

Cabinet Report

Purpose: For Decision

ISLE OF WIGHT COUNCIL

Date	9 MAY 2024
Title	ADOPTION OF THE 'HEALTH CONTRIBUTIONS SUPPLEMENTARY PLANNING DOCUMENT (SPD)'
Report of	CABINET MEMBER FOR PLANNING, COASTAL PROTECTION AND FLOODING

Executive Summary

1. The purpose of this report is to consider the adoption of the 'Health Contributions Supplementary Planning Document (SPD)' following a consultation exercise undertaken by the Isle of Wight Council.
2. The draft SPD outlines how the Hampshire and Isle of Wight Integrated Care Board (ICB) decide what improvements to health infrastructure may be needed as a result of development proposals on the Island. These improvements would be for infrastructure only (e.g. new or extended health premises) and not health services (e.g. more GPs).
3. The draft SPD then identifies how the amount of money a developer may have to pay towards these improvements is worked out and also what size of new development may have to pay.
4. If adopted, the council, in partnership with the Hampshire & IOW ICB, will be able to start collecting financial contributions towards new or extended health infrastructure from qualifying development.

Recommendation

5. To adopt the 'Health Contributions Supplementary Planning Document' attached as Appendix 1; and
6. To delegate any final editorial and presentational changes to the supplementary planning document to the Strategic Manager for Planning. These changes will not alter the meaning of the document and will be restricted to grammatical, presentational and typographical errors.

Background

7. To better integrate planning and health across the Island and to help plan efficiently for health infrastructure, the Isle of Wight Council is working in partnership with the NHS Hampshire & Isle of Wight Integrated Care Board (ICB) to facilitate the collection of financial contributions towards primary care infrastructure from qualifying development, where necessary.
8. A number of other areas in England, including Devon, Somerset and Hampshire, already collect contributions towards primary care infrastructure using the methodology set out within this SPD and the NHS Hampshire & Isle of Wight ICB, working in partnership with Isle of Wight Council, now wishes to implement the same approach on the island.
9. Policy DM22 of the Island Plan Core Strategy (adopted March 2012) outlines that *'the council will work in partnership with other public sector providers to ensure that development provides high quality infrastructure commensurate to the scale of development and the needs of different communities across the island.'* The policy also states that the council will *'collect and use contributions from developers to support improvements in services and infrastructure that are required as a result of development'*.
10. The threshold for considering a request for a contribution towards health provision on the Island has initially been set at all proposals for a net increase of 20 dwellings or more. This will be kept under review post adoption of the SPD.
11. The SPD sets out that evidence relating to occupancy rates, current patient list sizes, size and space standards and cost guidance will be used to calculate whether contributions are required. Section 7 of the SPD details the methodology that the ICB will use to determine the level of financial contribution a development would be required to make. Any such contributions would be secured through a planning obligation that forms part of the planning permission.

Corporate Priorities and Strategic Context

12. The [Corporate Plan 2021 - 2025](#) sets out the Council's key areas for action, aspirations and key activities. The specific key areas for action and aspirations relevant to the Health Contributions SPD are set out in detail below.

Responding to climate change and enhancing the biosphere

13. The Climate and Sustainable Development Impact Assessment has been carried out with the results shown in the graphic overleaf. The provision of new or extended healthcare facilities in close proximity to where residents live will help reduce the need to travel and offer sustainable access to healthcare services.



Economic Recovery and Reducing Poverty

14. Providing new or improved healthcare facilities that meets the needs of Island residents is a key tool in helping to address health inequalities and poverty reduction.

Impact on Young People and Future Generations

15. The provision of new or improved healthcare facilities that meets the needs of Island residents will have a positive impact on young people and future generations by providing essential healthcare facilities for residents to access. The nationally recognised Family Hubs on the Island provide a one-stop shop for families and young people across a range of services including health services, health visiting, midwifery, occupational therapy and mental health. The co-location of health services in Family Hubs provides an opportunity for further development and enhancement using contributions collected via this SPD.

Corporate Aims

16. The Corporate Plan 2021 - 2025 sets out the council's key areas for action, aspirations and key activities. Once adopted the Health Contributions SPD will play a role in helping the Council achieve the following specific aspirations:

- (1) We will ensure that we listen to people. We will do so by holding

consultations in which we will have a proper discussion with residents about issues

- (6) Prioritise dealing with health inequalities and the resulting poverty highlighted during the pandemic
- (16) Place the health and wellbeing of residents at the centre of all we do
- (27) All council decisions must be considered with regard to their impact on young people and future generations
- (40) Promote people-oriented place planning for town centres
- (43) Commit to develop sustainable transport options with a focus on infrastructure to encourage active travel

Consultation and Engagement

17. In line with regulations 11 to 14 of the Town and Country Planning (Local Planning) (England) Regulations 2012 and the Council's [Statement of Community Involvement](#), the local planning authority undertook a 6-week consultation on the draft SPD (which is longer than the minimum statutory requirement for such a consultation). This took place from Friday 16 February 2024 until Tuesday 2 April 2024.
18. A total of twelve responses were received, including from three town, parish and community councils, seven from local residents and two from statutory bodies (Historic England & Natural England) albeit neither of these had any specific comments to make.
19. The comments received have not resulted in any changes to the draft document that was put out for public consultation.

Scrutiny Committee

20. The proposed adoption of the Health Contributions SPD is being considered by Corporate Scrutiny Committee on 7 May 2024 and any recommendation(s) from Corporate Scrutiny will be reported verbally to the Cabinet meeting.

Financial / Budget Implications

21. It is considered that there will be no direct financial / budget implications arising from adoption the Health Contributions SPD. Any funds collected will be passed to the NHS for the provision of primary healthcare facilities.

Legal Implications

22. Supplementary planning documents should be prepared only where necessary and in line with paragraph 153 of the National Planning Policy Framework (NPPF).
23. If adopted the SPD will add further detail to the policies already in the Island Plan Core Strategy. The SPD will be a formal document that will be a material consideration in planning decisions, but not part of the development plan.
24. The content of the SPD differs from that covered in the provision sought in R.(on the application of The University Hospitals of Leicester NHS Trust) v Harborough

DC [2023] EWHC 263 (Admin) as the SPD only facilitates contributions towards primary healthcare infrastructure rather than seeking to bridge any NHS funding gap by facilitating contributions towards NHS services, which the aforementioned judgement rejected.

Equality and Diversity

25. The council as a public body is required to meet its statutory obligations under the Equality Act 2010 to have due regard to eliminate unlawful discrimination, promote equal opportunities between people from different groups and to foster good relations between people who share a protected characteristic and people who do not share it. The protected characteristics are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
26. A stage one equality impact assessment (EqIA) has been undertaken in connection with the proposed SPD (see Appendix 3).
27. It is considered that the SPD itself will not have a negative impact on any of the protected characteristics. This is because the status of the document is such that higher level policy and legislation is also required to be considered as part of the determination of any planning application, which would take account of our legal duties under equality legislation.

Property Implications

28. It is considered that there will be no direct property implications, although any decisions over the future of council owned land will need to consider relevant planning policy that would include the SPD once adopted

Options

29. The options are set out as follows:
 - a) To adopt the Health Contributions Supplementary Planning Document attached as Appendix 1; and
 - b) To delegate any final editorial and presentational changes to the draft supplementary planning document to the Strategic Manager for Planning. These changes will not alter the meaning of the document and will be restricted to grammatical and typographical errors; or
 - c) To further amend and then adopt the Health Contributions Supplementary Planning Document; or
 - d) To not adopt the Health Contributions Supplementary Planning Document;

Risk Management

30. The main risk of not adopting the Health Contributions SPD is that the local planning authority will not be able to use the guidance within the document as a

material consideration when determining planning applications. This would mean that financial contributions from qualifying development could not be collected when making planning decisions. By adopting the Health Contributions SPD this risk is mitigated as far as reasonably practicable

Evaluation

31. The draft SPD outlines how the Hampshire and Isle of Wight Integrated Care Board (ICB) decide what improvements to health infrastructure may be needed in particular areas of the Island. The document also sets out how the ICB will use evidence relating to the following to calculate whether contributions are required:
 - the capacity of existing health facilities in an area
 - current patient list sizes
 - size and space standards for new health facilities
 - the cost of building new health facilities
32. The draft SPD then identifies how the amount of money a developer may have to pay towards these improvements is worked out and also what size of new development may have to pay.
33. The adoption of the Health Contributions SPD will result in the council being able to use the guidance within the document, which aligns closely with key Corporate Plan objectives, as a material consideration when making planning decisions.

Appendices Attached

34. Appendix 1: Health Contributions SPD
35. Appendix 2: Summary of consultation responses
36. Appendix 3: Stage one equality impact assessment (EqIA)

Background Papers

37. Island Plan Core Strategy: [Microsoft Word - Core Strategy - Mar 2012.doc \(iow.gov.uk\)](#)
38. [Supplementary Planning Document consultations \(iow.gov.uk\)](#)
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