

Isle of Wight Council**Island Planning Strategy – Regulation 19 Submission version: COMMENTS FORM**

Your comments on the Plan will help us and the Inspector appointed to oversee the examination process, to identify any plan issues relating to soundness, legal compliance, and compliance with Duty to Cooperate and any changes that may be needed before adopting the Plan.

Please read the [guidance notes](#) carefully before completing this form.

Responses **MUST** be received **by midnight on Monday 19 August 2024** for your comments to be taken into account. Any representations received after this will not be forwarded to the inspector for the examination.

Your comments should relate to a specific policy, paragraph number or policy map. If there are parts of the plan which you believe are not sound, not legally compliant, or fail to meet the Duty to Cooperate, please tell us why, and what changes you think are necessary. Any evidence you have to support your proposed changes can be added as an attachment in addition to this form. You are able to submit a form for each policy or paragraph you wish to comment on.

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Any questions with an * require an answer.

Contact details:

Please complete your name and email address in the boxes below so that we can contact you if we require any additional information on any comments, you may have made, or you have shown interest in participating in a hearing session(s)

Anonymous comments will not be accepted.

Name/Organisation: *

NHS Property Service (NHSPS)

Email: *

[REDACTED]

Address and Postcode:

NHS Property Services Ltd
10 South Colonnade
Canary Wharf
London
E14 4PU

Telephone:

1) What type of respondent are you? *

(Member of the public, statutory consultee (excluding Councillors and Parishes) Business (Landowner and Developers), Councillor, Parish Council, other Local Authorities, Resident Group.)

Other interested party.
NHSPS is part of the NHS and is wholly owned by the Department of Health and Social Care (DHSC).

2) What policy are you commenting on? *

(Please complete a separate form for each policy you are commenting on)

Draft Policy G3 Developer contributions

3) Does your comment relate to a specific paragraph(s)? If yes which paragraph does this relate to? *

You are able to submit a separate form for each policy / paragraph you wish to comment on. If your answer to this question (no 3) is No please put NA in the text box below.

Relates to Draft Policy G3 as a whole

4) In relation to the policy or paragraph you are commenting on, do you consider the Island Planning Strategy for submission to be legally compliant?*

(a plan is legally compliant if it complies with the list in paragraph 3.1 [here](#) and the council have complied with the [Duty to Co-operate](#))

Yes

No

5) Please give details to support your answer to question 4 *

Yes, legally compliant

Yes, complies with Duty to cooperate

No, Failure to comply to Duty to cooperate

No, not legally compliant

6) In relation to the policy or paragraph you are commenting on, do you consider the Island Planning Strategy for submission to be sound? *

There are four 'tests of soundness' set out in [paragraph 35 of the NPPF](#) – (a) positively prepared, (b) justified, (c) effective and (d) consistent with national policy

Yes – Positively prepared

Yes – Justified

Yes – Effective

Yes – Consistent with national policy

No

7) If you answered no to question six is this because? *

Not, Consistent with national policy

Not, Effective

Not, Justified

Not, Positively prepared

8) What modifications do you think is needed to make the Island Planning Strategy legally compliant and/or sound? *

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NHSPS considers Draft Policy G3 to be sound as currently drafted and makes the following observations.

Draft Policy G3 specifically states that all new development of 20 or more dwellings will be required to provide for the necessary on-site or off-site primary healthcare infrastructure requirements arising from the proposal. We welcome the identified threshold of 20 or more dwellings where contributions will be sought for primary healthcare infrastructure. Both in areas of significant housing growth and in the cumulative impact of smaller housing growth, appropriate funding must be consistently leveraged through developer contributions for health and care services to mitigate the direct impact of growing demand from new housing.

We also emphasise the importance of effective implementation mechanisms so that healthcare infrastructure is delivered alongside new development, especially for primary healthcare services as these are the most directly impacted by population growth associated with new development. The NHS, Council and other partners must work together to forecast the health infrastructure and related delivery costs required to support the projected growth and development across the Local Plan area. NHSPS recommend that the Local Plan have a specific section in the document that sets out the process to determine the appropriate form of developer contributions to health infrastructure. This would ensure that the assessment of existing healthcare infrastructure is robust, and that mitigation options secured align with NHS requirements.

The Local Plan should emphasise that the NHS and its partners will need to work with the Council in the formulation of appropriate mitigation measures. NHSPS recommends that the Council engage with the relevant Integrated Care Board (ICB) to add further detail within the Local Plan and supporting evidence base (Infrastructure Delivery Plan) regarding the process for determining the appropriate form of contribution towards the provision of healthcare infrastructure where this is justified.

Response continues onto next page

As a starting point, we suggest the following process:

- Assess the level and type of demand generated by the proposal
- Work with the ICB to understand the capacity of existing healthcare infrastructure and the likely impact of the proposals on healthcare infrastructure capacity in the locality.
- Identify appropriate options to increase capacity to accommodate the additional service requirements and the associated capital costs of delivery.
- Identify the appropriate form of developer contributions.

Healthcare providers should have flexibility in determining the most appropriate means of meeting the relevant healthcare needs arising from a new development. Where new developments create a demand for health services that cannot be supported by incremental extension or internal modification of existing facilities, this means the provision of new purpose-built healthcare infrastructure will be required to provide sustainable health services. Options should enable financial contributions, new-on-site healthcare infrastructure, free land/infrastructure/property, or a combination of these. It should be clarified that the NHS and its partners will need to work with the council in the formulation of appropriate mitigation measures.

In addition, NHSPS has the following comments on the Local Plan Viability Study which forms part of the evidence base that supports Draft Policy G3 and the wider Plan. Having reviewed the Study, we note that where contributions towards healthcare have been identified in the policy requirements for site-specific testing, the assessment does not include a specific allowance for contributions towards healthcare. The Study tests a lump sum for S106 contributions of £6,000 to cover site specific mitigation.

Without prejudice to any future representations the NHS or its partners may make on specific planning applications or applications for CIL funding, in our view the S106 headroom identified as part of the site-specific testing is generally sufficient to enable financial contributions to be secured for healthcare, and therefore we consider that overall the assessment of plan-wide viability demonstrates that policy requirements in relation to healthcare infrastructure contributions are deliverable. However, we are concerned that without explicit mention of required healthcare mitigation in the viability assessment, healthcare mitigation will compete with other planning obligations or be ignored entirely, rendering development unsustainable and putting future residents' health at risk.

As noted in our general comments above, healthcare facilities are currently experiencing significant strain. Furthermore, if appropriate mitigation is not secured, the growth strategy outlined in the Plan is expected to exacerbate this situation. We would recommend that the viability assessment includes a separate cost input for typologies where a healthcare contribution is expected. This would ensure that healthcare mitigation is appropriately weighted when evaluating the potential planning obligations necessary to mitigate the full impact of a development.

A separate cost input for health would also mean that developers are adequately informed in advance, in accordance with ICB's estate strategy and the development's location and size, that they may be required to make on-site provision or off-site financial contributions to mitigate the impact on healthcare infrastructure resulting from their development. Such an approach would also support the effective implementation of Draft Policy G3 in situations when a viability assessment demonstrates that development proposals are unable to fund the full range of infrastructure requirements. We would welcome further engagement with the Council to on this issue to determine a reasonable cost assumption that could be used in future viability assessments.

9) Do you have any comments on the polices map? *

[\(click here to go to the Regulation 19 Island Planning Strategy Map\)](#)

No comments.

10) Do you wish to request to appear at the hearing sessions that will take place? *

Yes

No

11) Please outline why you would like to attend? *

If you have answered No to Question 10 please put NA in the text box below

N/A

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2) What policy are you commenting on? *

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Draft Policy C14 Providing social and community infrastructure

3) Does your comment relate to a specific paragraph(s)? If yes which paragraph does this relate to? *

You are able to submit a separate form for each policy / paragraph you wish to comment on. If your answer to this question (no 3) is No please put NA in the text box below.

Relates to Part F to H of Draft Policy C14

4) In relation to the policy or paragraph you are commenting on, do you consider the Island Planning Strategy for submission to be legally compliant?*

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Yes

No

5) Please give details to support your answer to question 4 *

Yes, legally compliant

Yes, complies with Duty to cooperate

No, Failure to comply to Duty to cooperate

No, not legally compliant

6) In relation to the policy or paragraph you are commenting on, do you consider the Island Planning Strategy for submission to be sound? *

There are four 'tests of soundness' set out in [paragraph 35 of the NPPF](#) – (a) positively prepared, (b) justified, (c) effective and (d) consistent with national policy

Yes – Positively prepared

Yes – Justified

Yes – Effective

Yes – Consistent with national policy

No

7) If you answered no to question six is this because? *

Not, Consistent with national policy

Not, Effective

Not, Justified

Not, Positively prepared

8) What modifications do you think is needed to make the Island Planning Strategy legally compliant and/or sound? *

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NHSPS does not consider Draft Policy C14 to be sound as currently drafted.

Draft Policy C14 focuses on the provision of new community facilities and improvement of existing community facilities, including healthcare facilities/centres and services. This includes the protection of existing social and community infrastructure through requiring the demonstration of one of three criteria (F to H) to permit the loss of such facilities, which is also referenced in supporting paragraph 5.100.

NHSPS supports the provision of sufficient, quality community facilities but does not consider the proposed policy approach to be positively prepared or effective in its current form, particularly pertaining to the loss of existing social and community infrastructure. Where healthcare facilities are included within the Local's Plan definition of community facilities, policies aimed at preventing the loss or change of use of community facilities and assets can potentially have a harmful impact on the NHS's ability to ensure the delivery of essential facilities and services for the community.

The NHS requires flexibility with regards to the use of its estate to deliver its core objective of enabling excellent patient care and support key healthcare strategies such as the NHS Long Term Plan. In particular, the disposal of sites and properties which are redundant or no longer suitable for healthcare for best value (open market value) is a critical component in helping to fund new or improved services within a local area. Requiring NHS disposal sites to explore the potential for alternative community uses and/or to retain a substantial proportion of community facility provision adds unjustified delay to vital reinvestment in facilities and services for the community.

Response continues onto next page

All NHS land disposals must follow a rigorous process to ensure that levels of healthcare service provision in the locality of disposals are maintained or enhanced, and proceeds from land sales are re-invested in the provision of healthcare services locally and nationally. The decision about whether a property is surplus to NHS requirements is made by local health commissioners and NHS England. Sites can only be disposed of once the operational health requirement has ceased. This does not mean that the healthcare services are no longer needed in the area, rather it means that there are alternative provisions that are being invested in to modernise services.

Where it can be demonstrated that health facilities are surplus to requirements or will be changed as part of wider NHS estate reorganisation and service transformation programmes, it should be accepted that a facility is neither needed nor viable for its current use, and policies within the Local Plan should support the principle of alternative uses for NHS sites with no requirement for retention of a community use on the land or submission of onerous information. To ensure the Plan is positively prepared and effective, NHSPS are seeking the following modification (*shown in red italics*) to Draft Policy C14.

Proposed Modification to Draft Policy C14:

“...h. if appropriate, an alternative facility will be provided in a location with at least an equal level of accessibility for the community it is intended to serve; *or*

i. Where the existing facility is a healthcare facility, it has been declared surplus to the operational healthcare requirements of the NHS or identified as surplus as part of a published estates strategy or service transformation plan.”

Proposed Modification to supporting paragraph 5.100

“Planning applications that would result in the loss of social and community infrastructure facilities must show evidence of alternative provision, financial viability, or that the proposed alternative use would provide equal or greater benefits for the local community or economy. Applications should evidence that community engagement has taken place and that the proposal will address any identified deficiency in provision. Developers should also consider the provision of these types of facilities (where sports and leisure facilities are being provided) in conjunction with other relevant policies in this document. *Where healthcare facilities are declared surplus to the operational healthcare requirements of the NHS or identified as surplus as part of a published estates strategy or service transformation plan, there will be no requirement to satisfy Part F to H of the Policy.”*

NHSPS considers this modification would ensure the Plan is positively prepared and effective, and therefore sound.

9) Do you have any comments on the polices map? *

[\(click here to go to the Regulation 19 Island Planning Strategy Map\)](#)

No comments.

10) Do you wish to request to appear at the hearing sessions that will take place? *

Yes

No

11) Please outline why you would like to attend? *

If you have answered No to Question 10 please put NA in the text box below

N/A

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NHS Property Service (NHSPS)

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[REDACTED]

Address and Postcode:

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London
E14 4PU

Telephone:

1) What type of respondent are you? *

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Other interested party.
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2) What policy are you commenting on? *

(Please complete a separate form for each policy you are commenting on)

Draft Policy C3 Improving our health and wellbeing

3) Does your comment relate to a specific paragraph(s)? If yes which paragraph does this relate to? *

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Relates to Draft Policy C3 as a whole.

4) In relation to the policy or paragraph you are commenting on, do you consider the Island Planning Strategy for submission to be legally compliant?*

(a plan is legally compliant if it complies with the list in paragraph 3.1 [here](#) and the council have complied with the [Duty to Co-operate](#))

Yes

No

5) Please give details to support your answer to question 4 *

Yes, legally compliant

Yes, complies with Duty to cooperate

No, Failure to comply to Duty to cooperate

No, not legally compliant

6) In relation to the policy or paragraph you are commenting on, do you consider the Island Planning Strategy for submission to be sound? *

There are four 'tests of soundness' set out in [paragraph 35 of the NPPF](#) – (a) positively prepared, (b) justified, (c) effective and (d) consistent with national policy

Yes – Positively prepared

Yes – Justified

Yes – Effective

Yes – Consistent with national policy

No

7) If you answered no to question six is this because? *

Not, Consistent with national policy

Not, Effective

Not, Justified

Not, Positively prepared

8) What modifications do you think is needed to make the Island Planning Strategy legally compliant and/or sound? *

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NHSPS considers Draft Policy C3 to be sound as currently drafted.

NHSPS welcomes and supports the inclusion of policies that support healthy lifestyles, and the requirement for Health Impact Assessment on major residential developments of 10 units or more. 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 by enabling health providers to meet changing healthcare needs, but also to addressing the wider determinants of health.

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 welcome the inclusion of a comprehensive policy on health and wellbeing in the Local Plan, and encourage the Council to continue to engage with the NHS on this matter ahead of the adoption of the Plan.

9) Do you have any comments on the polices map? *

[\(click here to go to the Regulation 19 Island Planning Strategy Map\)](#)

No comments.

10) Do you wish to request to appear at the hearing sessions that will take place? *

Yes

No

11) Please outline why you would like to attend? *

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Other interested party.
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2) What policy are you commenting on? *

(Please complete a separate form for each policy you are commenting on)

Draft Policy C11 Net zero carbon and lowering energy consumption in new development

3) Does your comment relate to a specific paragraph(s)? If yes which paragraph does this relate to? *

You are able to submit a separate form for each policy / paragraph you wish to comment on. If your answer to this question (no 3) is No please put NA in the text box below.

Relates to Draft Policy C11 as a whole.

4) In relation to the policy or paragraph you are commenting on, do you consider the Island Planning Strategy for submission to be legally compliant?*

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Yes

No

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There are four 'tests of soundness' set out in [paragraph 35 of the NPPF](#) – (a) positively prepared, (b) justified, (c) effective and (d) consistent with national policy

Yes – Positively prepared

Yes – Justified

Yes – Effective

Yes – Consistent with national policy

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7) If you answered no to question six is this because? *

Not, Consistent with national policy

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8) What modifications do you think is needed to make the Island Planning Strategy legally compliant and/or sound? *

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NHSPS considers Draft Policy C11 to be sound as currently drafted.

Draft Policy C11 seeks to support the overarching carbon reduction strategy and target to achieve net zero by requiring all new residential homes to be net zero in line with identified standards. The NHS requires all new development projects to be net zero carbon, and NHSPS fully support policies that promote carbon neutral development. In considering the implementation of policies related to net zero, we would highlight that NHS property could benefit from carbon offset funds collected where on-site carbon mitigation requirements cannot be met. This would support the NHS to reach the goal of becoming the world's first net zero healthcare provider.

9) Do you have any comments on the polices map? *

[\(click here to go to the Regulation 19 Island Planning Strategy Map\)](#)

No comments.

10) Do you wish to request to appear at the hearing sessions that will take place? *

Yes

No

11) Please outline why you would like to attend? *

If you have answered No to Question 10 please put NA in the text box below

N/A

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Your comments on the Plan will help us and the Inspector appointed to oversee the examination process, to identify any plan issues relating to soundness, legal compliance, and compliance with Duty to Cooperate and any changes that may be needed before adopting the Plan.

Please read the [guidance notes](#) carefully before completing this form.

Responses **MUST** be received **by midnight on Monday 19 August 2024** for your comments to be taken into account. Any representations received after this will not be forwarded to the inspector for the examination.

Your comments should relate to a specific policy, paragraph number or policy map. If there are parts of the plan which you believe are not sound, not legally compliant, or fail to meet the Duty to Cooperate, please tell us why, and what changes you think are necessary. Any evidence you have to support your proposed changes can be added as an attachment in addition to this form. You are able to submit a form for each policy or paragraph you wish to comment on.

IMPORTANT: Where you are attaching a separate letter setting out your representation, please make sure that you complete the questions on the form for each representation you wish to make and NOT just refer to an attached letter. This enables comments to be assessed and processed more quickly and does not hold up the Examination process.

Any questions with an * require an answer.

Contact details:

Please complete your name and email address in the boxes below so that we can contact you if we require any additional information on any comments, you may have made, or you have shown interest in participating in a hearing session(s)

Anonymous comments will not be accepted.

Name/Organisation: *

NHS Property Service (NHSPS)

Email: *

[REDACTED]

Address and Postcode:

NHS Property Services Ltd
10 South Colonnade
Canary Wharf
London
E14 4PU

Telephone:

1) What type of respondent are you? *

(Member of the public, statutory consultee (excluding Councillors and Parishes) Business (Landowner and Developers), Councillor, Parish Council, other Local Authorities, Resident Group.)

Other interested party.
NHSPS is part of the NHS and is wholly owned by the Department of Health and Social Care (DHSC).

2) What policy are you commenting on? *

(Please complete a separate form for each policy you are commenting on)

Draft Policy H5 Delivering affordable housing

3) Does your comment relate to a specific paragraph(s)? If yes which paragraph does this relate to? *

You are able to submit a separate form for each policy / paragraph you wish to comment on. If your answer to this question (no 3) is No please put NA in the text box below.

Relates to Draft Policy H5 as a whole.

4) In relation to the policy or paragraph you are commenting on, do you consider the Island Planning Strategy for submission to be legally compliant?*

(a plan is legally compliant if it complies with the list in paragraph 3.1 [here](#) and the council have complied with the [Duty to Co-operate](#))

Yes

No

5) Please give details to support your answer to question 4 *

Yes, legally compliant

Yes, complies with Duty to cooperate

No, Failure to comply to Duty to cooperate

No, not legally compliant

6) In relation to the policy or paragraph you are commenting on, do you consider the Island Planning Strategy for submission to be sound? *

There are four 'tests of soundness' set out in [paragraph 35 of the NPPF](#) – (a) positively prepared, (b) justified, (c) effective and (d) consistent with national policy

Yes – Positively prepared

Yes – Justified

Yes – Effective

Yes – Consistent with national policy

No

7) If you answered no to question six is this because? *

Not, Consistent with national policy

Not, Effective

Not, Justified

Not, Positively prepared

8) What modifications do you think is needed to make the Island Planning Strategy legally compliant and/or sound? *

Please note in your representation you should provide succinctly all the evidence and supporting information necessary to support your representation and your suggested modification(s). You can attach any files or documents with this submission. You should not assume that you will have a further opportunity to make submissions.

After this stage, further submissions may only be made if invited by the inspector, based on the matters and issues he or she identifies for examination.

NHSPS considers Draft Policy H5 to be sound as currently drafted but would make the following observations.

NHSPS support the principle of affordable housing provision, and we suggest that as part of implementing Policy H5, the Council consider the need for affordable housing for NHS staff and those employed by other health and care providers in the local authority area. The sustainability of the NHS is largely dependent on the recruitment and retention of its workforce. Most NHS staff need to be anchored at a specific workplace or within a specific geography to carry out their role. When staff cannot afford to rent or purchase suitable accommodation within reasonable proximity to their workplace, this has an impact on the ability of the NHS to recruit and retain staff.

Housing affordability and availability can play a significant role in determining people's choices about where they work, and even the career paths they choose to follow. As the population grows in areas of new housing development, additional health services are required, meaning the NHS must grow its workforce to adequately serve population growth. Ensuring that NHS staff have access to suitable housing at an affordable price within reasonable commuting distance of the communities they serve is an important factor in supporting the delivery of high-quality local healthcare services. We recommend that the Council:

- Engage with local NHS partners such as the local Integrated Care Board (ICB), NHS Trusts and other relevant Integrated Care System (ICS) partners.
- Ensure that the local need for affordable housing for NHS staff is factored into housing needs assessments, and any other relevant evidence base studies that inform the local plan (for example employment or other economic policies).
- Consider site selection and site allocation policies in relation to any identified need for affordable housing for NHS staff, particularly where sites are near large healthcare employers.

9) Do you have any comments on the polices map? *

[\(click here to go to the Regulation 19 Island Planning Strategy Map\)](#)

No comments.

10) Do you wish to request to appear at the hearing sessions that will take place? *

Yes

No

11) Please outline why you would like to attend? *

If you have answered No to Question 10 please put NA in the text box below

N/A

How we use your information

The Isle of Wight Council is committed to keeping your personal information safe and processing it in accordance with our obligations under the General Data Protection Regulation.

Your personal data will be securely held by the Isle of Wight Council for the purpose of assisting with the Island Planning Strategy process. To ensure an effective and fair examination, it is important that the inspector and all other participants in the examination process know who has commented on the plan. For the purposes of the examination, we will share your personal details and representation with the Inspector appointed and publish your name and representations as part of a report on our website.

The Isle of Wight Council is the data controller for the personal information you provide on this form. The council's Data Protection Officer can be contacted at dpo@iow.gov.uk. You can contact the council by phone on 01983 821000, or by writing to us at County Hall, High Street, Newport, IW PO30 1UD

For more information on the Isle of Wight Council's Privacy Statement, which explains how my information is used. Please visit the website: www.iwc.gov.uk/privacy

How to send to us.

Email: policy.consultation@iow.gov.uk

Post: Planning policy, Seaclose offices, Fairlee Road, Newport, Isle of Wight, PO30 2QS

Please ensure that you have answered all the questions in full.

The closing date for representations is by midnight on Monday 19 August 2024