



Statement of Common Ground

Between

London Borough of Newham

And

NHS North East London Integrated Care Board

Stage: Newham Submission Draft Local Plan (Reg. 19)

Date: 16 April 2025

1. Executive Summary

- 1.1. A statement of common ground is a written record of the progress made by plan-making authorities during the process of planning for strategic cross-boundary matters. It documents the strategic matters where effective cooperation has led to cross-boundary challenges and opportunities being identified, whether there is agreement between bodies in how these should be addressed, and how the strategic matters have evolved throughout the plan-making process. It is also a way of demonstrating at examination that plans are deliverable over the plan period, and based on effective joint working across local authority boundaries.
- 1.2. This Statement of Common ground addresses key strategic matters between the two signatories, the London Borough of Newham and the NHS North East London Integrated Care Board, as relevant to the preparation of the Newham Draft Submission Local Plan and its progression to public Examination.
- 1.3. Strategic matters overseen by other organisations will be addressed in other SoCGs, in order to streamline the process of reaching agreements with each party. Where key strategic issues overlap between different organisations that Newham have signed statements of common ground with (e.g. the delivery of housing targets), these interrelations are summarised in the Duty to Cooperate Statement (2024) and the Duty to Cooperate Addendum (2025).
- 1.4. The document is intended to be 'live', updated as circumstances change. Please see the Governance Arrangements section of the statement for more details.

2. Parties Involved

2.1. Newham Council, the Local Planning Authority for the London Borough of Newham, which is an inner London Borough in East London situated between three rivers: the Lea to the west, Thames to the south and Roding to the east. London Borough of Newham is bordered by several other London Boroughs, including Tower Hamlets, Hackney, Waltham Forest, Redbridge, and Barking and Dagenham. Across the River Thames lies the Royal Borough of Greenwich. Newham's administrative boundaries also contain 65% of the London Legacy Development Corporation (LLDC) area, which acted as the planning authority for the Queen Elizabeth Olympic Park and surrounding area until the return of planning powers to the boroughs on 1st December 2024.

AND

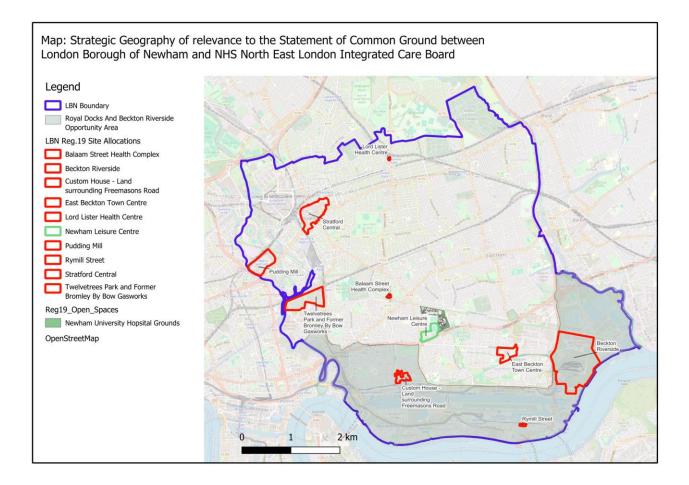
- 2.2. NHS North East London Integrated Care Board (NHS NEL), the infrastructure body responsible for deciding how the local healthcare budget is spent to create meaningful improvements in health, wellbeing and equity for everyone living in north east London. This is achieved through planning and commissioning health services across eight local authority areas (Barking and Dagenham, City of London, Hackney, Havering, Newham, Redbridge, Tower Hamlets, and Waltham Forest) and making sure all parts of the local health system work effectively together. The organisation was formed on 1 July 2022, following the Health and Care Act 2022, replacing the Newham Clinical Commissioning Group (CCG).
- 2.3. Newham is strategically located at the intersection of the London-Stansted-Cambridge-Peterborough Corridor, which is centred on enterprise and innovation within emerging sectors such as digital, media, life sciences, telecommunications and advanced manufacturing, and

the Thames Estuary Creative and Cultural Industries Corridor, which adds to the borough's significance. It contains three Opportunity Areas: the Olympic Legacy (which also includes parts of the other Host Boroughs) Poplar Riverside (which crosses the boundary with Tower Hamlets) and Royal Docks and Beckton, which is also the home of London's only Enterprise Zone and Europe's largest regeneration area.

- 2.4. The NHS has 31 assets within the London Borough of Newham which are operated by NHS Property Services, Community Health Partnerships, Health and Care Space Newham, Barts Trust, and East London Foundation Trust. There are a further 28 third party assets that are largely owned by GP Practices. Additionally, Newham Hospital (part of the Barts Health NHS Trust) is located within the borough which provides acute and specialist services. East London Foundation Trust, the community and mental health provider for Newham, also operate a site adjacent to Newham Hospital.
- 2.5. NHS NEL's Infrastructure Strategy sets out the key priorities for the NHS Estate over the next 20 years. The priorities are as follows:
 - 1.) Improve infrastructure, safety and quality;
 - 2.) Enable increased productivity;
 - 3.) Integrate services within our communities to support health and wellbeing;
 - 4.) Accelerate innovation; and
 - 5.) Development new additional capacity
- 2.6. NHS NEL's infrastructure strategy aspires to create a world-class infrastructure which supports and enables staff and patients to receive care that improves health and wellbeing outcomes and provides equity for all. However, this will only be achieved through strategy investment, joint capital planning and collaborative partnership working with key stakeholders such as the London Borough of Newham.
- 2.7. The LLDC returned planning powers back to the London Boroughs of Newham, Tower Hamlets and Waltham Forest and Hackney on 1st of December 2024. As such, key strategic matters for the parts of the LLDC that fall within Newham's administrative boundaries are also addressed in the new Newham Draft Submission Local Plan, and are subject to the matters addressed in this statement of common ground.

3. Strategic geography

- 3.1. The map below identifies the spatial representation of the key strategic matters addressed, alongside the administrative area of the plan-making authority (Newham).
- 3.2. As noted above, the LLDC returned planning powers back to the London Borough of Newham by the 1st of December 2024. Where relevant, the Newham draft Local Plan has retained and evolved site allocations and designations from the LLDC Local Plan (2020).



4. Background

- 4.1. Newham Council has prepared the Draft Submission Local Plan and published it for consultation between 19th July and 20th September 2024. This is the version of the plan that the Council considers to be 'legally compliant' and 'sound' and will be submitted to the Planning Inspectorate for examination in 2025. The council has undertaken two rounds of consultation prior to this, to inform the Newham Draft Submission Local Plan. These include:
 - Issues and Options Consultation, which took place between 18 October and 17 December 2021; and
 - Draft Local Plan Consultation (Regulation 18), which took place between 9 January and 20 February 2023.
- 4.2. A <u>Duty to Cooperate Statement</u> (DtC Statement) was published as part of Newham's Reg. 19 consultation, which provides a summary of our engagement with NHS NEL, as a duty to cooperate partner on the key strategic issue of planning for Health infrastructure requirements, as part of the preparation of the new Newham Local Plan. The relevant sections of the DtC Statement are paragraphs 4.230-4.238, and Appendix 1 of this report.
- 4.3. The national and regional policy context forming the background to this statement of common ground is also detailed in the Duty to Cooperate Statement (2024), under 'Chapter 2: Legislative and national policy context' and 'Chapter 3: Demonstrating compliance with the duty to cooperate'.

- 4.4. During the Reg. 19 consultation process, Newham approached NHS NEL to agree the process leading to the preparation and signing of this statement of common ground. As part of this NHS NEL raised:
 - Additional issues related to how the emerging Newham Local Plan could support the delivery of health infrastructure, including:
 - Newham's approach to developer contributions and infrastructure delivery;
 - Provision of integrated demographic 'Area Profiles' to aid modelling of need;
 - Flexibility of relevant policies and site allocations to support changing operational models of healthcare delivery; and
 - Additional key matters relating to:
 - Support for delivery of key worker affordable housing; and
 - Support for the redevelopment of Newham Hospital facilities.
- 4.5. The above matters, as related to the Newham Local Plan, are also reflected in NHS NEL's response to Newham's Reg. 19 consultation, including proposed wording changes.
- 4.6. A meeting was held on 23rd October 2024 to discuss the key strategic matters, and the agenda and notes of this meeting are attached as Appendix 1 and provide further background information.

5. Key Strategic Matters

5.1. Health infrastructure need

- 5.2. Following the publication of the Darzi Review (2024) of the NHS, there is a clear policy direction from national government to further progress the left shift of out of hospital services into the community. This means that more preventative and integrative models of care will be embedded within neighbourhoods to treat those with conditions whilst also preventing others from developing conditions through education and supporting lifestyle changes. Whilst the NHS awaits the publication of the 10 year plan it is critical that it isn't left behind as the planning process moves on.
- 5.3. Newham Hospital is in the process of developing a new clinical strategy and alongside that a new Estates Strategy. The new Estate Strategy will outline how Newham Hospital proposes to develop its infrastructure and the wider site, including requirement for new capacity wards, emergency care, imaging etc. that is needed to address the diverse, deprived and growing populations acute health needs.
- 5.4. Alongside these strategies, Barts Health, East London Foundation Trust, LBN Leisure and Sport and LBN Regeneration have been working together through the One Public Estate Programme (managed by the Local Government Association) to masterplan the area surrounding the hospital and Newham Leisure Centre, to maximise the opportunities presented by neighbouring public sector land ownership.
- 5.5. Additionally, NHS NEL will have a 'Newham Place Strategy' which will focus on the following:

- Transforming the health and lives of people in Newham, reducing inequalities and organising services to match people's needs;
- Developing joined up support and services that prevent people becoming ill; and
- Ensuring that services for people who are ill are high quality and can be accessed without delay.
- 5.6. The NHS NEL Infrastructure Strategy sets out that we need significant long-term, strategic investment which is properly funded and planned, to ensure our world-class healthcare staff have world-class facilities to deliver cutting-edge care and meet the current challenges, changing needs and significant rising demand for the next 20 years. This requires investment in the right buildings and facilities across the system, where staff can utilise technology such as genomics and Artificial Intelligence (AI), to deliver better care and empower people to manage their own health. As set out within paragraph 2.5 above, the Infrastructure Strategy has five key priorities around improvement, enablement, integration, acceleration and development.
- 5.7. Newham has worked collaboratively with NHS partners throughout the Local Plan Review to plan for future healthcare needs, in line with the requirements of the London Plan and the NPPF.
- 5.8. Information submitted by North East London ICB (formerly Newham CCG) at each stage of the Local Plan consultation process has informed the development principles and infrastructure requirements in the draft site allocations, as set out in the <u>Site Allocation and Housing</u> <u>Trajectory Methodology Note</u> (2024).
- 5.9. The Local Plan's planning obligations hierarchy was established to be in line with the wider Council's objectives and political commitments. While it is not possible for Newham to amend the hierarchy to be more favourable for NHS investment, the new Local Plan provides a clearer approach to meeting healthcare need than the adopted Local Plan, including identifying where facilities are required and outlining the use of the HUDU model to collect funds for sites which are not providing healthcare facilities. In addition, the Regulation 19 Local Plan has introduced a change to policy BFN4 to allow for flexibility in the application of this hierarchy, where required for infrastructure delivery. This will require the Council or infrastructure provider (in this case, the NHS) to provide representations regarding evidenced need through the application process. This will ensure the right infrastructure is delivered in the right locations.
- 5.10. A comprehensive set of evidence base documents have been used to help establish Newham's health picture; including 50 Steps (2024), Newham's Health and Wellbeing Strategy. Additionally, Policy BFN3: Social Value and Health Impact Assessment, offers a time-specific opportunity to assess and address the localised health needs of an area when an application is submitted. Further support for the use of up-to-date demographic modelling is provided in the plan through the Planning Obligation requirements for Policy SI2 and each of the site allocation infrastructure requirements, which note that health facilities should 'be designed to meet NHS needs and standards. Provision of health facilities should be subject to a needs based assessment at the time of delivery and meet the requirements of Local Plan Policy SI2.'.

- 5.11. Newham also recognise the NHS NEL's comments that there may be cases where existing health facilities no longer meet operational requirements and site constraints mean provision cannot be reconfigured on the same site. The emerging Local Plan Policy SI1 would also allow for the change of use of social infrastructure, if it can be demonstrated that the community need is being met elsewhere (in a policy compliant location).
- 5.12. During the meeting held on 23rd October 2024, Newham acknowledged NHS NEL's need to gain a better understanding of anticipated demographics in the Royal Docks area, due to significant anticipated growth and change. Newham noted that the Royal Docks Team have begun working on a Royal Docks Social Infrastructure Implementation Plan that could provide the necessary information. Newham offered to facilitate engagement of NHS NEL with this piece of work.

5.13. <u>Record of agreements and/or disagreements</u>:

- NHS NEL confirmed it understood the need for the planning obligation hierarchy set out in policy BFN4 to remain as drafted.
- NHS NEL confirmed it understood the need for Policy SI2 to remain as drafted.
- London Borough of Newham and NHS NEL agreed that the emerging Local Plan and its evidence base, as drafted, takes a proportionate approach to accessing the health need of Newham's population.
- London Borough of Newham and NHS NEL agreed to continue to engage via development management processes to ensure schemes deliver the needed NHS infrastructure.
- London Borough of Newham and NHS NEL agreed to hold a separate discussion(s) on the Royal Docks and Beckton Riverside, by engaging with the Royal Docks Team's Royal Docks Social Infrastructure Implementation Plan (emerging), to further build NEL's understanding of the likely future demographics in this area. London Borough of Newham also agreed they could provide ongoing information on the housing trajectory to support HUDU and NEL's modelling.

5.14. Key worker affordable housing

5.15. During the meeting held on 23rd October 2024, NHS NEL raised the impact that a lack of affordable housing is having upon staff retention in the NHS in North East London and the need for staff to live locally. Newham noted this, but clarified that the types of affordable housing available through national, regional and local policy are not prioritised for specific professions and that meeting local need for social rent housing is the borough's priority. As such, the NHS may look to deliver key worker housing for their employees on their own sites, where this will be in addition to the policy-required affordable housing.

5.16. <u>Record of agreements and/or disagreements</u>:

• NHS NEL confirmed it understood the need for Policy H3 to remain as drafted.

5.17. Green Space Designation – Newham Hospital Site

5.18. The Local Plan policies map shows that much of the Newham University Hospital site is covered by green space designations protected under Policy GWS1. In their regulation 19

response, NHS NEL raised concerns that the Local Plan green space designation within the hospital site may impede the delivery of the scheme mentioned at paragraph 5.4 above.

5.19. NHS NEL expressed concerns that the extent of green space designation around the Newham Hospital site would constrain the options for delivery of new health infrastructure. Newham highlighted that the borough has very little publicly accessible green space, therefore the Local Plan protects all green spaces, whether designated on the Policies Map or not. However, there is potential for green space to be reconfigured across a development site, so long as it does not have a biodiversity designation. Newham confirmed the need for the site to conform with the policies in the emerging Local Plan and that any loss of green space must be mitigated.

5.20. <u>Record of agreements and/or disagreements</u>:

• London Borough of Newham and NHS NEL agreed to continue to engage via development management processes related to a future redevelopment of the Newham Hospital site.

6. Governance agreements

- 6.1. This statement of common ground will be reviewed:
 - Whenever agreement is reached on any outstanding matters. Or
 - At key milestones in progress towards addressing strategic matters. Or
 - At each subsequent key stage of the plan making process, as it progresses towards adoption.
- 6.2. The table below outlines existing cooperation forums that will be used to continue to engage each other and progress the key strategic matters.

Forum	Details/frequency of the forum
Royal Docks Social	Royal Docks Team will organise
Infrastructure	workshops and project
Implementation Plan	management meetings as
(emerging)	necessary until the completion of
	the work.

7. Signatories

7.1. We confirm that the information in this statement and referred to documents reflects the joint working to date undertaken between London Borough of Newham and NHS North East London Integrated Care Board towards addressing the identified strategic matters.

Signed on behalf of London Borough of Newham:	Signed on behalf of NHS North East London Integrated Care Board:
Ellie Kyper Maners	Charlotte Pariery
Name: Ellie Kuper Thomas	Name: Charlotte Pomery
Date: 21 st March 2025	Date: 16th April 2025
Position: Policy Manager, Planning and Development Directorate	Position: Chief Participation and Place Officer, NHS North East London

Appendix 1: Agenda and minutes of Statement of Common Ground meeting held on 23rd October 2024

Statement of Common Ground between: London Borough of Newham and North East London NHS

Meeting Date: 23.10.2024 Time: 14:00-15:00 Venue: Microsoft Teams

Present:

Ellie Kuper Thomas, Policy Team Manager, LBN Naomi Pomfret, Principal Policy Planner, LBN Lily Mahoney, Principal Policy Planner, LBN Louise Phillips, Deputy Director of Regeneration and Infrastructure, NHS North East London (NEL) Mark Wiseman, Infrastructure and Regeneration Team, NHS NEL Charlotte Griffiths, Infrastructure and Regeneration Team, NHS NEL Sophie Hockin, Deputy Manager, Infrastructure and Regeneration Team, NHS NEL

Agenda and Notes

Agenda Item 1. Introductions (2min)	 Notes [context, position statements, areas of agreement and/or disagreement] Self-introduction by the LBN and NHS North East London (NEL) teams. LBN introduced the scope of the meeting. LBN shared the agenda of the meeting. 	Actions emerging [what, who, and any deadline]
2. Policy BFN4: Developer contributions and infrastructure delivery – hierarchy, contributions to meet growth (S106 and CIL)) (15mins)	 LBN provided an overview of Policy BFN4 in light of the NHS' Regulation 19 Local Plan comments: LBN stated that they appreciated the financial strain the NHS is under and the need to diversify their income. However, the Local Plan's planning obligations hierarchy was established to be in line with the wider Council's objectives and political commitments. We are therefore unable to alter this hierarchy. However, the new Local Plan provides a clearer approach to meeting healthcare need than the adopted Local Plan, including identifying where facilities are required and outlining the use of the HUDU model to collect funds for sites which are not providing healthcare facilities. In addition, the Regulation 19 Local Plan has introduced a change to policy BFN4, to allow for flexibility in the application of this hierarchy, where required for infrastructure delivery. This will require the Council or infrastructure provider (in this case, the NHS) to provide 	 NHS NEL confirmed it understood the need for the planning obligation hierarchy to remain as drafted and noted the flexibility provided in the Regulation 19 Local Plan approach.

	representations regarding evidenced need	
	through the application process. This will ensure the right infrastructure is delivered	
	in the right locations.	
	 NHS NEL understood this position and 	
	confirmed that provision of a health facility is	
	not always the right form of health mitigation,	
	especially when it is built out as a shell.	
3. Evidence base -	NHS NEL's response to the Regulation 19 Local	 NHS NEL and LBN
Area Profiles (5	Plan Review, requested additional evidence	agreed that the
mins)	base in the form of individual area profiles to	emerging Local Plan
	establish local demographics.	and its evidence
		base, as drafted,
	LBN clarified its position:	takes a
	 A comprehensive set of evidence base 	proportionate
	documents have been used to help	approach to
	establish Newham's health picture;	accessing the health
	including 50 Steps (2024), Newham's	need of Newham's
	Health and Wellbeing Strategy.	population.
	 Demographics and data for each 	NHS NEL and LBN
	evidence base is outlined and established.	agreed to hold a
	 Localised / topic relevant demographics 	separate
	have been captured and analysed in each	discussion(s) on the Royal Docks and
	of the evidence base documents. Each	Beckton Riverside
	considers both present and future health	by engaging with
	needs (to 2038).	the Royal Docks
	• Additionally, Policy BFN3: Social Value and	infrastructure
	Health Impact Assessment, offers a time-	study, to further
	specific opportunity to assess and address	build NEL's
	the localised health needs of an area	understanding of
	when an application is submitted.	the likely future
	 NHS NEL questioned when the background 	demographics in
	data from the 50 Steps Strategy (2024) will be	this area. The focus
	published and the granularity of the data	of a future
	behind each of the evidence base documents.	discussion(s) will be
	LBN confirmed that the data behind the 50 Stops Strategy (2024) will be published	to continue our
	Steps Strategy (2024) will be published imminently. In addition, it further clarified:	positive partnership
	 Each of the evidence base documents 	working and to aid NHS NEL with the
	provide the demographics required to	planning for its own
	inform the research and its findings.	asset programme,
	Further to this, the Local Plan EQIA	specifically in the
	measures the potential impact (positive or	Royal Docks and
	negative) that the Local Plan may have on	Beckton Riverside
	different groups protected by equalities	areas.
	legislation so that any such impact can be	• LBN to share the 50
	addressed and mitigated.	Steps supporting
	 NHS NEL stated that, in addition to the existing 	
	Local Plan evidence, it would be helpful for	

them to have area profiles similar to those	JSNA when
provided by the London Legacy Development Corporation (LLDC) in order to inform their service needs.	available.
 LBN confirmed its position: Area-specific infrastructure needs are highlighted in the site allocations. As such, an area profile would only be beneficial to those sites that are not site allocations. An area profile is only a snapshot in time. LBN highlighted that policy hooks have been provided in the emerging Local Plan, to ensure that the health infrastructure requirements will adequately reflect the need at the time/across the Plan Period (2038). These are set out in the Planning Obligation requirements for Policy SI2 and each of the site allocation infrastructure requirements, which note that health facilities should 'be designed to meet NHS needs and standards. Provision of health facilities should be subject to a needs based assessment at the time of delivery and meet the requirements of Local Plan Policy SI2.'. Unfortunately, the planning team does not have the resource to produce these and while the Council's research team did produce such documents, their resource is also limited. 	
 NHS NEL stated that their primary concern was gaining a better understanding of anticipated demographics in the Royal Docks area, due to significant anticipated growth and change. 	
• LBN stated that the Royal Docks Team have commissioned an infrastructure needs assessment for this area and suggested that the NHS were involved in ensuring the demographic aspect could support their work. LBN also agreed they could provide ongoing information on the housing trajectory to support HUDU and NEL's modelling.	

4. Policy H3: Affordable housing - housing for NHS staff (NHS Property Services) (5mins)	 NHS NEL summarised the issue around staff retention in the NHS and the desire for staff to live locally. LBN clarified its position: There are two types of affordable housing required under policy. One is social rent housing, which is allocated using the Council's allocations policy and one is intermediate housing for which there is only a maximum and minimum income requirements. There is no priority approach in place with regards to who should have access to intermediate housing. Historically, the GLA has attempted to develop a key worker policy. However, it is hard to determine who (which professions) is most worthy of this type of housing. There is no policy to prevent the NHS estates team from providing NHS staff housing on their own sites but this would not be considered to be part of the affordable housing offer – it would have to be provided as an additional offer. The NHS confirmed they understood that if they were to bring forward a level of key worker accommodation, that this would have to be in addition to meeting the policy requirements for affordable housing. 	 No further specific actions in relation to Plan Making. NHS NEL confirmed it understood the need for Policy H3 to remain as drafted. Any further guidance to be sought through the pre-application process.
5. Policy SI1: Existing community facilities and health facilities - delivering maximum viable amount of affordable housing (5mins)	 LBN clarified its position: Policy SI1 has a clause (part 2) that requires, if the site was not to come forward for an alternative form of social infrastructure, the maximum viable amount of affordable housing would be sought. London Plan Policy H4 requires 50% of affordable housing on public land. LBN would not be looking to make the NHS proposed amendment to this clause. Any applicant will have to justify why a scheme could not deliver the required amount of affordable housing. NHS clarified its position: there is a need for purpose built buildings. 	 NHS NEL confirmed it understood the need for Policy SI2 to remain as drafted.

	 the NHS estate strategy seeks to dispose of some of its smaller not fit- for-purpose buildings (i.e. house conversions). The estate strategy is looking at consolidating its services into larger, better located, built for purpose facilities. LBN clarified that the emerging Local Plan would not prohibit the change of use of social 	
	infrastructure, if it can be demonstrated that the community need is being met elsewhere (in a policy compliant location). A change of use has two stages, the first is demonstrating the loss is acceptable and then the creation of something new. The requirement to either deliver social infrastructure or maximum affordable housing would apply to whoever the NHS dispose the site(s) to. Policy SI1 establishes a list of criteria that can be used to demonstrate if a social infrastructure use is no longer required.	
6. GWS1: Green spaces - Newham Hospital (5mins)	 LBN summarised the issue, regarding the approach to the protection of green space in policy GWS1 and the potential future redevelopment at Newham Hospital. LBN clarified its position: Newham has very little publicly accessible green space, therefore existing green space must be protected. However, there is potential for green space to be reconfigured across a development site, so long as it does not have a biodiversity designation. The Local Plan's emerging green space policies seek to protect all existing green space, including spaces not designated on the Policies Map 	 NHS NEL confirmed it understood the need for Policy GWS1 to remain as drafted and noted the flexibility provided in the Regulation 19 Local Plan approach, regarding onsite reconfiguration of on-site green space / provision of mitigation for loss.
	 NHS NEL reiterated their concerns around the in-flexibility of approach to the protection of green space and the impact to the longer term masterplan for the Newham Hospital site. Work is currently underway to explore bringing forward the hospital site with the adjoining Newham Leisure Centre site. LBN confirmed the need for the site to conform with the policies in the emerging 	

 Local Plan and that any loss of green space must be mitigated. Newham Hospital is not a site allocation but LBN confirmed that this could potentially come forward as a combined site allocation with Newham Leisure Centre in a future Local Plan. 	
 NHS NEL questioned the extent of the green space shown on the policies map. LBN clarified that the green space 	
designated on the Policies Map Is space either in public or private ownership, which can have unrestricted access, partially-restricted access or restricted access. Policy GWS1 seeks to protect all existing green space (including spaces not designated on the Policies Map).	

		1
7. Health Centres in Submission Local Plan site allocations	 NHS NEL highlighted that a number of the site allocations in the emerging Local Plan include health facilities in their 'Infrastructure Requirements' NHS NEL confirmed it was supportive of all of 	 NHS NEL and LBN agreed to continue to engage via development management
See Table 1, for approach on sites where a health centre is required. (15mins)	 NHS NEL confirmed it was supportive of all of the requirements for health facilities on the site allocations in the Local Plan (as set out in Table 1) NHS NEL caveated that further work is required/being undertaken by the NHS to better understand the form of health facilities ' delivery model for health care required in Newham (reflecting in part a move to healthcare taking place in the community rether then hearital settings) and funding 	processes to ensure schemes deliver the needed NHS infrastructure.
	 rather than hospital settings) and funding availability. As such, it will continue to work with Newham's Planning Policy and Public Health teams to share its desired model of healthcare delivery. LBN highlighted that where the site allocation requires a health facility it includes the requirement to meet NHS needs and 	
	 standards and for a needs based assessment being undertaken at the time of the delivery. NHS NEL welcomed the inclusion of this policy wording in the site allocation text. 	

AOB, conclusions and actions (5mins)	 NHS NEL to continue feed into annual updates to the IDP. LBN highlighted that the Council is trying to secure more flexibility in S106 agreements – taking a similar approach to education facilities. NHS NEL clarified that the views represented at this meeting are those of the Integrated Care Board (ICB). As such, NHS NEL will share the outcome of this meeting and the draft SOCG with the other partners, the Trust and Barts, to confirm that they are happy with the agreed positions on the matters discussed and the draft SOCG. 	•	LBN to circulate the draft minutes and SoCG with NHS NEL. NHS NEL to share the SoCG with other NHS partners to ensure they are in agreement with the position.

ADDENDUM:

 Table 1: Newham Submission Local Plan: site allocations setting out the need to deliver a health centre

Neighbourhood	Site	Newham Submission Local Plan
	allocation	
N1 North Woolwich	N1.SA2 Rymill Street	<i>Infrastructure requirements</i> p.317 Development should provide a health centre of a minimum of 1,200 sqm , designed to meet NHS needs and standards.
		Provision of health facilities should be subject to a needs based assessment at the time of delivery and meet the requirements of Local Plan Policy SI2.
N5 Custom House	N5.SA1 Custom House Land surrounding Freemasons Road	Infrastructure requirements p.435 Development should provide a health centre of up to 2,500 sqm , designed to meet NHS needs and standards. Provision of health facilities should be subject to a needs based assessment at the time of delivery and meet the requirements of Local Plan Policy SI2.
N7 Three Mills	N7.SA2 Twelvetrees Park and Former Bromley By Bow Gasworks	 Infrastructure requirements p.461 Development should provide a health centre of a minimum of 1,500 sqm, designed to meet NHS needs and standards. Provision of health facilities should be subject to a needs based assessment at the time of delivery and meet the requirements of Local Plan Policy SI2.
N8 Stratford and Maryland	N8.SA1 Stratford Central	Infrastructure requirements p.474 The redevelopment of the Morrison's site should provide a health centre with a minimum of 2,500sqm , designed to meet NHS needs and standards. Provision of health facilities should be subject to a needs based assessment at the time of delivery and meet the requirements of Local Plan Policy SI2.
N8 Stratford and Maryland	N8.SA9 Pudding Mill	Infrastructure requirements p.504 Development should provide a health centre up to 2,000sqm , designed to meet NHS needs and standards. Provision of health facilities should be subject to a needs based assessment at the time of delivery and meet the requirements of Local Plan Policy SI2.
N10 Plaistow	N10.SA4 Balaam Street	Development principles p.531 Re-configuration and reprovision of the health centre with residential development. The re-configuration and reprovision of

Neighbourhood	Site	Newham Submission Local Plan
	allocation	
	Health Complex	the health centre should be in accordance with Local Plan Policy SI1. Infrastructure requirements p.531 Development should re-provide a health centre designed to meet NHS needs and standards and meet the requirements of Local Plan Policy SI2.
N11 Beckton	N11.SA1 East Beckton Town Centre	Infrastructure requirements p.539 Development should re-provide a health centre of 2,000 sqm designed to meet NHS needs and standards. Provision of health facilities should be subject to a needs based assessment at the time of delivery and meet the requirements of Local Plan Policy SI2.
N15 Forest Gate	N15.SA1 Lord Lister Health Centre	Development principles p.578 Re-configuration and reprovision of the health centre with residential development and open space. The re-configuration and reprovision of the health centre should be in accordance with Local Plan Policy SI1. <i>Infrastructure requirements</i> p.578 Development should re-provide a health centre designed to meet NHS needs and standards , subject to a needs based assessment by the time of delivery, and meet the requirements of Local Plan Policy SI2.
N17 Gallions Reach	N17.SA1 Beckton Riverside	 Development principles – pre-DLR extension p.593 The health centre should be located in the neighbourhood parade. Development principles – DLR extension p.593 Any expanded health hub or sports and recreation use should be located in the most accessible part of the site, within the town centre Infrastructure requirements – DLR extension p.595 Development shoulda health centre designed to meet NHS needs and standards. Provision of health facilities should be subject to a needs based assessment at the time of delivery and meet the requirements – DLR extension p.596 An expanded health hub designed to meet NHS needs and standards for the projected population;