

Item 10 – Motion to Council

Liberal Democrat amendment proposed by Cllr S Robinson

and seconded by Cllr N Dudley

That the changes and deletions as set out below be made to the motion:-

There is continuing concern that there are insufficient medical facilities in Chelmsford to cope with the increase in the City's population and all Political Parties highlighted this in their recent election literature.

~~Whilst it is the duty of the Integrated Care Boards to deal with make the provision of for medical services, and in particular GP surgeries,; This Council notes that the City Council is currently consulting on reviewing the Local Plan to further increase the housing supply to meet the needs of Chelmsford residents and is making provision for new GP surgeries, including at Warren Farm and in the Garden Community. However, the NHS must step up to fund their operation, which will in turn increase the pressure on these facilities~~

Officers from the City Council do regularly engage with the ICB on planning matters and in particular on the major new housing sites to ensure land and buildings are available for medical facilities.

~~Whilst our Planning Officers are able to negotiate S106 and recommend CIL payments for provision and timing of physical buildings, the real outcome of ability of a surgery being ready to operate; has often been is being delayed due to substantial, real-terms cuts in funding per patient under the previous Conservative Government. This Council calls upon the new Government to increase this funding formula. because of the complex requirements of setting them up as businesses. It is clear that there is an ever increasing shortfall between new builds and primary care services:~~

~~City Council Planning dept can only place obligations on the applicants of new development, hence they are limited to such things as the buildings from which a surgery would operate:~~

~~This Council therefore welcomes the letter already sent to the new Secretary of State for Health and Social Care by the new Chelmsford MP Marie Goldman, which calls for:~~

- ~~1. More doctor training places to be created at Anglia Ruskin University~~
- ~~2. Increased per-patient funding for GPs~~
- ~~3. The NHS to engage better, at the earliest opportunity, with the Local Plan process~~

It is noted that City Council planning dept do include healthcare infrastructure requirements in the Local Plan and engage with the ICB on the Infrastructure Delivery Plans that support the Local Plan and that officers are invited to the Healthcare Providers Strategic Estates Group organised by the ICB.

However, these are not resulting in satisfactory outcomes, with surgery provision not keeping pace with new occupations.

It is therefore proposed that

The City Council [welcomes the admission by the Secretary of State for Health and Social Care that "the NHS is broken", looks forward to the Government taking concrete action to cure the NHS's ills and commits to offering help to the ICB to help them improve the medical services available to Chelmsford residents works much more closely with the ICB](#) to

- [1. Create a Strategic Growth Plan, using population projections and Local Plan future housing allocations, to determine what each place needs for future healthcare.:-](#)

~~create better outcome plans and commitments by:~~

~~1. Encourage and assist ICBs to produce strategic plans which address the demands created by major new housing estates~~

~~2. [Sseek to align](#) ~~Ensure that~~ Local Plan Infrastructure Delivery Plans (IDP) ~~and major housing estate applications,~~ [align](#) with such strategic healthcare planning undertaken by the ICB to help drive improvements to primary care ~~delivery~~ outcomes, ~~and:~~~~

~~3. [E](#)ncourage ICBs to use such plans to [maximise increase](#) their [funding requirements on use of](#) S106 and CIL [to ensure that sufficient monies are obtained](#) from developers to [help](#) cover ~~at most of~~ the costs of new healthcare facilities, ~~:- but increased Government funding for healthcare in areas with high housing growth is also essential.~~~~

~~Additionally, this Council welcomes the recent appointment of a consultant to draw up the IDP now the Council's Preferred Site Allocations are known and agrees that the City Council will lobby the new Government to retain and improve the existing S106 and CIL system. The Infrastructure Levy legislated for by the previous Government will undermine the delivery of affordable housing and other vital infrastructure and should be removed.~~

If amended, the revised motion would then read:-

There is continuing concern that there are insufficient medical facilities in Chelmsford to cope with the increase in the City's population and all Political Parties highlighted this in their recent election literature.

It is the duty of the Integrated Care Boards to make provision for medical services, and in particular GP surgeries. This Council notes that the City Council is currently reviewing the Local Plan to increase the housing supply to meet the needs of Chelmsford residents and is making provision for new GP surgeries, including at Warren Farm and in the Garden Community. However, the NHS must step up to fund their operation.

Officers from the City Council do regularly engage with the ICB on planning matters and in particular on the major new housing sites to ensure land and buildings are available for medical facilities.

Whilst our Planning Officers are able to negotiate S106 and recommend CIL payments for provision and timing of physical buildings, the ability of a surgery being ready to operate has often been delayed due to substantial, real-terms cuts in funding per patient under the previous Conservative Government. This Council calls upon the new Government to increase this funding formula.

This Council therefore welcomes the letter already sent to the new Secretary of State for Health and Social Care by the new Chelmsford MP Marie Goldman, which calls for:

1. More doctor training places to be created at Anglia Ruskin University
2. Increased per-patient funding for GPs
3. The NHS to engage better, at the earliest opportunity, with the Local Plan process

It is noted that City Council planning dept do include healthcare infrastructure requirements in the Local Plan and engage with the ICB on the Infrastructure Delivery Plans that support the Local Plan and that officers are invited to the Healthcare Providers Strategic Estates Group organised by the ICB.

However, these are not resulting in satisfactory outcomes, with surgery provision not keeping pace with new occupations..

It is therefore proposed that the City Council welcomes the admission by the Secretary of State for Health and Social Care that "the NHS is broken", looks forward to the Government taking concrete action to cure the NHS's ills and commits to offering help to the ICB to help them improve the medical services available to Chelmsford residents to

1. Create a Strategic Growth Plan, using population projections and Local Plan future housing allocations, to determine what each place needs for future healthcare,

2. seek to align Local Plan Infrastructure Delivery Plans (IDP) with such strategic healthcare planning undertaken by the ICB to help drive improvements to primary care outcomes, and

3. encourage ICBs to use such plans to maximise their use of S106 and CIL from developers to help cover the costs of new healthcare facilities, but increased Government funding for healthcare in areas with high housing growth is also essential.

Additionally, this Council welcomes the recent appointment of a consultant to draw up the IDP now the Council's Preferred Site Allocations are known and agrees that the City Council will lobby the new Government to retain and improve the existing S106 and CIL system. The Infrastructure Levy legislated for by the previous Government will undermine the delivery of affordable housing and other vital infrastructure and should be removed.