

LAWSON PLANNING PARTNERSHIP Ltd



CHARTERED TOWN PLANNERS

Planning Policy Manager
 Local Plan Regulation 19 Representation
 Planning Policy Team
 Epping Forest District Council
 Civic Offices
 323 High Street
 Epping
 Essex
 CM16 4BZ

johnlawson@lpppartnership.co.uk

Tel 01206 835150

Fax 01206 854164

Co. Reg. No. 5677777

26th January 2018

Dear Sirs

Epping Forest District Local Plan – Submission Version 2017
Representations submitted on behalf of Princess Alexandra Hospital NHS Trust

On behalf of our client the Princess Alexandra Hospital NHS Trust (PAH), we write to set out our representations on the Epping Forest District Local Plan Submission Version 2017 (the draft Local Plan), for your consideration.

Background

1. PAH is preparing an Outline Business Case (OBC) for the provision of a new hospital/wider health and well-being campus. The OBC follows PAH Board approval for a related Strategic Outline Case (SOC) for this significant health care investment, which includes a number of potential development scenarios. One of PAH's key development options is to relocate the current acute Hospital in Harlow, to a new site within the Harlow and Gilston Garden Town area.
2. A site assessment exercise is progressing and two possible locations for a new hospital campus have been identified as referred to in paragraph 2.112 of the draft Local Plan. Once a preferred location has been agreed by PAH and the OBC approved, it will proceed with a Full Business Case (FBC), with a view to securing detailed planning permission, to enable the scheme to commence from 2021. A key potential hospital location is situated within the proposed East Harlow development area (within the area covered by Epping Forest District), as identified in Policy SP 5 - Garden Town Communities – and Map 2.4 in the draft Plan, which PAH supports.
3. Consequently, with the above background position in mind, there is a need to establish a planning policy basis to help enable the hospital development and investment to be delivered. Having reviewed the draft Local Plan, it is considered that in broad terms the related planning policies do provide a suitable policy framework to enable the hospital masterplanning and subsequent more detailed site planning processes to be taken forward for the East Harlow area. This is on the basis that the preferred development option favours the East Harlow location and our related representations refer to and support this position.

Managing Director:
 John Lawson, BA(Hons) MPhil MRTPI
 Director:
 James Lawson, BA(Hons) MA MRTPI
 Technical Director:
 Georgina Brotherton, BSc(Hons) MSc MRTPI

Associate Directors:
 Sharon Lawson, BA(Hons) Dip TP MRTPI
 Aarti O'Leary, BA(Hons) MA MRTPI
 882 The Crescent, Colchester Business Park,
 Colchester, Essex, CO4 9YQ
www.lpppartnership.co.uk





4. Also as within the Plan period, some health care buildings provided at St Margaret's Hospital are likely to be removed as part of a programme to optimise the use of the existing site. This rationalisation of health care buildings at St Margaret's could create some surplus land, which may be suitable for housing development as identified in the previous version of the draft Local Plan. However, the related draft housing allocation has been removed, which has left a planning policy void and consequential need for a further amendment to the current draft Plan. Such a revision is necessary in order to provide a suitable policy basis to help guide any future redevelopment proposals at St Margaret's, allowing for both health care facilities on a retained area and some potential residential development on a vacated surplus area.
5. Therefore, our representations seek a small amendment to **Policy D2 – Essential Facilities and Services** – to provide for the required level of flexibility.
6. Finally, our representations refer to and support draft **Policy D1 - Delivery of Infrastructure** – in so far as it recognises that proportional developer contributions may be required to help fund the impact of major schemes on health care facilities including primary, acute and mental health care services.
7. Our specific representations are set out below.

Local Policy SP5 Garden Town Communities

8. PAH supports the principle of **Policy SP5A – Allocation SP5.3 and SP5H** which allows for the provision of a potential 14-hectare Hospital/Health and Well-Being Campus in the East Harlow development area. It is considered that these policy references meet the Local Plan soundness tests.
9. PAH supports the related explanatory text set out in the draft Local Plan at Paragraphs 2.13, 2.112, 2.131, 6.26 and 6.27, which recognises and plans for the provision of a new hospital in East Harlow as a suitable development option, as identified in Policy SP5. It is considered that these paragraphs represent necessary justification in support of the related policy and meet the Local Plan soundness tests.
10. PAH supports the content of Map 2.4 'East Harlow' identifying a broad development area 'SP5.3 East of Harlow Masterplan Area', which should be capable of accommodating the required components of Site Allocation 5.3 including 750 new homes and the potential relocation of the Princess Alexandra Hospital. It is considered that this Map represents a necessary and appropriate illustrative plan in support of the related policy and meets the Local Plan soundness tests.

Infrastructure and Delivery Policies

11. PAH supports the principle of **Policy D1 - Delivery of Infrastructure** in so far as it requires financial contributions for the provision of supporting infrastructure (including health care provision) proportional to that generated by development proposals.



12. PAH supports the principle of Policy D2A – Essential Facilities and Services as it allows for developer contributions towards the improvement of essential health care facilities and services required to serve the scale of the proposed development. It is considered that this aspect of the Policy meets the Local Plan soundness tests.
13. PAH also supports the related supporting text to Policy D2A at paragraph 6.30 concerning the identification of the need for health care contributions through health impact assessments.
14. PAH requires a small but important revision to Policy D2B(i) Essential Facilities and Services, concerning the redevelopment of existing health care sites. At present the Policy does not allow for the redevelopment of part or all of an existing health care facility, where alternative provision is to be provided. This would apply to the rationalisation of health care buildings at St Margaret’s Hospital, which is likely to occur during the plan period. Any residual surplus area could provide an opportunity to be redeveloped for housing to help cross fund the re-provision of services and make optimum use of surplus previously developed land.
15. Consequently, this part of the Policy as currently worded would not be ‘Sound’ as it is not ‘Justified’ in so far as it does not represent the most appropriate strategy, when considered against reasonable alternatives in the context of paragraph 182 of the NPPF. It is therefore, requested that Policy D2B(i) is amended to read as follows (proposed changes shown in italics):

‘Development proposals which would be detrimental to or result in the loss of essential facilities and services that meet community needs and support well-being will only be permitted where it can be clearly demonstrated that:

(i) The service or facility is no longer needed *or will be re-provided elsewhere within the catchment area;*’

16. It is considered that this amendment would address the soundness objection.

We trust you will find the above representations to be useful and that they will be taken into account prior to submitting the plan to the Secretary of State for public examination.

Yours faithfully


Lawson Planning Partnership Ltd 

Enc

cc PAH