

The Forum
Marlowes
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Hertfordshire
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4th March 2025

By email: section62a@planninginspectorate.gov.uk

Leanne Palmer
Section 62A Applications Team

Dear Leanne Palmer

**Re: Planning Application Consultation: Land West Of High Street Stebbing Essex
Proposal: Consultation on S62A/2025/0077 - Application for Planning Permission for Erection of 28 residential dwellings (comprising 14 affordable & 11 private market homes together with 3 self-build plots); provision of public open space and associated local amenity facilities (activating Local Green Space allocation); together with integrated landscaping and car parking (to include additional community parking facility)**

Location: Stebbing

Thank you for consulting the Hertfordshire and West Essex Integrated Care Board (HWE ICB) on the above-mentioned planning application.

Please accept this letter as the HWE ICB's position on primary healthcare capacity and need arising from this planning application and the health financial contribution sought if Uttlesford Council is minded to grant planning permission.

The HWE ICB became a statutory body on 1 July 2022 and is the health commissioner responsible for delivering joined up health and social health care to a population of c1.5m. in Hertfordshire and west Essex.

The HWE ICB works in partnership with health providers, local authorities, and other organisations to:

- improve the general health and wellbeing of Hertfordshire and west Essex residents and improve health care services in the area.

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- tackle the inequalities which affect people’s physical and mental health, such as their ability to get the health services they need, and the quality of those services help tackle health and wider inequalities.
- get the most out of local health and care services and make sure that they are good value for money.
- help the NHS support social and economic development in Hertfordshire and west Essex.

A strategic aim of the NHS HWE ICB is the improvement of primary, community and mental health care outside of hospitals. To achieve this, the NHS commissions a number of services from general practices in addition to their “core” activity. On the ground this means more joined up care, for example, primary and community healthcare hubs with co-ordinated multidisciplinary professionals/ teams. Therefore, a doctors’ general practitioners’ surgery may also include an ancillary pharmacy and ancillary facilities for treatments provided by general practitioners, nurses and other healthcare professionals to provide care to residents.

Assessment of impact on existing Healthcare Provision

The HWE ICB has assessed the impact of the proposed development on primary health care provision in and around the vicinity of Stebbing Dunmow.

Within the HWE ICB there are 35 Primary Care Networks (PCNs) across the 14 localities; each covering a population of between circa 27,000 and 68,000 patients. These PCNs are expected to deliver services at scale for its registered population whilst working collaboratively with acute, community, voluntary and social care services in order to ensure an integrated approach to patient care. As such a doctors’ general practitioners’ surgery may include an ancillary pharmacy and ancillary facilities for treatments provided by general practitioners, nurses and other healthcare professionals. The PCN that covers Stebbing Dunmow and under which this development falls has a combined patient registration **list of 55,713**, which is growing.

Patients are at liberty to choose which GP practice to register with providing they live within the practice boundary. However, the majority of patients choose to register with the surgery closest and/or most easily accessible to their home for the following reasons: it is the quickest journey, accessible by public transport or is in walking distance), parking provision, especially for families with young children and for older adults.

Despite premises constraints GP Practices are not allowed to close their lists to new registrations without consultation with, and permission from the HWE ICB. Even when surgeries are significantly constrained the NHS will seek to avoid a situation where a patient is denied access to their nearest GP surgery, with patient lists only closed in exceptional circumstances.

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As a result of significant growth proposed in Local Plans, the HWE ICB expects applications to close lists to increase. It is therefore important that new developments make a financial contribution to mitigate any primary health care impacts the development will have.

The HWE ICB has produced a Primary Care Strategic Delivery Plan, 2023 -2026 which sets out how the HWE ICB wants to develop GP, community pharmacy, dentistry, and ophthalmology services across Hertfordshire and west Essex to benefit patients and communities over the next three years.

The Primary Care Strategic Delivery Plan has three objectives covering:

1. Joined up local teams of health and care.
2. Improved access for urgent same day health.
3. Improved prevention.

These objectives are supported by several key areas of work including the improved use of buildings used to deliver services, developing the primary care workforce, better use of data, information and digital technology and ensuring good value contracts and locally funded projects.

When new dwellings and registrations are planned the preferred option is to find a way to absorb those significant demands upon surgeries for example, by re-configuring, extending or relocating GP premises to provide sufficient space to increase resources and clinical services and thus keep the patient lists open.

Healthcare Needs Arising from the Proposed Development

Development at Land West Of High Street Stebbing will have an impact on primary health care provision in the area, and its implications, if unmitigated, would be unsustainable for the NHS.

In reviewing the Primary Care Network (PCN) data and patient list sizes, Angel Lane Surgery will be unable to accommodate the additional patient numbers arising from the strategic site allocations, as well as from other developments coming forward within Dunmow and in its vicinity.

The HWE ICB has identified and prioritised Angel Lane Surgery and is exploring capital projects in the short term (1-5years) to either extend or relocate this Practice drawing solely on the opportunities within the existing NHS estate. This could be by way of an upgrade of administrative space into clinical. This could include the cost of the bulk lifting of the patient records into off site storage to create space needed for reconfiguration and expansion of clinical space and for additional roles. This is in line with the HWE ICB's strategy for future healthcare infrastructure which looks at the opportunities to improve the use of existing healthcare buildings.

Cost calculation of additional primary care healthcare services arising from the development proposal.

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The financial contribution for health infrastructure that the HWE ICB is seeking, to mitigate the health impacts from this development has been calculated using a formula based on the number of units proposed and does not take into account any existing deficiencies or shortfalls in Stebbing Dunmow and its vicinity, or other development proposals in the area.

The proposed development would deliver 28 dwellings, which based on the dwelling mix of 6 x 1 bedroom, 10 x 2-bedroom, 6 x 3 bedroom and 3 x 4 bedroom will create circa 53 **new patient registrations.**

Please note, this calculation is based on the information provided in the Planning Statement on the proposed dwelling size and mix and the following average number of occupants per dwelling type:

- 1 bedroom – 1.3
- 2 bedrooms – 2.0
- 3 bedrooms – 2.6
- 4 bedrooms – 3.2

53 new patient registrations/2000 = 0.0265 of a GP *GP based on ratio of 2,000 patients per 1 GP and 199m² as set out in the NHS England “Premises Principles of Best Practice Part 1 Procurement & Development”

$0.0265 \times 199 \text{ m}^2 = 5.2735 \text{ m}^2$ of additional space required

$5.2735 \text{ m}^2 \times \text{£}7,000^* \text{ per m}^2 = \text{£}36,914.50$ (*Build cost; includes fit out and fees)

$\text{£}36,914.50 / 28 \text{ dwellings} = \text{£}1,318.375$ per dwelling (rounded down to $\text{£}1,318.00$ per dwelling)

Total GMS monies requested 28 x [£1,318.00 per dwelling] = £36,904 (indexed from the date of the planning permission)

The HWE ICB requests that the financial contribution that the HWE ICB is seeking, to mitigate the health impacts from this development is secured through a planning obligation attached to any grant of planning permission.

A trigger point of payment on occupancy of the 9th Dwelling is requested for GMS healthcare planning obligations. Please note, the developer contribution figure referred to in this response is a calculation only and that the final payment will be based on the actual dwelling unit mix and the inclusion of indexation.

If planning permission is granted, the HWE ICB propose to focus Section 106 monies within Angel Lane Surgery by way of bulk lifting of the patient records into off site storage to create space needed for reconfiguration and expansion of clinical space and for additional roles.

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In respect of Regulation 122 of the CIL Regulations 2010 (amended 2019), the planning obligations sought from this proposal are:

- (i) **Necessary to make the development acceptable in planning terms.** The provision of community facilities including health is a material planning consideration. As explained above, a financial contribution has been sought to mitigate the primary health service impacts arising from this development, to allow for enhanced healthcare infrastructure and improved facilities.
- (i) **Directly related to the development.** The new residents of the development will have an additional impact upon local health services. The financial contribution will be used towards the removal of patient records to off-site storage to provide more clinical and administrative space within the practice. As such the contribution will be used for the benefit of the new residents.
- (ii) **Fairly and reasonably related in scale and kind to the development.** The above financial contribution has been calculated based on 28 new dwellings and 53 new patients, to mitigate the primary health service impacts arising from this development.

With regards to the HWE ICB's own governance and scrutiny processes, please note:

- All projects are subject to Full Business Case approval by the HWE ICB and NHS England.
- A project identified and costed in response to the planning application may not meet the objectives of current strategies or could have significantly increased in cost, especially if there has been any significant time lapse from the date of the response to the date of implementation of the planning consent.

Subject to securing the healthcare developer contribution secured, as set out above, to mitigate the health service impacts arising from this development, the HWE ICB does not raise an objection to the proposed development.

The HWE ICB looks forward to working with the Council and the applicant to satisfactorily address the issues raised in this consultation response and would appreciate acknowledgement of receipt of this letter.

Yours sincerely,



Rebecca Ward
Premises and Estates Support Manager
NHS Hertfordshire & West Essex ICB

Dr Jane Halpin, Chief Executive

Rt. Hon. Paul Burstow, Chair

