

Philip Elliott

From: Philip Elliott
Sent: 15 March 2023 16:40
To: Philip Elliott
Subject: FW: HGY/2023/0261 Berol Quarter, Ashley Road, N17 9LJ

Sent: Monday, March 6, 2023 10:30 AM
To: Philip Elliott <Philip.Elliott@haringey.gov.uk>
Subject: HGY/2023/0261 Berol Quarter, Ashley Road, N17 9LJ

Dear Philip,

HUDU Response on behalf of the North Central London Integrated Care Board -
HGY/2023/0261 Berol Quarter, Ashley Road, N17 9LJ

HGY/2erol

Thank you for consulting the NHS North Central London Integrated Care Board (NCL ICB) regarding the planning application HGY/2023/0261. The NHS Healthy Urban Development Unit supports the London ICBs engage in the planning process.

We have reviewed the planning application and broadly welcome the proposal. However, we have significant concerns regarding the impact on health infrastructure. The Health Impact Assessment (Lichfields) submitted as part of the application documentation identifies the impact on health infrastructure as the only area where there is a clear adverse impact which requires mitigation. Paragraph 6.5 advises "this effect will be mitigated through CIL and/or Section 106 contributions to support existing healthcare facilities in the local area". Unfortunately, the HIA only considered primary care rather than the full range of health infrastructure which will be impacted.

The NHS HUDU Planning Contributions Model (HUDU Model) as set out in Chapter 11 of the 2021 London Plan has been used to calculate the cost of mitigation for inclusion within the s106 agreement. The applicant refers to the development when complete accommodating 470 residents. However, in running the HUDU Model we have assumed that there will be a proportion of residents moving locally although new residents will be moving into those homes vacated. This may underestimate the new population with a figure of 335. Should the Council have local information regarding allocations policy and who is moving into the borough we could review this figure. The summary figures from the Model are included in the table below. We are not seeking the revenue costs although it is important to recognise that there will be additional revenue costs incurred by the NHS.

Final Summary	
Total Capital Cost	£547,397
Total Revenue Cost	£497,490
Combined Cost	£1,044,887
Total Number of Housing Units	210
Capital Cost Requirement Per Unit	£2,607

Using information on the proposed housing mix in the Planning Statement, the model calculates the healthcare s106 requirement of £547,397 which includes primary care as well as acute and mental health capacity needs. However, with the planned space at the new Welbourne Centre it is hoped that additional capacity can be provided with reconfiguration and upgrading of existing sites, and therefore we ask for a minimum s106 contribution of £233,335 to “increase capacity of health infrastructure serving the proposed development”. In the event that further capacity is required from this and other schemes in this part of the borough we would welcome discussions with the Council in relation to potential CIL funding.

I am copying in Luka and Mike who are employed by the NCL ICB for information.

Please let me know if it would be helpful to talk through this response.

Kind regards,

Mary

Mary Manuel
Head of the NHS London Healthy Urban Development Unit