

## **MIQ response 290825 from NHS Lancs and South Cumbria ICB**

In response to your email of 15th August 2025, please see below Lancashire & South Cumbria's (L&SC ICB) responses to the Inspectors recent Matters, Issues and Questions (MIQ).

The responses also take into account the ICB's concerns set out in my email of 21<sup>st</sup> August 2025 (below) regarding appropriate / required infrastructure and developer contributions.

I would be grateful if the responses and concerns could be taken into consideration during the Inspectors examination of the Hyndburn Local Plan.

### **Matter 2 The Vision and Spatial Development Strategy**

**Policy SP1: The Spatial Development Strategy** states *'the Principal Town (Accrington) will accommodate the majority of new development. Huncoat will grow at a significantly faster rate than the other Accrington townships to support Huncoat Garden Village (Sufficient land will be made available in the Borough to meet the identified requirement for housing over the Plan period of at least 3,686 dwellings (equivalent to an average of 194 dwellings per year).'*

**Policy SP2: Huncoat Garden Village** states that *Huncoat Garden Village (HGV) is a strategic location for housing growth..... it will deliver, in line with the HGV Masterplan and Design Code: A. around 1,500-1,600 new homes (some of which will be delivered beyond the Plan period), a village centre and associated infrastructure, with a balanced and appropriate mix of residential accommodation, and; B. improvements to services including transport, community facilities, green, blue and grey infrastructure<sup>35</sup>, including a new Local/Neighbourhood Centre.'*

Further - *'Developers will contribute towards the costs of strategic infrastructure required for Huncoat Garden Village in line with the recommendations of the Huncoat Garden Village Masterplan.'*

**Q1** - Are the vision and strategic objectives justified by the evidence and do they reflect the issues and challenges facing the Borough?

### **Matter 6 - SP3 Planning Obligations**

**Policy SP3: Planning Obligations** which states:

1) *In order to secure sustainable development and ensure that development proposals meet the reasonable costs of new infrastructure, facilities or services needed as a direct result of the development, the Council will seek to secure the provision through the use of planning conditions and/or Section 106 obligations or agreements, in line with the tests set out in paragraph 57 of NPPF.*

2) *The Council will identify specific obligations where infrastructure requirements are known and evidenced through an Infrastructure Delivery Plan.*

**Q17** - Is the Policy consistent with the Framework, is it justified, and would it be effective?

**Q21** - Is the Policy effectively worded to address individual scheme infrastructure requirements which may not be included in the Infrastructure Delivery Plan?

## **Matter 6 - Policy SP9: Provision of Community Facilities**

**Policy SP9: Provision of Community Facilities** which states:

*The Council will support proposals for new or improved sports, recreation, **health**, community and cultural facilities, seeking to protect and enhance a range of facilities to support the social well-being of the Borough's residents.....*

**Q15** - Is the policy justified, effective and consistent with the Framework? Should reference be made to the possible loss of the facility through change of use not just redevelopment in part 2 of the policy in the interest of effectiveness?

## **ICB Response**

In respect of the issues and challenges facing the Borough L&SC ICB would question the understanding of the impact of the increase in housing of at least 3,686 dwellings would have on health infrastructure in the area. An increase of 3,686 new homes would see a potential increase in population in this area of 8,846 additional patients over the plan period. The equivalent average of 194 dwellings per year would see an annual increase of 466 patients per year. \*\*

Furthermore the increase in patients over the plan period would require the recruitment of circa four whole time equivalent (WTE) GP's\*\*\* plus associated nursing, other medical and administrative personnel to support this increase.

Additionally, the Local Plan states that its baseline demographic forecasts predict further population decline over the plan period, with a significant increase in the proportion of elderly residents. Generally, elderly residents present with co-morbidities which will place additional time and resource pressures on the health system.

As the majority of GP surgeries within the Hyndburn area are at or nearing their capacity and will struggle to absorb any further impacts brought about by new housing developments, new supporting infrastructure, or the redevelopment or reconfiguration of existing health infrastructure supported by developer contributions (S106) is required.

The requirement for developer contributions is supported in the context of the Local Plan itself, stating that 'community infrastructure' refers to a wide variety of matters meeting health, social, educational, spiritual, recreational and cultural needs. It is therefore an essential component of place, helping to bind communities together (Strategic Objective 5 (2.32)). It also sets out the circumstances when financial or other contributions will be expected from development. Alongside affordable housing (covered in Policy SP10: Housing Provision (including affordable housing)), this could include other infrastructure such as that needed for education, health, transport, flood and water management, green and digital infrastructure, where these are necessary to make the development acceptable in planning terms, are directly related to the development and are fairly and reasonably related in scale and kind to the development. Through the development management system, the Council can also seek to secure planning obligations or agreements that will meet the reasonable costs of new social infrastructure that are reasonably related to the new development (Strategic Objective 5 (2.35)).

\*\*Based upon the Office for National Statistics average household size (2017) of 2.4 persons per household (housing number x 2.4).

\*\*\* Based upon Royal College of General Practitioners (RCGP) key general practice statistics and insights data of 2258 patients per GP (May 2025).

Kind Regards

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