

CCBC Replacement Local Development Plan (RLDP)

Statement of Common Ground with Betsi Cadwaladr University Health Board

Introduction

This Statement has been prepared between Conwy County Borough Council and Betsi Cadwaladr University Health Board (BCUHB) who are the responsible body for the planning and delivery of health care facilities and services in the County.

Purpose of this document

The purpose of this Statement is to set out an agreed position between the Local Planning Authority and BCUHB in response to concerns raised by members of the public and Local Members to the Deposit RLDP about the effect of new development on health care provision in the County. This will provide a useful position statement for the Inspector by establishing what measures BCUHB intends to take to ensure that health care provision can accommodate the growth planned for in the RLDP.

Overview of engagement

BCUHB is a 'specific consultation body' in the plan preparation process and as such the two parties have worked in close collaboration throughout the different stages of RLDP preparation i.e. Strategic Options, Preferred Strategy and the Deposit RLDP. More specifically, from the outset of the earlier engagement stages of Plan preparation, the Council set up a RLDP Housing Population and Health Working Group, between BCUHB and CCBC.

The public's objections have focussed on specific housing allocations in the Plan, but it is important to stress that the Plan as a whole will provide for housing growth over the whole County over the 15 year Plan period. Conwy's proposed growth option indicates a requirement for about 3,600 new dwellings over the Plan period or an average of about 240 each year (3,700 new dwellings including the National Park).

BCUHB statutory duties and involvement in the planning process

The Deposit RLDP will be accompanied by Background Paper (BP) 44: 'Housing and Health Impact' jointly prepared by CCBC and the Health Board who provided comments on health care provision in the County including their future strategy for meeting health care needs in a growing population.

A large number of objections to some of the Deposit RLDP housing allocations across the County have been received which express concern about the provision of health care and the impact of new development. Common concerns include a lack of capacity and staffing of local surgeries, inability to register with a surgery, difficulty getting an appointment and length of time waiting for non-urgent appointments. However frustrating or distressing, these issues are not specific to Conwy County and are being experienced widely across Wales.

The planning system can assist with the provision of health facilities such as new buildings or the provision of land for new buildings in the form of planning obligations

and allocation/safeguarding of land but cannot assist with the funding of staff or any recruitment issues.

It is important to note that BCUHB have made representations at earlier Plan stages, but there is no formal objection either to the level of growth to be provided over the Plan period, nor to particular allocations. It is the Council's understanding that this was an intended position given the degree of collaboration that has taken place, and the Health Board's overriding approach and strategy for future health care provision. The Health Board have provided an updated summary position below on how they intend to address the growth provision in the RLDP and its implications both for existing communities and the future access to health care.

Addressing Concerns about Health Care Capacity – BCUHB Position

The Health Board has a continual priority of ensuring health care capacity meets the demands from its population. Conwy, in common with the rest of Wales has a number of population pressures:

- Growth – through expanding households, residential developments and economic growth
- Ageing population structure – our population is living longer but there is a challenge between living longer and living longer in good health. The County of Conwy will have the second oldest population of any county in Wales.
- Number of residents living with long term conditions.

Currently, across Conwy there are a number of challenges that the Health Board aim to address in order to mitigate these pressures:

- Several GP premises in Conwy are currently working at or near their patient list size with insufficient capacity within existing premises to accommodate the level and distribution of expected population growth. The Health Board will seek to ensure that sites for new facilities reflect the spatial distribution of need, the importance of accessibility and create opportunities for different service providers to share facilities.
- Whilst, in some practices there is little scope for expansion within existing GP premises there are others that have some potential for growth. Over the past few years, within Conwy County, new primary care facilities have been developed, e.g, West End Surgery, Colwyn Bay. New schemes are being considered, most notably in Conwy and Llandudno Junction, which will be subject to funding and suitable locations being secured.
- Where funded by public capital allocation the capital cost of Primary Care Facilities is subject to a business case which forms part of the Health Board's capital submission to the Welsh Government under the programme for health service improvement. The capital programme is subject to limitation according to availability and prioritisation across the all Wales programme.

In mitigating the continual demand and the growth in population levels the Health Board continues to implement the strategic vision outlined in 'A Healthier Wales: Our Plan for Health and Social Care' (updated November 2022). Specifically this includes:

- Development of cluster based services creating economies of scale supporting the delivery enhanced services
- A focus on health and wellbeing – delivered in partnership with local authority and third sector colleagues aimed at reducing the 'burden' of health through supporting residents to lead healthier lifestyles
- Evidence based medicine – delivered through more efficient use of resources. Increased efficacy, higher quality and better resource application help expand capacity in health systems.
- Use of remote care and technology – even before Covid–19 the Health Board was working towards a greater dialogue with the public via telephony and remote based consultations. These include e-triage where patients can outline their needs using online software, phone first and 111 programmes that look to triage and divert to the right part of the health system reducing unnecessary footfall.
- Estates footprint - where possible the Health Board works with GP practices on the development of new premises and the improvement of existing premises. Through clusters it encourages practices to work together (including taking the opportunity to co-locate with other practices and other primary care services). This will support practices to offer an extended and more flexible range of services to their patients.
- Look to increase capacity via a community asset based approach alongside a review of surgery catchment areas and patient lists in agreement with respective practices. BCUHB will work closely with the local authority, public bodies and communities to utilise public building assets and increase health capacity provision and services.
- CCBC, in conjunction with BCUHB, will seek to secure Section 106 financial contributions where appropriate and subject to the CIL Regulations, to support the provision of health care accommodation requirements.

Conclusion

Working collectively with all key stakeholders, the implementation of some or all of the mitigation measures outline above will put in place a strategic approach to tackling the current capacity issues experienced within communities.

Additionally, BCUHB acknowledge and agree that new RLDP policies will not allocate specific sites but will be generally supportive of new build health facilities on suitably located sites, changes of use to provide health service

provision and improvements to existing health care and community facilities where required.