# CHAPTER NINE – HEALTH AND CARING

# 9.1 POLICY HC1: SOUTHAMPTON GENERAL & PRINCESS ANNE HOSPITALS

#### Representations

HC01-362/3-ID-O
HC01-524/1-ID-O
HC01-524/2-ID-O
<u>HC01-526/25-ID-O</u>
HC01-1185/1-ID-O
HC01-1185/2-ID-O
<u>HC01-1185/3-ID-O</u>

#### Issues

- a. Whether the designated site for hospital development should be extended.
- b. Whether the criteria in the policy adequately address support services and key worker housing.
- c. Whether the Plan adequately addresses the interrelationship between different healthcare providers.
- d. Whether the Plan should allow for further expansion and growth of Southampton General Hospital.

## **Inspector's Reasoning and Conclusions**

- 9.1.1 Southampton University Hospitals NHS Trust (SUHT) consider that the identified area for development at Southampton General Hospital should be extended to include properties in Tremona Road and Coxford Road. The Objectors believe that this would create an island site with more flexibility for expansion. In the Revised Deposit version, the Tremona Road properties, apart from No. 103, have been incorporated into the designated area. As this semidetached property is apparently owned by SUHT it seems appropriate to include it also and I recommend accordingly. Land at the corner of Coxford Road, Laundry Road and Warren Avenue includes a small and relatively new housing development and other older residential properties. There is also commercial property, including a building leased as an office by SUHT. I consider that it would be logical to include this area within the HC 1 site to meet the future needs of the hospital for expansion. I appreciate that it would result in a loss of housing but this would be relatively small and would be outweighed in this case by the long term healthcare benefits, in my opinion.
- 9.1.2 SUHT considers that criterion one should also refer to "support services". I note that the Council considers this to be unnecessary on the basis that "healthcare facilities" would include health related support services. However, as the Objectors have pointed out such

facilities may be large proposals in their own right and not necessarily linked to a health care proposal. I agree that the policy should specifically include reference to support services. The Objectors also consider that criterion three of the policy should include medical students and trainee nurses. The Council comment that such people would be included within the "key worker" group. The Consortium for Registered Social Landlords, whilst being generally supportive of the policy, point out that the scope for key worker initiatives has far greater potential. Affordable housing provision is dealt with under Policies H 13 and H 14 in the Plan although I have not supported provision specifically for key workers<sup>1</sup>. It would be inappropriate for Policy HC 1 to provide more detail about housing initiatives for key workers, in my opinion.

- 9.1.3 Some of the comments made by the SUHT at Initial Deposit stage have been incorporated into the Revised Deposit version and so these objections have been satisfied. SUHT consider that Paragraph 9.1 of the Plan should recognise the interrelationship of the various health providers and sites in providing healthcare. It is concerned that sometimes planning applications may be made by different providers but linked to the same strategic objective. The Objectors comment about difficulties they have had with a planning application for additional car parking unrelated to an application for clinical development. However, it is difficult to see how the Local Plan could resolve such an issue which seems to me to be a matter more aptly considered through the development control process.
- 9.1.4 SUHT believe that the Plan should recognise that a more pro-active approach is needed to a city-wide Green Commuter Plan. The Objectors contend that additional clinical services will generate more travel. They suggest that there will need to be further car parking as well as enhanced public transport, including a commitment to alternatives such as a park and ride facility. A Green Transport Plan has been introduced at the Southampton General Hospital but it is important to recognise that car travel will also play its part and that car parking facilities will be needed. Development proposals will be subject to the sustainable travel policies in Chapter Two of the Plan.
- 9.1.5 Mr Huggins considers that healthcare services should not be seen as "major industries". This point has been covered in the Revised Deposit version by changing the reference to "major employers". Mr Huggins also believes that in Paragraph 9.1 the Plan should seek to minimise the problems of urban living by the improvement of accessibility to services. He says that further expansion of Southampton General Hospital should be curtailed in favour of smaller, local facilities that are easily accessible to everyone. He does not feel that the houses in Laundry Road should be lost. He says that the Hospital is too large and overwhelming, is difficult for many people to get to and has poor car parking.

9.1.6 It seems to me that there will always be a tension between

<sup>&</sup>lt;sup>1</sup> See Paragraph 7.12.11 and 7.12.12.

economies of scale that flow from centralisation and disbenefits regarding accessibility. However these issues, which relate directly to resource allocation and the distribution of healthcare facilities across the city, are determined by the health service providers and not through the land use policies of the Local Plan. Policy HC 3 caters for primary care in the community by allowing local healthcare facilities within a variety of locations. Southampton General Hospital provides a major healthcare service for the whole city as well as being a teaching hospital and a large employer. It seems to me that the Plan should recognise its importance and safeguard land for its growth.

### RECOMMENDATIONS

I recommend that the Plan be modified as follows:

- By revising the Policy HC 1 designation on the Proposals Map to include 103 Tremona Road and the land at the corner of Coxford Road, Warren Avenue and Laundry Road.
- By adding "and support services" after "healthcare facilities" in criterion one of Policy HC 1.

# 9.2 POLICY HC 2: ROYAL SOUTH HANTS

## Inspector's Reasoning and Conclusions

9.2.1 As there are no outstanding objections to this policy, I make no further comment or recommendation.

# 9.3 POLICY HC 3: PRIMARY CARE

# (Proposed Change 25)

#### Representations

Mr D Huggins Mr T Caves Mr T Caves HC03-524/3-ID-O HC03-1021/4-ID-O HC03-1021/5-ID-O

#### Issue

a. Whether the Plan adequately caters for health needs within the local community.

## **Inspector's Reasoning and Conclusions**

9.3.1 Mr Huggins considers that there should be a planned expansion of

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social services to match need – especially residential care for the elderly by the Council. Many of his concerns are not within the scope of the Local Plan. As I have said in relation to Policy HC 1, the allocation of resources is not a land use planning matter and therefore not an appropriate subject for the Local Plan. It is not for the Plan to decide how elderly care should be provided and by whom.

- 9.3.2 Mr Caves similarly objects to issues that cannot be addressed through Local Plan policy. The standard of services and imbalances between doctor/ patient ratios are not land use planning matters. New housing is proposed in the city centre but it is the responsibility of the Southampton City Primary Care Trust (PCT) to ensure that the enough healthcare services are provided to meet the needs of the people in the city. As the Council has commented, the health authorities have been consulted on the content of the Plan and are aware of the pressure for housing growth. In the circumstances I do not consider that the Plan should be changed to meet the points raised by the Objector.
- 9.3.3 Policy HC 3 provides the locational criteria whereby planning applications for primary care facilities are considered. It aims to encourage them on sites well served by different transport modes and also close to the communities they will serve. This would favour smaller healthcare units and the Council comments that the PCT are seeking to establish a network of new neighbourhood health centres across the city. Proposed Change 25 recognises its role through additional text to Paragraph 9.9 and I support this change as it provides clarity to the Plan. Mr Caves however objects to this approach and considers that primary care facilities should be located within walking distance of those that are most in need of them. I agree with the Council that this is in effect what the policy does. It encourages location in populous areas such as existing centres where a large number of people can gain easy access on foot or by public transport. However, the policy does not and should not offer an order of locational preference as this is a policy matter for the PCT.

### RECOMMENDATION

I recommend that the Plan be modified in accordance with Proposed Change 25.

# 9.4 POLICY HC 4: CEMETERY EXTENSION

#### Representations

HM Prison Service Councillor Samuels HC04-351/1-ID-O HC04-1213/12-ID-O

## Issues

- a. Whether there should be a policy for a new prison.
- b. Whether the crematoria are adequately maintained.

# **Inspector's Reasoning and Conclusions**

- 9.4.1 HM Prison Service points out that Circular 3/98: Planning for Future Prison Development highlights the continual overcrowding within prisons and the need to make adequate provision through the planning system for new prison development. Since then the Objectors have highlighted that the increase in the prison population has outstripped projections and the need has become more widespread and urgent. The South Hampshire area has been identified as a priority area of search for a new prison. HM Prison Service suggest that there can be beneficial effects on the local economy in terms of income and employment and that Southampton, with its good road and rail networks would be a good location. The Objectors have not identified a particular site but considers that a policy framework should be put in place to enable a suitable proposal to come forward expeditiously in due course. Alternatively the Objectors would like a site to be identified through the Plan by the Council for the purpose.
- 9.4.2 Ideally a prison site would be about 16 hectares in extent and the Council consider that there is unlikely to be a site of this size available within the tightly constrained boundaries of the city. Be that as it may, it seems to me that this is a wider than local requirement. I agree with the Council that the needs and locational requirements of HM Prison Service would be more aptly addressed at a higher level, possibly through the evolving Regional Spatial Strategy. In the circumstances, I do not consider that the Plan should be changed to accommodate this objection.
- 9.4.3 Councillor Samuels is concerned that the crematoria are run down and need upgrading. This is a management issue that the Council can address as landowner of the relevant land. It is not a matter for the Local Plan and no changes are needed in response to the objection.

## RECOMMENDATIONS

I recommend that no modification be made to the Plan in response to these objections.