where relevant): NHS Devon Integrated Care Board and Royal Devon University Healthcare NHS Foundation Trust

Other party name (if relevant):

-

Proposal:

2. The Vision

1. To which part of the vision chapter does your representation relate?: Paragraph

1(a). Please write down the paragraph, policy or figure number that your representation relates to.:

2.1

3. Do you consider that this part of the vision chapter is sound?: No

3(b). If no, please give details of why you consider this part of the vision chapter is not sound. Please be as precise as possible.: Within the Regulation 19 Local Plan it is stated that it has been drafted with consideration to the new NPPF published in December 2024 which specifically states that there is need for faster delivery of other public service infrastructure such as health and also that significant weight should be placed on the importance of new, expanded or upgraded public service infrastructure when considering proposals for development. The proposed plan also continues in 2.7 and 2.8 that:

2.7we will strive to secure better facilities, especially where there may be current deficits in provision, including for schools and medical services. This will include in locations where past housing development has occurred without adequate services.

2.8 New, expanded and improved physical, social and community facilities and infrastructure will be delivered alongside development..... These statements are consolidated with in Objective 10 of the plan objectives: To secure infrastructure needs at an appropriate time to support new development

Full name: Malcolm Dicken

Organisation (where relevant): NHS Devon Integrated Care Board and Royal Devon University Healthcare NHS Foundation Trust

Other party name (if relevant):

-

Proposal:

3. The Spatial Strategy

1. To which part of the Spatial Strategy chapter does your representation relate?:

Policy

1(a). Please write down the paragraph, policy or figure number that your representation relates to.: SP07

3. Do you consider that this part of the Spatial Strategy chapter is sound?: No

3(b). If no, please give details of why you consider this part of the Spatial Strategy chapter is not sound. Please be as precise as possible.: NHS Devon ICB and RDUH have been engaged in the Local Plan process and have now reviewed the East Devon District Council (EDDC) Regulation 19 Local Plan. New housing developments have a direct impact on the NHS services that are provided locally which requires a directly related increase in the capacity of both GP Surgeries and Hospitals. Within the current EDDC plan it is only the Cranbrook development that collects S106 developer contributions for the additional health infrastructure required to meet the needs of the new population. Whilst CIL is collected by the council from all other planning applications there are no guarantees that this will be allocated to mitigate the direct impacts on the local health services.

The additional health infrastructure requirements are covered by The Strategic Policy SP07: Delivery of infrastructure however within the justification for the policy it states in 3.46 that the infrastructure funding can come from various sources including Direct Provision, S106 or CIL. To meet the requirements of the new NPPF and to meet the objectives of the Local Plan, the NHS requires that the mitigation measures from an application are from either Direct Provision or S106. Within the proposed plan it is not clear to prospective developers that this would be the requirement, and we ask that consideration is given to providing further guidance within the plan or as a Supplementary Planning Document. NHS Devon ICB | 3 A Health Contributions SPD has been adopted as part of the Isle of Wight Local Plan which currently covers the impact and mitigation methodology for primary care (GP services) and NHS Devon ICB and RDUH would like to see a similar approach for East Devon, and we would be very happy

to draft an appropriate SPD in collaboration with the council. The SPD or an additional Health Infrastructure policy could then be included as part of the following policies where the NHS has provided evidence that there is insufficient primary care infrastructure to meet the additional housing:

- Strategic Policy WS01: Development of a second new community east of Exeter
- Strategic Policy WS10: Development next to the M5 and north of Topsham
- Strategic Policy SD01: Exmouth and its development allocations
- Strategic Policy SD02: Axminster and its development allocations
- Strategic Policy SD03: Honiton and its development allocations
- Strategic Policy SD04: Ottery St Mary and its development allocations
- Strategic Policy SD07: Development allocations at Broadclyst
- Strategic Policy SD09: Development allocations at Colyton
- Strategic Policy SD10: Development allocations at Lympstone
- Strategic Policy SD11: Development allocations at Woodbury NHS Devon ICB and RDUH look forward to working collaboratively with East Devon District Council to deliver the East Devon Local Plan, ensuring healthcare infrastructure meets the needs of East Devon residents.

Full name: Malcolm Dicken

Organisation (where relevant): NHS Devon Integrated Care Board and Royal Devon University Healthcare NHS Foundation Trust

Other party name (if relevant):

-

Proposal:

4. Development at the West End

1. To which part of the Development at the West End chapter does your representation relate?: Policy

1(a). Please write down the paragraph, policy or figure number that your representation relates to.: WS01

3. Do you consider that this part of the Development at the West End chapter is sound?: No

3(b). If no, please give details of why you consider this part of the Development at the West End chapter is not sound. Please be as precise as possible.: The ICB is very concerned about the development at the West End (Chapter 4) and the infrastructure required to support the second community. The vision states that this new community will be 'self-sustaining' yet that narrative that follows appears to have ignored the ICB response submitted on the 8th of July 2024 which included:

6. The plans for the developments close to Exeter, from a health perspective are unsustainable. There are no viable plans to be able to expand the capacity of primary care infrastructure to meet the increase in population without a considerable contribution from the development that is ring fenced for healthcare investments. NHS Devon ICB | 2

7. There is currently a lack of primary care infrastructure capacity to meet the population of Exmouth and any future proposed expansion in the number of dwellings would have to be accompanied by a direct developer contribution to mitigate the impact created.

8. The surgeries that provide primary care services to Broadclyst, Lypstone and Woodbury are already working with more patients than they capacity for, therefore the spatial strategy needs to reference the unsustainable state of access to healthcare. The surgery in Colyton is very close to capacity and any new future developments may be at a point where the practice is already over capacity. Furthermore the 'Strategic Policy WS01: Development of a second new community east of Exeter' specifically references

the need for new schools but fails to include any mention of the new GP facilities that will be required to support proposed housing.