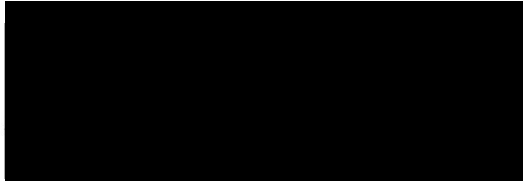


STATEMENT OF COMMON GROUND

1. List of Parties involved:

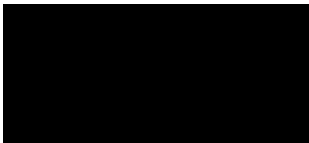
- Elmbridge Borough Council (EBC)
- NHS Surrey Heartlands Health and Care Partnership Integrated Care Board (ICB)

2. Signatories:



08.08.2023

***Elmbridge Borough Council
Kim Tagliarini, Head of Service for Planning & Environmental Health***



08.08.2023

***Matthew Knight, Chief Finance Officer
NHS Surrey Heartlands Health and Care Partnership Integrated Care Board (ICB)***

3. Strategic Geography

The Statement of Common Ground (SoCG) is between Elmbridge Borough Council (EBC) and NHS Surrey Heartlands Health and Care Partnership Integrated Care Board (ICB). It applies to Elmbridge Borough.

Healthcare provision has its own boundaries, and there are currently two Place Based partnerships that Elmbridge Borough Council are part of. The Surrey Downs partnership covers GP practices in Claygate, Cobham, Dittons, Esher, Molesey and Oxshott (within Elmbridge Borough) along with Ashted, Bookham, Epsom, Banstead and Dorking. The North West Surrey Alliance covers GP practices in Hersham, Walton-on-Thames, and Weybridge (within Elmbridge Borough) along with other practices in Woking, Runnymede and Spelthorne.

Since 2020, the four Surrey Heartlands CCGs (Guildford and Waverley, North West Surrey, Surrey Downs and East Surrey CCG) have merged to form the Surrey Heartlands Health and Care Partnership Integrated Care Board (ICB) (sometimes referred to as an Integrated Care System - see Figure 1). By bringing partners

together, the Integrated Care Board aims to improve outcomes in population health and healthcare; tackle inequalities in outcomes, experience, and access; enhance productivity and value for money; and help the NHS support broader social and economic development.

As part of the preparation of its draft Local Plan, EBC has co-operated with the ICB which has responsibility for health services across the Borough as well as considering cross-boundary provision.

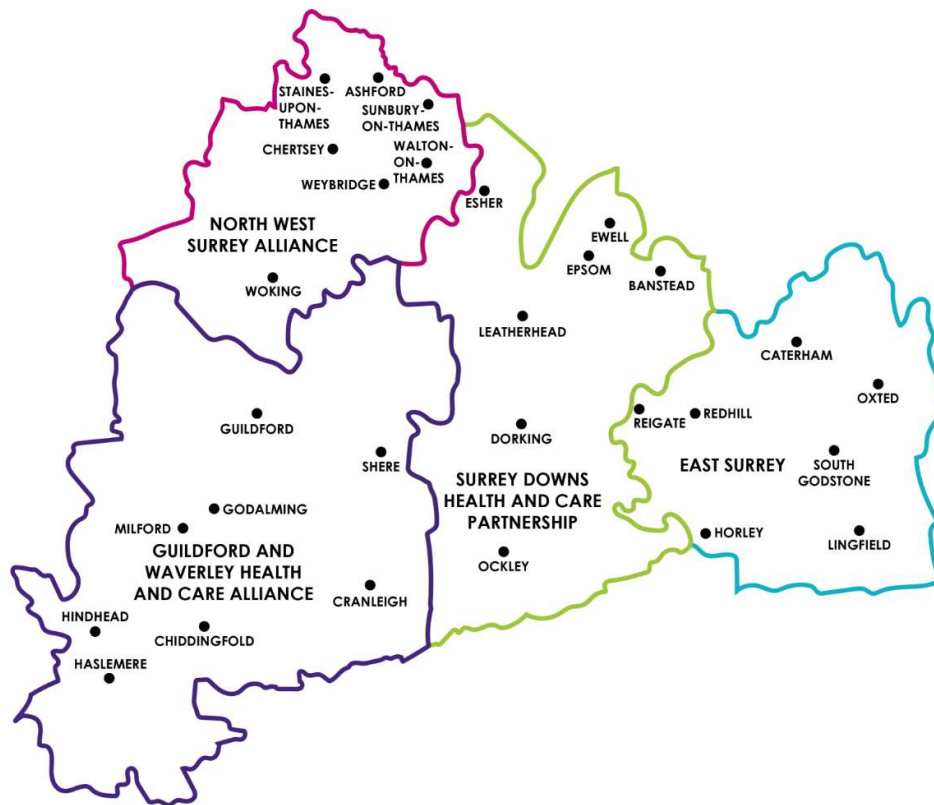


Figure 1: Place-based partnerships or Alliances that cover Surrey under the ICB umbrella

4. Strategic Matters

Duty to Cooperate

EBC has engaged the ICB on an active and on-going basis throughout the preparation of its draft Local Plan 2037. This has included engagement on the evidence base documents; through meetings; and at the Regulation 18 & 19 Stages, up until the submission of the draft Local Plan for Examination in Public (EiP).

Duty to cooperate activities up until the Regulation 19 Stages are recorded in EBC's Duty to Cooperate: Statement of Compliance (June 2022). Specifically, activities relating to Strategic Matter 7: Health, are set out in pages 168 – 173 of the Statement.

The ICB agrees that the above document sets out an accurate record of their engagement up until the Regulation 19 Stage and has not raised an objection to the draft Local Plan in relation to the duty.

Elmbridge Local Plan – Regulation 19 Representation Period (June 2022)

EBC invited representations on their draft Local Plan (Regulation 19) between 17 June and 29 July 2022. Key points raised by the ICB in their representation (dated 18 July 2022) were:

1. NHS Surrey Heartlands and Epsom and St Hiller Trust support the Council's approach in draft Policy INF1 – Infrastructure Delivery, which sets out that new developments must contribute towards the provision of infrastructure and services, including health which will help to ensure that developments provide adequate contributions to mitigate their impacts on the health care infrastructure.
2. NHS Surrey Heartlands and Epsom and St Helier Trust welcome further partnership working with the Council on the provision of infrastructure to support sustainable development in the borough.
3. NHS Surrey Heartlands and Epsom and St Helier Trust suggested that policies and processes explicitly identify and provide assurances that the funding of health care infrastructure through developer contributions will be provided.
4. NHS Surrey Heartlands and Epsom and St Helier Trust stated that the Infrastructure Delivery Plan (IDP), and the capital allocation process for the Elmbridge Community Infrastructure Levy (CIL) must support funding allocations towards health care infrastructure in order to ensure the Council meets the objectives of Principle 5, and the Local Plan as a whole.
5. In response to draft Policy INF2 – Social and community infrastructure, NHS Surrey Heartlands and Epsom and St Helier Trust stated flexibility should be accorded to NHS sites, or that of key infrastructure providers, in relation to the policies aimed at preventing the loss or change of use of social and community facilities and assets. It was stated that where such policies are overly restrictive, the repurposing of unneeded and unsuitable health care facilities may be prevented or delayed and that surplus health care facilities are purpose-built and when at the end of their useful lives, are highly unlikely to be viable or, are suitable for other uses.

6. NHS Surrey Heartlands and Epsom and St Helier Trust recommend that Policy INF2 (3) should set out exceptions and offer positive support for infrastructure providers through flexibility or a streamlined process to facilitate repurposing and reinvestment of capital towards modern and fit-for purpose infrastructure facilities. It was stated that the loss of existing social and community infrastructure (including health) that forms part of a wider estate plan that will support health should not be subject to any restrictions.

Regarding point 4 above, the Council can confirm that when shaping the policies of the draft Local Plan, it has been necessary to understand the capacity of existing health facilities within the borough and to identify whether improvements are required to support the development strategy.

Through engagement on the preparation of supporting (IDPs), the sites identified for allocation within the draft Local Plan and projected levels in population increase have been reviewed and the impact on health services considered. The IDP (June 2023) sets out the impact across the primary care network and the improvements required.

The IDP states that proportionate funding toward the additional capacity would need to be secured through development from either a S106 directly tied to specific development(s) and the mitigation measures required or, through funding from the Council's CIL and the addition of projects / funding requirements to the Strategic Priority Programme (SPP) List.

Regarding point 5 above, the Council considers that the wording in point 3 of draft Policy INF2 is sufficiently flexible for the ICB to deliver its estates programme and does not propose to amend the draft Policy. This will be a point for the Planning Inspector to consider at the EiP.

5. Governance Arrangements

The parties are committed to working positively together, sharing information and best practice, and continuing to engage with one another through the EiP process and beyond.

Primarily, this will be through:

- Updates to the Council's IDP and the allocation of CIL through the SPP.
- Consultation on large scale planning applications within the borough as part of the Development Management process.

This co-operation and collaboration will take place at senior officer level.

The SoCG will be reviewed where necessary to reflect progress made through effective cooperation on any issues that may arise through the EiP process.