APPENDIX A

SLIDE PRESENTATION BY MR JEREMY CONEN, SENIOR DEVELOPMENT MANAGER, INSPIRED VILLAGES

PRESENTED AT GREAT LANE PARISH COUNCIL MEETING ON 17 MARCH 2021

APPENDIX B

Please find attached the general arrangement (sheet 3 of 4) plan (20183 L6 revC) approved under Application 12/02571/REM detailing provision of the medical centre.

The full report is available on the SDC planning portal: (https://apps.stratford.gov.uk/eplanning/) under the 'reports' section of the Application 10/00420/OUT.

The relevant sections from the s106 agreement are:-

"Medical Centre"

means a medical centre with defibrillator to be provided as part of the Development and constructed in accordance with the details specified in paragraph 4.5(a) of Schedule 2 or agreed pursuant to paragraph 4.6 of Schedule 2 (as the case may be)

4.4 The Owner shall:

- (a) use reasonable endeavours from Implementation to procure and maintain a general practitioner to be based in the Medical Centre (on the basis of a lease of an initial 25 years at a peppercorn rent and thereafter for a further minimum period of 25 years at a market rent) and to make it a requirement of the agreement with that general practitioner to permit the residents of Great Alne and the wider locality to have access to and use of the Medical Centre; and
- (b) consult with that general practitioner on the detailed design of Medical Centre commencing at least 3 months prior to submission of reserved matters applications for the Medical Centre.
- 4.5 Any agreement with a general practitioner to be based in the Medical Centre pursuant to paragraph 4.4 shall include terms whereby the Owner shall:

- (a) construct for the benefit of the general practitioner a facility to shell and core (but including bathroom and kitchen fixtures) of a maximum size of 250 square metres net internal area to achieve BREEAM - Excellent classification (or the nearest comparable rating prevailing at that time where such BREEAM rating no longer exists); and
- (b) surface lay out and make available appropriate car parking (subject to reserved matters approvals being granted for such spaces) and a landscaped garden of approximately 100 square metres attached to and for the benefit of the Medical Centre.
- 4.6 Any failure to procure and maintain a general practitioner to be based at the Medical Centre shall not release the Owner from its obligations to provide a Medical Centre save that the Owner may agree with the Council an alternative size and specification for the Medical Centre and alternative arrangements for the timing of its provision.

APPENDIX C

Please find attached on the following pages, extracts from the Planning reports presented to the planning committee at the time of the original outline application for the Maudslay / Great Alne Park development.

The full report is available on the planning website under the 'reports' section of Application 10/00420/OUT.

NHS Warwickshire

The PCT are keen to see all new developments consider health in two respects:

- 1) Health Services and
- 2) Healthy Environments

The PCT's allocation is based on historic population figures and there is no mechanism for applying for public sector funding in anticipation of housing development and consequently there is unavoidable lag between the need being generated and the resources being made available to meet it adequately.

Given the rapid population growth occurring within the Local Planning Authority because of the number of large and smaller residential developments, the PCT will inevitably experience serious funding gaps and/ or workforce shortages leading to a growing and unsustainable difficulty in meeting the population's healthcare need.

Following discussions with Iwan Jones, of Urban Renaissance Villages Ltd, the PCT conducted a rapid health impact assessment of the development on the locality. Although there is a new [healthcare] development proposed at Alcester, which is going to be delivered in 2012, there is no healthcare provision in the immediate locality.

The PCT uses the NHS Healthy urban Development Unit (HUDU) Model as a basis for quantifying contributions. The HUDU model is intended to reflect the impact of the particular scheme in question, as it uses actual dwelling numbers, by type, to estimate the total population moving into the development. The impact on health is estimated using the cost and activity levels associated with the current local population, which is then extrapolated for the additional population being generated.

The use of the HUDU Model and the assumptions behind it is supported by the ODPM Circular 5/05 on Planning Obligations (05/2005), which is the justification for the provision of health facilities required by an increasing population via S106.

All of the people from the development will require a range of health care facilities and the sec.106 contribution will be required to commission additional primary care provision. Planning obligations would assist the PCT to satisfy the need in these areas during the funding gap period.

Following a meeting on the 10th February 2011 with Iwan Jones it was agreed by both parties that the developer would provide the following in lieu of a direct capital contribution towards healthcare.

A new Medical Centre on site, which would be a maximum of 250 metres net internal area and act as a Branch Surgery, meeting current Department of Health standards and built quality to achieve BREEAM excellent. This Medical Centre is to be gifted freehold or on a 125 year peppercorn lease to NHS Warwickshire or its successor body. The Medical Centre is to be furnished by the developer, excluding loose furniture and IT equipment.

A sufficient number of free car parking spaces to be provided for staff and patients, with 18 spaces being an indicative number at this stage, with further details to be confirmed once a travel plan is commissioned.

A Health and Wellbeing Garden should be provided adjacent to the Medical Centre, an area of approximately 100 metre square.

This Branch surgery would be anticipated to serve a population of a maximum of 2000 patients from the locality.

The Branch Surgery would provide a dispensing service for the locality.

This Medical Centre would offer a range of services to both the residents of the new development and the residents in the locality in line with NHS Warwickshire's vision to create sustainable communities and a healthy environment, and act as a complement to the new development in Alcester. (31.03.2011).

Fourthly, the scheme retains the shop and medical centre as a facility for both new residents and the existing community but also opens up other elements of the development to wider local use, again increasing the range of facilities within the village and the ability of residents to access them without having to drive to Alcester or other nearby towns.

Whilst these changes do not negate the Inspectors overall conclusions on sustainability, I do consider that they go some way towards reducing the degree of harm identified on sustainability grounds. Members also need to be mindful that any use of the site, whether for its lawful employment use or for alternative uses, will generate traffic and will, to a greater or lesser extent, conflict with sustainability objectives.

Fallback Position

The appeal Inspector gave little weight to the fallback position argued by the applicant at that time that the lawful B2 use of the site could lead to significant harm to the village if large scale commercial use were to be resurrected. No details were supplied to her about what form any re-use or redevelopment of the site could take and there was no evidence submitted concerning the viability of any such alternative use. She felt that the location of the site away from major roads, larger settlements and public transport would also count against the site in locational terms and commented that redevelopment would require planning permission and would be subject to assessment against planning policies in force at the time.

As part of the current application submission the applicants have submitted a report from a commercial property agent confirming that demand for larger premises has fallen but that the site does still have potential to attract B8 businesses if rents were sufficiently attractive. Demand for smaller premises on a freehold or long lease basis does still exist and the rural setting of the site could be seen as a positive element by some businesses. The report concludes that the site remains a viable long term commercial location. The applicants have also submitted a sketch layout showing how part of the site could be redeveloped over an extended period with smaller units to match current demand for such premises and have commented that it does have the potential to generate significant volumes of traffic movements and up to 900 jobs.

The information submitted is more detailed than that considered by the appeal Inspector and does appear to take into account current market conditions. The planning assessment of redevelopment proposals for alternative business uses would have to take into account the designation of Maudslay park as a Major Existing Developed Site within the Green Belt where limited infilling or redevelopment for employment purposes is acceptable in principle. This said, no applications have been submitted and I still have some doubts regarding the likelihood of a wholesale redevelopment of the site as described by the applicant actually occurring. I do, however, consider that the additional market evidence and apparent lack of viable alternative development options does allow some additional weight to be attached to this argument than was possible at the time of the previous appeal.

Impact on Health Facilities in the Area

Concerns have been raised by a number of individuals that the development would have an adverse impact on health facilities in the area due to the large number of older residents who would move onto the site and the care needs that these residents would have. A further question has been raised by the Chairman

of the Parish Council as to whether the provision of medical facilities on site would conflict with the objective of centralising existing local health facilities on the former Alcester Hospital site.

The Warwickshire NHS consultation response confirms that the NHS has been fully involved in discussions to bring forward the medical centre facility within the site and have been instrumental in determining what the facility should contain. Confirmation has also been received that the medical centre would complement rather than conflict with other provision in the area. The potential for existing local residents of the local area to utilise the new medical facility is a welcome component of the scheme and should increase choice and ease of access to health facilities for local people.

The provision of comprehensive care facilities within the development (to include qualified nursing staff 24 hours a day) should also ensure that significant elements of residents' health and care requirements are met on site rather than in existing centres of day-to-day healthcare provision.

Scale

The scale of the development needs to be considered both in terms of its physical size within the site and the impact of that scale upon the surrounding area in terms of the number of occupants that it would introduce, predicted traffic movements that would be generated and other associated effects.

In physical terms the development would cover a smaller area than both the current industrial buildings and the previous appeal scheme with more openness between structures as already described under the Green Belt section of this report. A table illustrating the differences in scale between the current industrial development, the proposed retirement village that was considered at appeal and the current Extra Care development proposal is contained within the 'Applicant's Comments' section of this report. As the physical scale of buildings would reduce markedly I can see no grounds for objection on the basis of the physical extent or likely mass of buildings within the site.

The number of units has been reduced from 210 to 179 during the course of the application and likely population estimates range from 215 to 250 depending on whether a household size figure of 1.2 or 1.4 is used (see reference to this in the Mixed and Balanced Communities section). I am mindful that both the Parish Council and Ward Member have been seeking a greater reduction in the scale of the development and, in response, the developer's comment that a reduced scale would require increased management charges for residents which may make the cost of the units prohibitively expensive. I have also had regard to the estimated costs of site clearance, decontamination and remediation which are put at £2,125,000, and to the value of the benefits package offered by the developers.

Whilst a further reduction in scale would clearly make the development more acceptable to local elected representatives and to some local residents (Members should note that 25% of the individuals who submitted representations on the scheme as originally proposed supported the proposals), on balance I am of the view that the scale of development proposed is acceptable.