



Central East
Integrated Care Board

NHS Central East ICB
Gemini House, Bartholomew's Walk,
Cambridgeshire Business Park, Angel Drove,
Ely, Cambridgeshire, CB7 4EA

10th September 2026

██████████@net.uk

Sent via email: section62a@planninginspectorate.gov.uk

Section 62A Applications Team
Planning Inspectorate, c/o QUADIENT
69 Buckingham Avenue
Slough, SL1 4PN

Dear Sir/Madam,

Re: Planning Application Consultation: S62A/2026/0159

Proposal: Partial demolition of existing buildings (with retention of existing two-storey car park and substation) and redevelopment of the site to provide a mixed-use development comprising residential apartments (class C3) and flexible commercial floorspace (class E) across 4 blocks and associated internal roads, parking, drainage, landscaping, amenity space and associated works.

Location: Maple House, Nos 8-16 (even) & 30-32 High Street and nos 1-7 Princes Parade, Potters Bar, EN6 5BA

Thank you for consulting the NHS Central East Integrated Care Board (CEICB) on the above-mentioned planning application.

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

The NHS CEICB is a statutory body with responsibility for commissioning NHS health services. The NHS CEICB serves approximately 3.5 million people across Cambridgeshire, Peterborough, Bedfordshire, Luton, Milton Keynes, and Hertfordshire. With our population living longer but with a growing challenge of long-term illness, widening inequalities linked to deprivation, our role is to manage the clinical and financial risk for the

3.5 million people we serve, ensuring that the right health interventions are in place to improve lives, reduce avoidable harm, and use public resources responsibly.

The NHS CEICB has produced a five-year Strategy called '*Our Way*', published on 1st April 2026, which sets out a five-year approach to health commissioning, built on improving quality in terms of access to, experience of, outcomes of, and effectiveness of health services, with *quality* being the mechanism through which the CEICB will deliver a sustainable NHS for the population it serves.

Integral to the NHS CEICB's five-year Strategy is neighbourhood health which focusses on delivering joined up, local, preventative care at a neighbourhood level. Primary and community health services will act as the anchor of neighbourhood delivery, providing continuity, proactive management of long-term conditions, and coordination across the NHS, social care, local authorities and the voluntary sector, integrated around people and places.

Assessment of impact on existing Healthcare Provision

The CEICB has assessed the impact of the proposed development on primary health care provision in and around the vicinity of Potters Bar.

Within CEICB there are 76 Primary Care Networks (PCNs) across the 47 neighbourhoods; each covering a population of between circa 25,600 and 141,000 patients. 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 Potters Bar and under which this development falls has a combined patient registration **list of 30,437**, 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 CEICB. 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.

As a result of significant growth proposed in Local Plans, the CEICB 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.

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 Potters Bar will have an impact on primary health care provision in the area, and its implications, if unmitigated, would be unsustainable for the NHS.

Parkfield Medical Centre, Highview Medical Centre, Annandale House Surgery will be impacted by the proposed development given their proximity to the site and predominant patterns of access in the area.

In reviewing the Primary Care Network (PCN) data and patient list sizes, Parkfield Medical Centre, Highview Medical Centre and Annadale House Surgery in Potters Bar will be unable to accommodate the additional patient numbers arising from this strategic site allocation, as well as from other developments coming forward within Potters Bar and in its vicinity.

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

The financial contribution for health infrastructure that the CEICB 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 Potters Bar and its vicinity, or other development proposals in the area.

The proposed development would deliver 293 dwellings, which based on an average occupancy of 2.4 occupants per dwelling will create circa **703 new patient registrations**.

703 new patient registrations/2000 = 0.3515 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"

$0.3515 \times 199 \text{ m}^2 = 69.9485 \text{ m}^2$ of additional space required

$69.9485 \text{ m}^2 \times £7,334^* \text{ per m}^2 = £513,002.30$ (*Build cost; includes fit out and fees. Please note build costs are kept under constant review)

$£513,002.30 / 293 = £1,750.86$ per dwelling (rounded up to £1,751.00 per dwelling)

Total GMS monies requested: $293 \times £1,751.00 = £513,043.00$ (indexed from the date of the planning permission)

The CEICB requests that the financial contributions the CEICB 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 10th Dwelling is requested for GMS planning obligations. Please note, the developer contribution figures referred to in this response are 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 CEICB propose to focus Section 106 monies for additional primary care facilities in Potters Bar either to expand, reconfigure or relocate one or more Potters Bar Practices and/or provision serving the development.

The contribution request is reasonable and directly related to the development, being based on the proposed development, the specific population increase, and the resultant primary care floorspace requirement. The request is fairly and reasonably related in scale and kind to the development, as the financial contribution is based on the capital cost of delivering the required additional capacity within the primary care estate that will be impacted by the proposed development.

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

- All projects are subject to Full Business Case approval by the CEICB 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 contributions, as set out above, to mitigate the health service impacts arising from this development, the CEICB does not raise an objection to the proposed development.

The CEICB 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 faithfully



Rachael Donovan

Town Planning Policy Lead

Driven by one question: what best serves our population?

NHS Central East ICB