

## Appendix G: Consultee Responses

### Councillor Winn 24.09.21

This application calls for unnecessary changes to the junction of Richmond and Tring road and erosion of green space public amenity land on Richmond road widely used by residents. This change with the eastern link road being built as part of this application is unnecessary. I would argue that these changes which would have a detrimental effect on residents in both Broughton and Bedgrove should be at the very least stalled until we see the effect of the Eastern link road to see if they are indeed necessary.

I would also argue that the Eastern link road that would go through this development should be dual rather than single carriageway considering the volume of traffic this road would take with Aylesbury being shown to be the 6th most congested place in UK. Both the SEARL road going through AGT Site 1 and the Southern section of the Hampden fields development are going to be dual carriageway I think it is completely perverse that we would look to then build a site that will be larger than AGT 1 and slightly smaller than Hampden fields in Woodlands with a single carriageway. The logic of this is not explainable.

Leaving a verge for later fitting of a dual carriageway is a much more expensive option than building a dual carriageway at this stage especially when traffic is so heavy at the moment is not logical.

Consideration also needs to be given to possible developer funding for bridging the gap in the link road or Aylesbury Orbital road between Bierton and Watermead. This is an overlooked part of the Orbital road scheme that needs to be addressed.

Also I would add in the gap in public transport provision which this further development will exacerbate in that we do not yet have the go ahead for the Aylesbury spur of East West rail.

Worries over medical provision in the area both via GP practices and hospital provision is also a big concern that this application needs to address. I am pleased that on these large developments after waiting a long time and even pushing them to put in comments our health services are finally doing so on these large applications.

I would as a local member like to speak at the Planning committee on these matters.

## **PARISH COUNCILS**

### **Aston Clinton Parish – 23.11.2021 & 15.12.2021**

Support re-routing of the Link Road as proposed by Hampden Fields Action Group. Traffic Mitigation Zones 1 & 2 must be implemented at the same time as the ELR.

### **Aston Clinton Parish – 23.11.2021**

Support re-routing of the Link Road as proposed by Hampden Fields Action Group. Traffic Mitigation Zones 1 & 2 Must be implemented at the same time as the ELR.

### **Aston Clinton Parish Council 30.12.2020**

While Aston Clinton Parish Council does not object to this application as accepted in the Aston Clinton Neighbourhood Plan, the parish council agrees with it's neighbouring parish council that it is imperative to complete the road first to mitigate the impact on increased traffic on the surrounding villages and current residents and has serious concerns about the impact that the ELR would have without the SLR particularly for Aston Clinton.

The Parish Council would like to see conditions placed on the earliest trigger for the S106 contributions to the Aston Clinton Traffic Calming measures as would expect to see an immediate impact from any development work for this site.

There are also concerns with regards to the lack of secondary education in the overall plans across the two proposed developments of Woodlands and Hampden Fields, with only primary schools proposed.

The Parish Council would like the opportunity to speak when the application is considered by Bucks Councils committee and be consulted with regards to any S106 agreements in relation to Aston Clinton.

### **Aston Clinton Parish Council 25.05.2017**

Aston Clinton Parish Council objects to this application on the following grounds:

The increase in traffic from this development would cause severe congestion not only into Aylesbury but also throughout the surrounding villages of which Aston Clinton is the closest. We are already seeing an increase in rat running through the village particularly at peak times.

There are too many unanswered questions in the traffic proposals with the symbiotic relationship with Hampden Fields and Woodlands and the lack of any concrete plans for the A418 link gives great cause for concern that the assumptions concerning the ring road will not hold up without this vital of piece of the North-East link.

Sustainability under the NPPF Core planning principle (4), paras 34-38 requires improved transport links for a development of this size. The nearest railway stations are Wendover and Stoke Mandeville which have no direct bus links and therefore all people using these stations will inevitably drive to them. Tring which is the next closest station also has no

direct bus links along with the fact that it already suffers from a full car park at commuter times and therefore cannot be seen as a viable alternative.

There is no provision of either a doctors surgery or a primary school which will further congest the roads at peak times as residents from the development drive to existing surgeries and schools in the locality. The local schools and surgeries are also already overburdened.

There is already an oversupply of commercial space within Aylesbury. This is evidenced by the large amount of vacant commercial property advertised within the area. What evidence has been produced to illustrate the take up of the proposed properties? Especially in this geographic location there is already planning permission for large commercial units alongside the A41 and the surrounding Arla site.

Concerns over the loss of the flood plain which will result in increased strain on the existing network of streams and waterways within the area. Many of these have already seen their flood areas built upon.

However, if this application were to be approved we would expect to see the following: Provision of a primary school and a doctors surgery to relieve the already overburdened facilities within the village.

Aston Clinton traffic mitigation measures implementation up to and including at least zone 3 and to be in place prior to commencement of the first occupation of the housing element of the development. (in the current plans/proposals only zone 1 is featured which is insufficient mitigation for such a large development.)

The maintenance of our green buffer from the settlement boundary with the Aston Clinton Neighbourhood plan and the A41 becomes of paramount importance. As also proposed in the emerging Aylesbury Vale plan. Conformity to the British Standard BS42020, Biodiversity code of practice for planning and development.

If this application is considered by Committee, the parish Council will send a representative to speak.

#### **Aston Clinton Parish Council 29.04.206**

This is the initial response from Aston Clinton Parish Council. A more detailed response is to follow. For such a major and complex application as this, with the potential for a very significant impact on the Village of Aston Clinton and its residents, we feel it important and appropriate to take the time and due care required for providing a more detailed response. We are also a significant way into completing a Neighbourhood plan for Aston Clinton which will set out a framework for sustainable development for Aston Clinton and will include a clear strategy for housing and economic development. Without this we do not believe that a development of this size should be considered. ACPC objects to this application on the following grounds: The proposal conflicts with AVDC policy RA2 on loss of open gaps and consolidation of settlements and would result in coalescence with Aylesbury and Aston Clinton. We believe that the development would have a severe impact on traffic stress in and around the area and do not believe that there are sufficient plans in place to mitigate

this, particularly with the potential additional impact of the adjacent Hampden Fields development if it were to go ahead. A development on this scale and proximity does not fit with the village of Aston Clintons current infrastructure. The provision of school places is fundamental as the local primary and secondary schools are nearing capacity. There is only a provision for and not of a doctors surgery which needs to be addressed. If this application is considered by Committee, the parish Council will send a representative to speak.

#### **Aylesbury Town Council - 23.12.2021**

Aylesbury Town Council stand by their comment made on 11 November 2021 and continue to have the mentioned concerns. Aylesbury Town Council fully supports comments from the Environmental Agency and ask that these concerns be addressed before moving any further forward with this application. Aylesbury Town Council also wish to develop their comment regarding cycle ways by asking that the cycle paths should be part of a wider network that links all surrounding villages and amenities together.

#### **Aylesbury Town Council - 11.11.2021**

Aylesbury Town Council notes that the principle of this development is in accordance with the now adopted VALP but continues to have a number of concerns about the current proposals.

#### **Flooding**

Concerns for the impact of flooding on residential development particularly surrounding the canal. This revised application seems to reduce the level of flood mitigation which does not seem wise. ATC would like Buckinghamshire Council to ensure that there is significant any flood mitigation within the plan to take account of the increased frequency of flooding observed nationally in recent years and illustrated locally by recent flooding events within and around the town which have been at a much greater frequency than originally forecast.

#### **Transport networks & cycle routes**

Aylesbury Town Council support the need for the commercial units and link road being built before housing starts.

Aylesbury Town Council note the intention to have a widened single carriageway as the initial deliverable to allow for future dualling. Aylesbury Town Council are of the opinion that such a road encourages anti-social driving, as seen on Stocklake and the Wendover Bypass where roads of similar layout have been implemented. The Council would therefore like to see a dual carriageway road from the start and would question, if not done initially, would a dualling ever be completed? If the Committee is minded to approve the plan in its current design, then Aylesbury Town Council would like to see provision for wider cycle ways to improve Active Travel and to reduce the aforementioned anti-social driving.

Aylesbury Town Council feel it is extremely important for personal safety and safe travel that there is a cycle route from the development to Kingsbrook School in other words, a route that crosses the Canal utilising the route of the Link Road. Further, the plan for the cycle route of crossing the A41 is not fit for purpose. Asking a pedestrian/cyclist to cross a 4 lane busy road at surface level is not conducive to traffic flow or safety. An alternative safe and accessible route needs to be delivered, and Aylesbury Town Council would like to know whether an underpass has been considered.

Aylesbury Town Council would ask that the remaining section of the canal towpath is repaired properly and made wider, where possible, to ensure safe and accessible travel for pedestrians and cyclists. This a key route from Town to the employment units. The current Bus travel plan needs more consideration. One bus every 60 minutes especially through rush hour and not linking with Stoke Mandeville Train Station is not acceptable. The Council understands that the service will increase in frequency with time but it is not reasonable to expect people commuting to work to use a once an hour service. Similarly, travel to London is cheaper from Stoke Mandeville Station than Aylesbury and that will be the preferred station for the majority of residents. They will not be encouraged to use a bus to the station unless it goes to Stoke Mandeville.

The proposed changes to the Richmond Road junction is of great concern and Aylesbury Town Council support comments made by the local residents. In particular, we believe that the new junction will be dangerous for cyclists and will increase rat running along Broughton Avenue past the two Broughton Primary Schools

#### Infrastructure

It is imperative that the Primary school is completed and opened before the majority of houses are built. There are currently almost no spare places in any Primary school in Aylesbury or the neighbouring Parishes. If this school is not available to the residents of this development then there will be significant pressure on place allocation.

Local NHS provision, in particular doctors, surgeries, is already oversubscribed. There appear to be no plans in place to provide this amenity for future residents that is not acceptable

This development dates back to 2016 and is now out of step with current thinking of modal working, especially working from home and environmental mitigation in order for Buckinghamshire Council to meet its own targets for decarbonisation. There appears to be a lack of revision to ensure the plans meet current and future requirements. In particular Fibre Optic access to telecommunications, sustainability and space for home working need to be in initial planning. In addition Aylesbury Town Council would like to see more reference to sustainable methods of heating and powering homes and vehicles.

The Parks and Recreation comment regarding the lack of playing pitch strategy is supported by Aylesbury Town Council. Aylesbury Town Council would like to know when this strategy will be adopted as it has a material impact on the viability of the Sports provision on the site.

#### **Aylesbury Town Council 14.09.2021**

Aylesbury Town Council uphold their previous comment dated December 2020. Aylesbury Town

Council agree with both Weston Turville Parish Council and Kingsbrook Parish Council that it is

imperative to complete the road first to mitigate the impact on increased traffic on the surrounding villages and current residents. Aylesbury Town Council would welcome

consultation for design of the development and landscaping to ensure a future proof, sustainable development. Aylesbury Town Council are pleased and encouraged that the developers have worked closely with the Canal Trust and hope that this may continue to deliver further work along the canal.

Aylesbury Town Council support the need for affordable housing and ask that the minimum of 30% must be upheld. Aylesbury Town Council would also like to see provision of social Housing owned properties managed by the housing association. Land should be reserved for Health Care facilities and feel that large scale planning applications should always make this a consideration.

Aylesbury Town Council would want to see the completion of the secondary school be in line with

the development of houses to ensure places are available when needed.

Aylesbury Town Council would like the opportunity to be consulted in regard to S106 agreements

in relation to Aylesbury Town.

#### **Aylesbury Town Council 24.12.2020**

Aylesbury Town Council agree with both Weston Turville Parish Council and Kingsbrook Parish Council that it is imperative to complete the road first to mitigate the impact on increased traffic on the surrounding villages and current residents. Aylesbury Town Council would welcome consultation for design of the development and landscaping to ensure a future proof, sustainable development. Aylesbury Town Council are pleased and encouraged that the developers have worked closely with the Canal Trust and hope that this may continue to deliver further work along the canal.

#### **Aylesbury Town Council 21.04.2016**

Aylesbury Town Council OBJECT to this application. Although the committee feels there is much to recommend this application, in particular the focus on employment land and employment growth, also the potential for a different style of living accommodation as well as the potential sporting facilities, we do object on the following grounds. ROADS The committee feel that by adding the missing link road into the potential Hampden Fields development to the south and the current Kingsbrook development to the north is welcomed, but we wish to see the whole link road dual carriageway from the start, this would ensure that the increase in road volume is sufficient to meet current needs, reducing congestion and pollution within Aylesbury as well as coping with future vehicle growth in the area. EDUCATION The set aside of up to 2ha for primary education is welcomed, but the committee have to be certain that the required secondary education facilities will materialise, without a new secondary school to serve Woodland, Hampden Fields and Kingsbrook our current schools will be put under increasing pressure, this outcome is unacceptable. The committee urge all three developers and Bucks CC to work together to provide the secondary

#### **Bierton Parish Council 09.12.2021**

The Parish Council wish to support the comments made by Aylesbury Town Council.

#### **Bierton Parish Council 21.09.2021**

At its meeting on 20th September it was resolved that the Parish Council have No objections however would like to comment that the southern ELR is built as soon as possible, preferably prior to any housing.

**Bierton Parish Council 16.12.2020**

The Parish Council welcome the completion of the Eastern Link Road through the Kingsbrook Village to the A41 Woodlands Roundabout and would suggest this be completed and in use before construction begins on houses, and other facilities. It has always been recognised that this should be a dual carriageway and that the Northern section should also be made dual as part of this planned development.

**Bierton Parish Council 5.05.2016**

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# Bierton with Broughton Parish Council

Clerk: Margret Smith

10 Lammas Road, Cheddington, Leighton Buzzard, Beds. LU7 0RY

AVDC Planning Department  
Gateway  
Aylesbury

5 May 2016

**For the Attention of the Case Officer**

**APPLICATION 16/01040 – WOODLANDS**

Although Bierton with Broughton Parish Council (BwB PC) considers that the development could bring some significant benefits, **BwB PC OBJECTS** for the following reasons:

**ROADS**

Provision of an Eastern Link Road (South) [ELR(S)] to complete the connection between A418 East of Bierton to A418 is to be commended. However, BwB PC is concerned that insufficient attention has been given to the cumulative effects of the traffic generated by this development, particularly in terms of the capacity of the Stocklake Link Road [SLR] being provided as part of the Kingsbrook development (Land East of Aylesbury, App Ref 10/02649 and associated Reserved Matters).

The Highways Authority Transport Plan for, and the design philosophy for the design of, the SLR assumes that the road is a "strategic link in the traffic management system for Aylesbury". However, the SLR is a "developer-led" project designed **only** to carry traffic diverted from passing through Bierton (ie all traffic using A418 both east- and west-bound) as well as the traffic generated by the development itself (which includes a significant industrial/commercial area).

The Woodlands development will generate its own traffic; to comply with the HA's intentions, all north-/northwest-bound traffic will use ELR(S) and SLR. Further, HA's intentions, not least to relieve congestion on Tring Road, is that all traffic using A41(S) will also use ELR(S) and (for all north-/northwest-bound traffic) SLR. **The SLR has not been designed for this volume of traffic.**

Looking ahead to the potential Hampden Fields development, traffic from the south-west using A413 would join the A41 at Woodlands Roundabout; north/northwest-bound traffic will also be expected to use ELR(S) and SLR. **This would further exceed the design assumptions for SLR.**

Thus, if both Woodlands and Hampden Fields developments are approved, SLR will carry ALL TRAFFIC:

To/from A41 (S)

To/from A418 except that wishing to use ELR(S)

To/from A413 via Hampden Fields except that wishing to use A41(S).

At various meetings of AVDC's Strategic Development Management Committee, it has been:

Sated that land has been safeguarded to allow SLR to be widened if it is found necessary;

Stated that any such widening would have to be paid for by those developers responsible for generating this increased need;

Tacitly agreed by BCC that SLR would need widening if Woodlands were approved.



# Bierton with Broughton Parish Council

Clerk: Margret Smith

10 Lammas Road, Cheddington, Leighton Buzzard, Beds. LU7 0RY

It should be noted that the Developers of Hampden Fields consider it necessary to design the A413/A41 Link to be a dual carriageway. This lends strength to the argument ELR(S) (and indeed (ELR(N)) should also be dual-carriageway, and confirms the need that the capacity of SLR be examined urgently.

Albeit that widening of SLR may be theoretically possible after it has been completed (although that is highly questionable in practice), it would be horrendously expensive and would cause unacceptable disruption; it seems unlikely that such work would be approved for many, many years when other development activities affecting the Strategic Highways Network are taken in to account (including the implications of the HS2 construction, East-West Rail, and other developments foreshadowed in the emerging Vale of Aylesbury Local Plan). Work has begun on SLR and it would seem sensible (economically, practically and politically) **to take action now** to "future-proof" the road for at least the major developments that are now being considered (ie Woodlands and Hampden Fields). It seems appropriate for both these developments to make off-site contributions, either through ALUTS or S106 (or similar agreements, to fund such work.

Under the current highway design and configuration, this does not represent sustainable development.

BwB PC therefore recommends that this Application is REJECTED on the grounds that the adverse traffic implications significantly outweigh any benefits unless and until the capacity of the Stocklake Link Road is increased.

## EDUCATION

This Application identifies up to 2 ha for primary education, but there is no mention of provision for Secondary Education. BwB PC is concerned that the cumulative effect of this development with others in the Aylesbury area that are either already Approved or are under consideration (eg Kingsbrook and Hampden Fields respectively, neither of which include a secondary school) will put unacceptable pressure on existing Secondary education facilities. This is a fundamental consideration in assessing "sustainability" under NPPF criteria.

## SOCIAL HOUSING

BwB PC would like to see greater clarity of the Developer's intentions towards Social Housing on this site, as it would be concerned if the intention were to seek to meet its obligations through off-site provision.

M Smith  
Clerk

**Broughton Hamlet Parish Meeting. 06.01.22**

I did not receive notification of the amendments to these plans and I feel I should have done as the contact for Broughton Hamlet Parish Meeting. Therefore I would request that you add my comments to those already received, despite the late submission.

I would like to add that I support the comments made by my neighbouring parish councils, i.e. Kingsbrook, Bierton and Aylesbury Town Council.

It is imperative the Southern section of the ELR is constructed and in use before any houses etc are built. The hamlet of Broughton is constantly affected by the number of vehicles using it as a shortcut to the A418 from A41.

**Buckland Parish 14.09.2021**

Buckland Parish Council object to this application on the following points:-

1. The lack of infrastructure to cater for the additional population and workers
2. The land is a designated flood plain.

**Kingsbrook Parish Council 24.12.2021**

Kingsbrook Parish Council support the link road being built before housing starts. There are increasing traffic issues along Broughton Lane as this is used as a shortcut through Aylesbury as well as being one of the key routes out of Kingsbrook. If the ELR is not completed the Richmond Road proposal will only increase the current problems on Broughton Lane.

Kingsbrook Parish Council would ask that the towpath from the Canal Basin is improved to Woodlands inline with the improvements that were made from the Canal Basin into Aylesbury Town Center together with improvements to crossing the canal for pedestrians and cyclists. We note the provision for a primary school however this is not matched by any provision for a secondary school. If a secondary school is not included, it will put significant pressure on places at Kingsbrook Secondary School which will have two primary school to serve in the future. Current healthcare provisions are struggling to cope with existing patient numbers. With the growth of Kingsbrook and lack of healthcare provision being added, despite S106 obligations, the Parish Council feels that another development without healthcare provisions will make the situation untenable.

**Weston Turville Parish Council 13.12.21**

Weston Turville Parish Council objection to this application remains. The objection is repeated below for ease of reference: The Parish Council has previously objected to this application and remains opposed to development in this area which is a flood plain. The Council is concerned that the mitigation measures proposed will not be sufficient to prevent flooding. The development will lead to the coalescence of Aylesbury, Weston Turville, Broughton and Aston Clinton. The Parish Council believes that the road infrastructure cannot cope with the additional burden that a development of this size would put on the area, even with the proposed new roads. There needs to be better connectivity with Aylesbury town centre, not just a series of link roads around it. The Council has profound concerns about utilities supplies and whether the current gas, electric and water networks can cope with the additional demand from this site. Weston Turville regularly suffers power cuts and the Parish Council is concerned that the additional pressure of the new

development will compound this issue. It will have a detrimental impact on residents of Aston Clinton Road, resulting in loss of amenity, privacy, noise and light pollution. On the A41 Aston Clinton Road, there appears to only be provision for a cycle path in one direction along this road. The Parish Council recognises that the Aylesbury Garden Town plans relies heavily on this development being approved and should Bucks Council approve it, the Parish Council would like to see further mitigation to protect the current residents of Weston Turville. Eastern Link road to be built first to take traffic, particularly construction traffic, away from existing residential areas Construction plan to include routes for construction traffic that avoids Weston Turville village Weight restriction for Main Street, Weston Turville New, fit for purpose cycle routes linking Aylesbury, Woodlands, Weston Turville and Wendover Improved bus service to include both ends of the village currently only Worlds End Lane and Marroway are served by buses. The Parish Council will send a representative to speak when the application is considered by Bucks Councils committee and would welcome an opportunity to be consulted when the s106 agreement is drawn up.

#### **Weston Turville Parish Council 21.12.2020**

The Parish Council has previously objected to this application and remains opposed to development in this area which is a flood plain. The Council is concerned that the mitigation measures proposed will not be sufficient to prevent flooding. The development will lead to the coalescence of Aylesbury, Weston Turville, Broughton and Aston Clinton The Parish Council believes that the road infrastructure cannot cope with the additional burden that a development of this size would put on the area, even with the proposed new roads. There needs to be better connectivity with Aylesbury town centre, not just a series of link roads around it. The Council has profound concerns about utilities supplies and whether the current gas, electric and water networks can cope with the additional demand from this site. Weston Turville regularly suffers power cuts and the Parish Council is concerned that the additional pressure of the new development will compound this issue. It will have a detrimental impact on residents of Aston Clinton Road, resulting in loss of amenity, privacy, noise and light pollution. On the A41 Aston Clinton Road, there appears to only be provision for a cycle path in one direction along this road

The Parish Council recognises that the Aylesbury Garden Town plans relies heavily on this development being approved and should Bucks Council approve it, the Parish Council would like to see further mitigation to protect the current residents of Weston Turville. Eastern Link road to be built first to take traffic, particularly construction traffic, away from existing residential areas Construction plan to include routes for construction traffic that avoids Weston Turville village Weight restriction for Main Street, Weston Turville New, fit for purpose cycle routes linking Aylesbury, Woodlands, Weston Turville and Wendover Improved bus service to include both ends of the village currently only Worlds End Lane and Marroway are served by buses. The Parish Council will send a representative to speak when the application is considered by Bucks Councils committee and would welcome an opportunity to be consulted when the s106 agreement is drawn up.

#### **Weston Turville Parish Council 08.05.217**

Whilst the Parish Council welcomed the traffic calming scheme proposed for Weston Turville village, it maintains its objection to this application. The Parish Council will send a representative to speak when the application is considered by AVDC's committee.

## **Weston Turville Parish Council 03.05.2016**

Weston Turville Parish Council OPPOSES this application for the following reasons: 1.

Transport - the traffic modelling appears to rely on new roads being built across Hampden Fields and from the A413 to A4010, however there is currently no commitment or approval for these roads to be built. The additional houses and commercial buildings proposed would therefore put unacceptable additional strain on already congested routes around Aylesbury.

2. A large part of the site is a flood plain. 3. The new development will put additional pressure on existing overstretched facilities such as schools and healthcare. 4. Impact of the development on residents of Aston Clinton Road (loss of amenity, privacy, noise and light pollution). 5. Coalescence of Aylesbury, Weston Turville and Aston Clinton. If the application is considered by Committee, the Parish Council will send a representative to speak.

## **Consultation Response (Summaries)**

### **Affordable Housing**

The applicant will need to submit details of the Affordable Housing Scheme at each residential (or sub residential) phase of the development, which shall reflect the percentage and tenure split of the affordable housing applicable at that time. It will need to illustrate the amount, location, distribution, tenures, sizes and mix of affordable units that will be supplied taking in to account the points mentioned in the consultation response letter.

Affordable Housing Provision: Schemes of 25 units or over (or 1ha or more) are currently expected to have 30% affordable housing, unless a Neighbourhood Plan indicates a greater percentage, or the level of affordable housing is deemed unviable.

The applicant has advised that 30% affordable housing is unviable. The Financial Viability Appraisal, submitted in support of the application, has been independently assessed by the District Valuer Service. A baseline 20% affordable housing provision has been agreed with a tenure split of 60% affordable rent and 40% shared ownership. This will however, be subject to regular reviews whereby a mechanism will be built into the s106 to enable a higher provision of affordable housing (up to a maximum of 30%), and an alternative tenure split of 75% affordable rent and 25% shared ownership, if the scheme viability improves.

Affordable dwellings should be reflective of the overall housing mix whilst also taking in to account the local needs of the district. There is currently a greater need for 3 bed 5 and 6 person and 2 bed 4 person houses, slightly less for 1 bed 2 person and 4 bed 7 to 8 person houses. Houses are preferred over flats. We find that 2 and 3 bed houses are preferred for shared ownership.

There is a need for more affordable units to be accessible and adaptable recommending that they meet Category 2 (accessible and adaptable) of Approved document M of the Building Regulations 2010 with a proportion of those (15%) to meet category 3 (wheelchair user) of the same document. We would therefore ask that this need be reflected where possible. We would be keen to see unit sizes broadly in line with the Nationally Described

Space Standards. In terms of overall design details, build quality and materials the affordable units should be indistinguishable from market housing.

Affordable housing should be well distributed throughout the whole site. Consideration should also be given to the types of property the site will abut as placing new affordable housing adjacent to that on another site or phase could be considered clustering. In any event clusters must not exceed 15 houses or 18 if including flats. A road or garden boundary does not separate clusters.

No more than 60% of the private units on a residential or sub-residential phase are to be occupied until all the affordable units on that residential or sub-residential phase have been completed and transferred to a Registered Provider. The Council works in partnership with registered providers in the district and can supply details of these to support the delivery of the affordable homes.

### **Archaeological Service**

Archaeological evaluation has taken place on the site (Simmonds, C. 2016. Archaeological Trial Trenching: Aylesbury Woodlands, Buckinghamshire. Phase 1. August to October 2016. Issue 3. MOLA Northampton). The Phase 1 evaluation has confirmed that the proposed development site contains a number of archaeological sites relating to late prehistoric and Roman settlement. This is not unexpected given the context of the development area and the known archaeological sites in the vicinity.

The Phase 1 archaeological trial trenching carried out by MOLA has successfully characterised and assessed the archaeological remains within the majority of the development area. A total of 146 trenches were excavated, with archaeological remains present in 106 of the trenches. The trial trenching confirmed the results of the geophysical survey with regards to Sites B (Roman enclosures and burial), C (Bronze Age pit and Roman enclosures), D (Roman settlement) and F (Iron Age enclosure). Following the abandonment of the Roman settlement and enclosures, the land was under cultivation from at least the medieval period onwards. Site A was not investigated in the Phase 1 works but will form part of the agreed Phase 2 evaluation.

The evaluation identified a number of archaeological sites of regional importance, ranging in date from the late Bronze Age to the 4th century AD. Development on this site could damage the significance of the heritage assets identified through the evaluation. Accordingly, we recommend a number of conditions to secure further evaluation and appropriate mitigation of the archaeological remains within the development area in conformity with NPPF.

### **Clinical Commissioning Group (CCG): February 2021**

CCG provided financial calculation for contribution towards the health facility to mitigate the impact of the new proposed development ref 16/01040/AOP. A contribution of £783,037.34 is requested based on 16.67sqm per person requiring 149.97m<sup>2</sup> (NIA) , 164.97m<sup>2</sup> (GIA) additional floor space required to support new population.

The GP surgeries are already full in the area and therefore this request is required on commencement of the development.

In relation to primary care, Buckinghamshire Healthcare Trust (BHT) commented in relation to Hampden Fields which has been submitted in relation to Woodlands that the S106 obligation to mitigate the primary care impact is not deliverable for the following reasons:

- The land offer is open to the private sector in addition to the NHS
- It will be impossible for the CCG to take over the land as it is in a fixed place, not big enough and the NHS has very limited financial resources. The contribution is limited to £1.5m. This would not mitigate sufficiently the impact.
- The current Section 106 offer does not align with the Buckinghamshire health and care system's strategic vision for the delivery of health and care.
- There are also significant concerns relating to the CCG's ability to commission and providers to operate services from a site at this small scale
- There are also concerns around the viability of the proposed primary healthcare facility when considered in the context of the wider Westongrove Surgery contractual boundary.

### **Clinical Commissioning Group (CCG): November 2020**

BCCG commissioned a Strategic Outline Case (SOC) from Turner Townsend (July 2020) to identify a viable way of addressing the future constraints of the primary care estate in South Aylesbury. This study has identified that delivery of a multi-specialty Primary Care Facility would address the significant increase in population expected over the next 15 years due to various local housing developments, whilst simultaneously improving the robustness of the incoming Primary Care Network (PCN).

A detailed study of the existing services, current and future patient numbers and planned service delivery through the PCN in the community has established that a significantly larger primary care estate is needed to enable adequate healthcare to be offered to local residents. Having reviewed the existing estate and the need to provide up to 1,500sqm more primary care space in South Aylesbury, it has been confirmed that none of the existing surgery sites in Bedgrove, Wendover and Aston Clinton, are suitable, or able to be expanded / modified to meet the current and future needs of patients and staff.

The SOC has confirmed that the existing Primary Care health estate is not able to provide the future residents of south Aylesbury with sufficient clinical space to fulfil their healthcare needs. Left unresolved between 12k and 17k patients would have inadequate access to healthcare services. Financially this will cost the health service around £720k per annum as patients seek to fulfil their healthcare needs through drop-in centre and A&E attendances. Whilst offering poor value for money to the health service, individuals in the long-term will suffer a poorer quality of life without access to the coordinated care that can be provided through GP led care.

A number of estate options were developed that ranged from providing the minimum space needed for the smallest number of properties that might be built, through to an estate solution that aligned with the full aspirations of the local plan and the potential of the PCN able to commission a range of services and provide access within a community setting.

The preferred way forward is clearly that which maximise the healthcare benefits of patients whilst complying with the budgetary constraints of the CCG. For this reasons Option D (the largest building) has been identified. It is able to accommodate the medium and long-term GMS needs of the population whilst also ensure the wider PCN has the space to deliver a full range of services within the community. Although currently more costly than the BAU position, sensitivity analysis and the costs savings illustrated in Option F, suggest that with detailed design and competitive tendering the proposals overall project budget can be reduced. Implementing 40% of the cost saving measures identified in this document will therefore allow Option D to outperform the BAU position, making this the preferred way forward for the project.

The accompanying site selection process has identified three viable and deliverable sites for further exploration during the OBC. The highest scoring site – Stoke Mandeville Hospital has access to sufficient space already within public sector ownership. Furthermore the Healthcare Trust supports the principals of introducing a primary care element onto the hospital estate. Its primary detractor is its distance from future housing growth areas.

The housing masterplans have identified small GP surgeries, however these no longer align with the real estate goals of the NHS as they prevent the provision of healthcare at scale. The masterplan also identifies employment land which would be well placed geographically to serve the local community. Exact plot sizes and locations are still being developed, however the preferred building option has ready demonstrated that the proposal is viable even if land is bought at open market value. The housing masterplans will continue to develop over time, with specific plots being identified. It will be essential that the OBC reviews the site selection process and assess if Stoke Mandeville remains the preferred site once this additional information is provided.

As a consequence of these factors, the preferred way forward will be for the Westongrove Partnership to exit the Aston Clinton site and secure a lease at a new purpose built facility, big enough to accommodate all growth identified in the Local Plan as well as expected through the PCN. Although the preferred site is currently at Stoke Mandeville, this should remain under reviewed during the OBC process.

The preferred way forward will ensure that the residents of south Aylesbury have access to a range of primary care services within a community setting whilst offer the practice and the CCG the ability to fulfil these needs at scale and in an affordable way that minimise the estate costs and maximise both organisations ability to commit funding to frontline services. The proposal will also avoid the need to expand other buildings within the PCN in the foreseeable future.

### *Next Steps*

The SOC has identified a preferred way forward which will now need to be ratified by the Westongrove Practice, CCG. The CCG will also need to update the ICS on this proposal as well as relevant bodies within the NHS. Once adopted it will be possible to move onto the OBC.

The OBC will explore in further detail those requirements identified in the SOC by developing a design and using this detailed space assessment to refine

### **Clinical Commissioning Group (CCG): February 2019:**

It was identified by the CCG and understood by both developers, that the current Section 106 offers for primary healthcare provision are inadequate to deliver the national and local vision. Furthermore, there are significant concerns relating to the viability, operability, and sustainability of service delivery from the current proposals. Consequently, the CCG is concerned about the healthcare experience and population health outcomes for incoming patients.

#### *Allocations, tariffs and CCG funding arrangements*

The CCG is unable to purchase or own assets, and funding comes to the CCG based on a per-capita tariff of **existing** population to deliver primary care services. Whilst there are funding mechanisms available from NHS England to **expand** existing services (namely grants to facilitate extensions of operational practices), these are very limited and there is no provision within the CCG's powers to deliver new infrastructure as a result of forecast population growth on this scale.

With reference to the CIL Regulations 2010, the CCG acknowledges that developers across each of the four schemes will have varying abilities and requirements to contribute to the proposals. The CCG is also aware that any contribution from developers must pass the CIL regulation 'tests' (relatable, proportionate and necessary), and will continue to work closely with the LPA to demonstrate this in an acceptable format.

It is noted that both Hampden Fields and Woodlands have a resolution to grant permission, pending agreement of the Section 106 contributions. As set out above and previously, the current provision does not align with the requirements of the CCG; there are fundamental concerns relating to the operability and viability of multiple, smaller sites across the south Aylesbury area. The CCG has made considerable efforts to engage with the LPA throughout and held ongoing discussions with developers with a view to delivering the kind of health centre proposals of value. CCG are therefore disappointed to be in a position at this late stage where the current offer from Section 106 does not reflect CCG's need.

Nonetheless, CCG acknowledge the Council's desire and developers' commercial need to conclude these applications at the earliest opportunity to enable works to commence. CCG accept that to revisit the Section 106 discussions and planning applications at this stage would take time and result in significant delay and so, in the spirit of goodwill and collaboration, we will continue to work closely with these two developers to achieve our ambitions.

Initial discussions with both developers resulted in a willingness to consider a 'letter of intent', making a commitment to work closely with the CCG after planning has been granted. The expectation is that both developers sign the Section 106 agreements as they currently stand, with a view to obtaining a 'deed of variation' from the LPA to amend their



respective offers once a mutually agreed solution has been reached. It is likely that this will also require minor alterations to the planning permissions.

*Section 106 contributions for future expansion and consolidation of existing services*

In advance of the contributions from developers at AGT1 and RAF Halton being described, CCG would look to support the proposed health centre's continued expansion. It was agreed that the CCG and LPA will continue to work closely over the coming months to agree on this provision and clearly attribute any proportional contributions to future developers

**Clinical Commissioning Group (CCG): December 2018:**

There is no existing capacity amongst local GPs to accommodate the population growth from these developments. Whilst it is acknowledged that the current offer provides for the immediate residents of the Woodlands and Hampden Fields developments, it goes against the strategic estates vision set out by NHS England and leaves no flexibility for residents of ATG1. The proposal from AVDC adds pressure to the rent liabilities to the NHS whilst denying both existing and incoming residents the benefits of primary health care delivered at scale.

The funding for building or acquiring GP surgery premises does not normally come from CCGs directly, and traditionally will follow a model of private individuals and companies', which is in fact how almost all primary care services are delivered throughout England. GPs are awarded a contract to deliver primary health care services from the building(s) they occupy.

Currently on offer is a 600m2 site serving both sites. Whilst this would be sufficient to meet the required minimum, in theory, it would be delivered in a way that does not align with the future provision of primary health care. We would at this stage encourage further conversations with both developers and the Council to consider the potential of delivering a single, larger building to accommodate the **uplift** in population growth across both developments.

It may be appropriate to utilise the offer of land at Woodlands, for example, but have a shell and core building delivered by Taylor Wimpy on this site, which sits more centrally amongst emerging developments to the north and south, rather than within the Hampden Fields boundary. An appropriate architectural solution could provide the NHS with the opportunity to expand

Additional information has been provided at various stages including but not exclusively the above.

**Clinical Commissioning Group (CCG): October 2018:**

The proposed growth for the developments south of the A41 in Aylesbury will require a significant investment in general practice infrastructure. The CCG strategy for this area is to encourage one successful local practice, which already supports 30,000 patients, to take on all the new patients but it is unable to do so in existing landlocked premises. New investment will need to be found to support service transformation with particular emphasis on delivering healthcare 'at scale' and integrating general practice with acute, community, mental health and social care services to serve the population increase of circa 17,280 patients that the three approved developments and others in the pipeline will

generate. This will enable the single practice to operate as its own cluster and provide suitably resourced integrated teams. In order to achieve this objective, the CCG requests a pooling of the S106 contributions from each of the three approved developments to create one facility serving the patients of all three in the first instance, and which can then be extended with further contributions if other proposed developments are approved.

### **Development Houses Population Growth**

*Hampden Fields 3100 7440*

*Woodlands 1100 2640*

RAF Halton 1000 2400

Aston Clinton 1000 2400

*ATG1 Garden City 1000 2400*

Totals **7200 17,280 patients**

Assuming the 'pooling' arrangement of all three developments' (in italics) S106 monies was agreed, there would need to be a consolidation of some of the existing surgery sites within the practice in the area to the new facility. 7,000 patients currently registered with the existing practice would be assumed to move to the new location. On this basis, a patient population at the new facility will eventually be in the region of 25,000 patients (17,280 plus 7,000) which would require a building of 1,458m<sup>2</sup>.

It is acknowledged that at this point in time, only the three developments with current obligations will contribute i.e. 12,480 new patients (plus the 7,000 existing patients relocating funded by the practice). Any facility will need to be built smaller than 1,458m<sup>2</sup> but will require land and outline permission to grow as other new developments are supported and contributions are made by these new developers.

**S106 contributions** based on guidance from the NHSE space recommendations. **Woodlands 1100 homes @ 2.4 patients per home = 2640 increased population**

NHSE recommended space = 250sq Metres

Construction costs at £2500 per sq. metre + VAT = £750,000

10 Car Parking spaces @ £1100 per space = £13,200

### **Cost impact of Woodlands on general practice and integrated services: £763,200\***

*\*The CCG understands Woodlands has been subject to a viability assessment and as a conclusion all S106 contributions have been significantly reduced. As a result of this, the CCG still requires a financial contribution in place of a "land gift" and will continue to negotiate the level of this contribution, based on the financial viability and increase in land value, of the total development with AVDC.*

The CCG does not receive any capital funding from NHS England to develop infrastructure from growth and is unable to own or hold leases on behalf of general practice providers. Furthermore, the CCG will not be able to afford the increase in rent reimbursement required for the new infrastructure without significant S106 contributions. These S106 contributions, paid to the CCG, enable a reduction in rent reimbursements made by the CCG to the practice for the period of the lease.

To allow for sustainable innovation and integrated healthcare provision, the CCG does not support the building of individual small surgeries on each of the three approved

developments. We therefore continue to propose a pooling arrangement to establish a single healthcare facility on the Hampden Fields development.

**Clinical Commissioning Group (CCG): September 2017:**

General Practice is starting to work in large “clusters” serving a 30-50k patient list size. Working with larger populations will transform the delivery of primary care by developing multi-skilled teams offering new models of joined-up care and address difficulties in recruiting and training GPs. However, the clinical leadership, professional supervision and staff training required means that team members and the wider community team need to be co-located. There is also a need for groups of patients to have joint education/physical rehabilitation sessions. This multi-disciplinary approach offers economies of scale and requires more space than current footprints usually offer. CCG appreciate further conversations will be needed further down the line to understand who will enter into a lease with an end user and exact specification of the build based on the agreed shell and core provided by the Developers.

In summary, the delivery of this development will put significant pressure on the existing primary care infrastructure. However, Aylesbury Vale CCG welcomes the opportunity to work with AVDC, the Planners and local GPs to determine more detailed health infrastructure requirements as part of developing the S106.

**Berkshire Buckinghamshire Oxfordshire Wildlife Trust (BBOWT)**

Objection. Insufficient evidence that a net gain in biodiversity will result from the development, contrary to the NPPF; insufficient evidence that populations of wild bird species, including priority species, will be maintained; excessive loss of hedgerows.

**Buckinghamshire Healthcare NHS Trust 17.06.2021**

A number of appeal decisions were submitted which BHT consider confirm the Trust’s legal and policy compliant position supported by the Secretary of State and his Inspectors. Additional information has been provided at various stages including but not exclusively the following:

**Buckinghamshire Healthcare NHS Trust 11.02.2021**

CIL 122 Compliance Statement relates to both Hampden Fields and Woodlands  
The Trust submissions (1/4/2029) demonstrate that the Trust both community and acute services are operating at full capacity. The Trust (excluding COVID-19 health care) is already delivering services over the capacity. These two applications for up to 4,100 dwellings + 120 bed care home/extra care facilities will have a detrimental impact on the Trust’s ability to deliver services to the new population of the proposed development. The previous detailed submissions and subsequent updates set out the methodology that was used to calculate the contribution to mitigate the said impact. This was calculated on the actual cost of providing the healthcare services to the new population (based on the audited NHS reference costs of the Trust) and for which the Trust receives no funding.

The Council has now asked that the Trust's mitigation should go towards 'capital' rather than towards revenue. Whilst the Trust considers that the previous mitigation towards services was acceptable (also approved in the most recent appeal decision APP/P1805/W/20/3245111) the Trust is sympathetic to the request and has put forward a new mitigation calculation towards its three-year facilities programme.

The Trust has six key facilities projects that are directly related to increases in acute and community healthcare demand and the need for increased capacity arising from new population of these applications. The projects are the expansion of the Trust's Accident & Emergency Department at Stoke Mandeville Hospital, a new Paediatric A&E at Stoke Mandeville Hospital, building a new endoscopy suite at Stoke Mandeville & Wycombe, a new therapies unit at Stoke Mandeville, creating a new diagnostic and healthcare hub at Amersham Hospital, and expanding the Intensive Care Unit at Stoke Mandeville.

These projects have a total cost of £41m and the Trust has a funding gap of £13.5m which developer contributions will be required to mitigate. The contributions will be pooled towards the funding gap.

The capital cost contribution is calculated as £985,272

#### **CIL 122 Test**

The BHT consider that the evidence provided demonstrate that the acute and community health care is at its capacity in the Trust's catchment area. It also demonstrates that this proposed development will create a detrimental impact on the ability provide a safe level of services unless the impact is mitigated. The updated mitigation is carefully calculated and is fairly and reasonably related in scale and kind to the development.

Without the requested contribution, the access to adequate health services is rendered more vulnerable thereby undermining the sustainability credentials of the proposed developments due to conflict with NPPF and Local Development Plan policies as explained in the evidence provided by the Trust.

Finally, BHT note that the contribution requested towards the facilities programme will only partially deal with the impact created by these developments and as evidenced in the original submissions.

The Trust's responses make it clear that if the Council does not accept that the mitigation of the impact on the health infrastructure facilities is CIL 122 compliant, then the mitigation in relation to the services will stand.

Additional information has been provided at various stages on the general rather than site specific basis including but not exclusively the following:

Information on contract funding and CCG allocations, data used, assumptions and phased contributions.

A number of appeal decisions which BHT consider confirm the Trust's legal and policy compliant position supported by the Secretary of State and his Inspectors a) Growth reflects the increasing costs of delivering health care, including inflation, growth in demand for certain medical technologies;

b) Local population growth feeds nationally into CCGs' target allocations. This is derived from ONS data. However this process takes 3 years to affect growth allocations to the CCG;

c) Until this population growth is added to CCG allocations, it does not form part of the contracts between commissioners and the Trust;

d) The Trust does not receive funding retrospectively;

e) In terms of the 2019/20 contract, I have confirmed the following:

- 0.7% growth included based on population growth forecast per ONS (18/19 to 19/20)
- A further 0.47% of growth for additional growth expected in Buckinghamshire as per Buckinghamshire Country Council (value is £1-£1.1m). This relates to new dwellings which have already been occupied / are in the process of becoming occupied in 2019/20 and not in any way related to our applications for S106.

f) However, as the properties are occupied, the population growth manifests as a requirement on the Trust to treat more people and thus there is an overspend incurred in treating a larger population than that for which treatment is commissioned. This overspend is wholly within the Trust's balance sheet;

2. There is no option for the Trust to refuse to admit or treat a patient on the grounds of a lack of capacity to provide the service/s;

3. If the Trust fails to meet its performance targets it is penalised through withdrawal of the Provider Sustainability Fund (previously known as Sustainability Transformation Fund) and / or withdrawal of certain income received through the Commissioning for Quality and Innovation payment funding;

4. The increased activity level will affect the standard of service provided;

5. It is not possible for the Trust to predict when planning applications are made and delivered. The commissioning operates based on previous year's performance and does not take into account potential increase in population created by a prospective development. **It does not take into account housing land supply, housing need or housing projections;**

**6. The Trust cannot influence this aspect of the way the commissioning contracts are created between CCG and the Trust.**

7. The Trust's hospitals are now at full capacity;

8. The only way the Trust can maintain the "on time" service delivery without compromising quality of care and comply with NHS quality requirements is that the developer mitigates impact by contributing towards the cost of providing the necessary capacity for the Trust to maintain service delivery during the one to three years of occupation of each dwelling.

However the Trust considers that the request only for the first year keeps the levels of contribution reasonable.

9. The Trust is independent legal entity and the Trust is left bearing the cost of actions to mitigate the impact that the development creates until such times as the CCG funding allocation catches up and feeds through into contract values. CCG does not treat people and is not directly involved with the care of the people.

10. The Trust is not responsible to the other health providers and the impact calculation is only related to this Trust. As explained in the evidence the Trust has to treat those people who come through the door. It cannot turn patients away. The CIL test requires that the impact is direct and the calculation reflects the direct impact that this development will create to this Trust only.

**The Trust is happy to discuss the multiplier for a specific housing development and consider the impact of the Council's own concealed housing percentage if it can be demonstrated this has an impact on the Trust's impact calculation.**

The Trust holds statistics of each activity that takes place in the Trust. This activity is related to patient's address. Each activity will have a cost. The Trust has taken an average figure for each activity type. First column demonstrates the total activity and costs per annum in the Trust catchment area. The Trust has provided the figures from the close by area based on the previous year's activity rates.

The Trust can provide basic figures in relation to the catchment area subject to that it does not breach any patient confidentiality.

### ***Payment system***

1 The NHS Improvement sets the prices (called National Tariffs) for the majority of secondary care services. For each relevant activity undertaken, the Trust receives payment at the National Tariff price. For activity not covered by the National tariff, a Local price is agreed with the Commissioner. The tariff is broken down with 65% for staffing costs, 21% other operational costs, 7% for drugs, 2% for the clinical negligence scheme and 5% for capital maintenance costs.

2 The payment system for the Trust's catchment area for all patient activity is through a block contract. A block contract value is locally agreed, based on the previous year's activity x National Tariff price, plus expected growth. This means that for any activity above the level agreed within the block contract, the Trust receives nothing. This means that any patient coming through is not funded and created deficit is never recovered. This is the impact that the new development will create. In practical terms this means that the Trust's ability to provide the service is weakened and in most acute cases the funds have to be transferred from somewhere else to deal with the demand. This in turn will eat into the control total which means that the extra funding which otherwise would be granted is lost, creating a long term effect. Further this in turn will affect the Trust's ability to follow through its capital programme which includes improving and creating new facilities. As stated, none of the additional expenditure spent outside the current year's funding is ever recovered in the

following year's funding from commissioners. Any new funding will be related to the allocations received by the CCG; the CCG is free to decide how any new allocation is spent, across all of the services it commissions, including acute, mental health, community, Primary care and other sectors. CCG allocations are based on historic population forecasts, plus other indicators such as deprivation scores.

I hope that the above will assist. It would be really helpful to have a meeting to discuss face to face and see how the Trust and the Council could work together to deal with the impact that new major developments will create on the Trust.

### **Buckinghamshire Healthcare NHS Trust - 16 January 2020**

A subsequent revised figure of £ 2,200,527 has been requested which BHT state takes into consideration the housing profile and in BHT updated evidence the Trust has deducted 1.8% of the total figure reflecting the population already in the system (source ONS data study 2014).

In addition BHT have reduced the average population per residential dwelling from 2.51 to the ONS national average figure of 2.4. This ensures consistency throughout our methodology.

Reference is also made to the education contribution calculation and note that it does not take into consideration of concealed housing, those who are potentially already in the system or a percentage of those students who will be educated privately or at home. The education contribution also pays professional charges.

BHT states that the Trust has calculated the mitigation of the impact that a development creates is detailed, directly linked and reasonable. Moreover the contribution when requested to mitigate the impact is absolutely necessary. Without the contribution the development on its own and cumulatively will create unsustainable development and has a detrimental social economic impact on the community.

Reference is also made to EI Assessment, and Regulation 4 (2) of the Town and Country Planning (Environmental Impact Assessment) Regulations 2017 in assessing the direct and indirect significant effects of the proposed development on amongst other matters )population and human health.

### **Buckinghamshire Healthcare NHS Trust - October 2019**

The Trust's position in summary is as follows:

1. The CCG commissions planned and emergency healthcare from the Trust via the NHS National Standard Contract, including activity volumes and values on an annual basis. Contract volumes are negotiated, **based on historical contract performance**. Each year's CCG allocation reflects last year's allocation as stated, with an uplift which is centrally determined for growth:
  - a) Growth reflects the increasing costs of delivering health care, including inflation, growth in demand for certain medical technologies;
  - b) Local population growth feeds nationally into CCGs' target allocations. This is derived from ONS data. However this process takes 3 years to affect growth allocations to the CCG;
  - c) Until this population growth is added to CCG allocations, it does not form part of the contracts between commissioners and the Trust;

d) The Trust does not receive funding retrospectively;

e) In terms of the 2019/20 contract, I have confirmed the following:

- 0.7% growth included based on population growth forecast per ONS (18/19 to 19/20)
- A further 0.47% of growth for additional growth expected in Buckinghamshire as per Buckinghamshire Country Council (value is £1-£1.1m). This relates to new dwellings which have already been occupied / are in the process of becoming occupied in 2019/20 and not in any way related to our applications for S106.

f) However, as the properties are occupied, the population growth manifests as a requirement on the Trust to treat more people and thus there is an overspend incurred in treating a larger population than that for which treatment is commissioned. This overspend is wholly within the Trust's balance sheet;

2. There is no option for the Trust to refuse to admit or treat a patient on the grounds of a lack of capacity to provide the service/s;

3. If the Trust fails to meet its performance targets it is penalised through withdrawal of the Provider Sustainability Fund (previously known as Sustainability Transformation Fund) and / or withdrawal of certain income received through the Commissioning for Quality and Innovation payment funding;

4. The increased activity level will affect the standard of service provided;

5. It is not possible for the Trust to predict when planning applications are made and delivered. The commissioning operates based on previous year's performance and does not take into account potential increase in population created by a prospective development. **It does not take into account housing land supply, housing need or housing projections;**

**6. The Trust cannot influence this aspect of the way the commissioning contracts are created between CCG and the Trust.**

7. The Trust's hospitals are now at full capacity;

8. The only way the Trust can maintain the "on time" service delivery without compromising quality of care and comply with NHS quality requirements is that the developer mitigates impact by contributing towards the cost of providing the necessary capacity for the Trust to maintain service delivery during the one to three years of occupation of each dwelling. However the Trust considers that the request only for the first year keeps the levels of contribution reasonable.

9. The Trust is independent legal entity and the Trust is left bearing the cost of actions to mitigate the impact that the development creates until such times as the CCG funding allocation catches up and feeds through into contract values. CCG does not treat people and is not directly involved with the care of the people.



10. The Trust is not responsible to the other health providers and the impact calculation is only related to this Trust. As explained in the evidence the Trust has to treat those people who come through the door. It cannot turn patients away. The CIL test requires that the impact is direct and the calculation reflects the direct impact that this development will create to this Trust only.

The Trust is happy to discuss the multiplier for a specific housing development and consider the impact of the Council's own concealed housing percentage if it can be demonstrated this has an impact on the Trust's impact calculation.

The Trust holds statistics of each activity that takes place in the Trust. This activity is related to patient's address. Each activity will have a cost. The Trust has taken an average figure for each activity type. First column demonstrates the total activity and costs per annum in the Trust catchment area. The Trust has provided the figures from the close by area based on the previous year's activity rates.

The Trust can provide basic figures in relation to the catchment area subject to that it does not breach any patient confidentiality.

### ***Payment system***

1 The NHS Improvement sets the prices (called National Tariffs) for the majority of secondary care services. For each relevant activity undertaken, the Trust receives payment at the National Tariff price. For activity not covered by the National tariff, a Local price is agreed with the Commissioner. The tariff is broken down with 65% for staffing costs, 21% other operational costs, 7% for drugs, 2% for the clinical negligence scheme and 5% for capital maintenance costs.

2 The payment system for the Trust's catchment area for all patient activity is through a block contract. A block contract value is locally agreed, based on the previous year's activity x National Tariff price, plus expected growth. This means that for any activity above the level agreed within the block contract, the Trust receives nothing. This means that any patient coming through is not funded and created deficit is never recovered. This is the impact that the new development will create. In practical terms this means that the Trust's ability to provide the service is weakened and in most acute cases the funds have to be transferred from somewhere else to deal with the demand. This in turn will eat into the control total which means that the extra funding which otherwise would be granted is lost, creating a long term effect. Further this in turn will affect the Trust's ability to follow through its capital programme which includes improving and creating new facilities. As stated, none of the additional expenditure spent outside the current year's funding is ever recovered in the following year's funding from commissioners. Any new funding will be related to the allocations received by the CCG; the CCG is free to decide how any new allocation is spent, across all of the services it commissions, including acute, mental health, community, Primary care and other sectors. CCG allocations are based on historic population forecasts, plus other indicators such as deprivation scores. This requested a contribution of £2,200,527 ( £2,240,862 adjusted for concealed housing average, population per household).

## **Buckinghamshire Healthcare NHS Trust 29.03.2019**

Buckinghamshire CCG commission(s) the Trust to provide acute healthcare services to the populations of Buckinghamshire and surrounding Counties under the terms of the NHS Standard Contract. This commissioning activity involves identifying the health needs of the respective populations and commissioning the appropriate high quality services necessary to meet these needs within the funding allocated. These commissioners commission community, planned and emergency (activity arising from major trauma and A&E), acute hospital medical and surgical care and specialist and tertiary healthcare from the Trust and agree service level agreements, including activity volumes and values on an annual basis. The commissioners have no responsibility for providing healthcare services. They commission (specify, procure and pay for) services, which provides associated income for the Trust. The Trust directly provides the majority of healthcare services through employed staff but has sub-contracted some non-clinical services through its PFI arrangements.

### ***Payment system***

The Department of Health dictates the costs they think NHS health services should be priced at. The tariff is broken down with 65% for staffing costs, 21% other operational costs, 7% for drugs, 2% for the clinical negligence scheme and 5% for capital maintenance costs.

The non-elective admissions, A&E attendances and ambulatory / same day emergency care payment is covered by block contracts based on locally agreed planned activity which in turn is based on last year's activity levels. This means that any extra activity received by the Trust is not paid for. All elements of the planned care and community care payments, the funding is set on a block contract based on locally agreed planned activity, which is based on last year's activity levels only. The Trust does not receive additional funding for any additional activity in relation to the care that is contracted under block contract.

None of the additional expenditure spent outside the current year's funding is ever recovered in the following year's funding. The new funding is only based on the previous year's activity, with no provision for increases in population due to new developments. The commissioning is not related to Local Planning Authorities' housing needs, projections or land supply.

### **Additional funding- Provider Sustainability Fund (PSF): a fund that supplements the health provider's income, focused on supporting sustainability of NHS providers**

In 2019/20, the Trust is due to receive additional PSF funding which supplements the income. In the contract negotiations, it is assumed that the Trust will plan to make a financial surplus. The amount of surplus to be achieved is agreed between the Trust and NHSI.

If the Trust meets its agreed surplus target then it will receive its PSF. If the Trust does not achieve its agreed surplus then the Trust will lose PSF. The total value of the PSF for the Trust for 2019/20 is £5.8m. Any new developments will increase the risk of the Trust not achieving its surplus targets. NB. The risk of the Trust not achieving its PSF due to the development has NOT been built into the financial calculations contained within this statement.

In addition the Trust has to achieve “52 week wait” for elective care. This means that each patient referred to the Trust for elective care should not wait over 52 weeks for treatment. If this happens then the Trust will be subject to financial sanctions. The potential amount lost is proportionate to the number of breaches.

The development will put extra pressure on the Trust’s ability to achieve the agreed surplus because each additional patient not part of the agreed contract will consume the available funding. In addition the development will put extra pressure on the Trust’s ability to reach the required 52 week wait. NB. The risk of the Trust not achieving its PSF due to the development has NOT been built into the financial calculations contained within this statement.

### **Improvement Goals**

The Commissioning for Quality and Innovation (the “CQUIN”) payment framework makes a proportion of NHS healthcare provider income conditional on achieving certain improvement goals. In 2017/2018 the Trust’s CQUIN income was conditional upon achieving improvement goals. The conditional income available for 2017/18 was £7,277,295. The amount the Trust did not achieve for 2017/2018 was £1,194,520. An impact which interferes with the achievement of the CQUIN’s improvement goals will jeopardise the additional income received through the CQUIN. This residential development will have a detrimental impact on the Trust’s ability to provide those goals. . NB. The risk of the Trust not achieving its CQUIN income due to the development has NOT been built into the financial calculations contained within this statement.

### **Planning for the Future**

The Trust understands that the existing population, future population growth and an increased ageing population will require additional healthcare infrastructure to enable it to continue to meet the increasing demands and complexity of the hospital healthcare needs of the local population.

It is not possible for the Trust to predict when planning applications are made and delivered and, therefore, cannot plan for additional development occupants as a result. The Trust has considered strategies to address population growth across its area and looked at the overall impact of the known increased population to develop a service delivery strategy to serve the future healthcare needs of the growing population. This strategy takes into account the trend for the increased delivery of healthcare out of hospital and into the community.

The funding from the CCG is negotiated on a yearly basis and this will eventually catch up with population growth, but cannot take into account the potential increased service requirement created by the increase in population due to development, including that from this development, in the first year of occupation. The funding is not dependant on Local Planning Authority’s housing land supply, housing need or housing projections.

### *Current Position (2019)*

Emergency admissions and the direct impact on emergency health care services

Across England, the number of acute beds is one-third less than it was 25 years ago<sup>1</sup>, but in contrast to this the number of emergency admissions has seen a 37% increase in the last 10 years<sup>2</sup>. The number of emergency admissions is currently at an all-time high. The Trust growth is shown in Figure 1.

Emergency Admissions	Year
79,552	2014/15
81,401	2015/16
82,751	2016/17
82,514	2017/18

BHT state that the Trust is frequently experiencing major pressures and its inability to cope with the increasing patient demand and that current occupancy levels are highly unsatisfactory, and the problem will be compounded even further by an increase in need created by the development, which does not coincide with an increase in the number of bed spaces available at the Hospital. This is the inevitable result where clinical facilities are forced to operate at over-capacity.. New development within the regions will inevitably add to the already over-burdened NHS This development will have a direct impact on the Trust's performance and add a further strain on the current acute healthcare system.

The population and household increase associated with this proposed development will significantly impact on the service delivery and performance of the Trust until contracted activity volumes include the population increase. As a consequence of the development and its associated demand for emergency healthcare there will be an adverse effect on the Trust's ability to provide on-time care delivery without delay, this will also result in financial penalties due to the Payment by Results regime. The residents and other local people at potential risk.

### Impact Assessment Formula

The Trust has identified the following:-

A development of **1,100 dwellings and a 60 residential extra care units**, equates to **2,821** new residents. Using existing 2017/18 demographic data as detailed in the calculations will generate **3,845** acute interventions (excluding diagnostics and other healthcare interventions) over the period of 12 months and **3,358** community interventions. This comprises additional interventions by point of delivery for:

**685** A&E based on 24.28% of the population requiring an attendance, **32** Elective inpatient admissions based on 1.13% of the population requiring an admission, **266** Day-case admissions based on 9.42% of the population requiring an admission, **332** Emergency admissions based on 11.79% of the population requiring an admission, **2,530** Outpatient admissions based on an average of 0.8969 admissions per head of population, **3,358** Community episodes based on the average number of Community episodes per head of population.

Diagnostic Imaging (Radiology and Pathology services) and other healthcare services (Breast and Cervical Screening, Cancer MDTs, Palliative care, MSK, Patient Transport, Home Care

Drugs, Community Midwifery) are based on average cost per head of population of providing these services.

**Total admissions:**

- For the total acute admissions, representing 1.36 average acute admission per population of the residents
- For the total community episodes representing 1.19 average acute admission per population of the residents

**Formula:**

**Development Population x % Development Activity Rate per head of Population x Cost per Activity = Developer Contribution**

As a consequence of the above and due to the payment mechanisms and constitutional and regulatory requirements the Trust is subject to, BHT consider it is necessary that the developer contributes towards the cost of providing capacity for the Trust to maintain service delivery during the first year of occupation of each unit of the accommodation on/in the development. The Trust will not receive the full funding required to meet the healthcare demand due to the way contracts are negotiated based on previous year's performance and there is no mechanism for the Trust to recover these costs retrospectively in subsequent years as explained. Without securing such contributions, the Trust would be unable to support the proposals and would object to the application because of the direct and adverse impact of it on the delivery of health care in the Trust's area. Therefore the contribution required for this proposed development of Insert figure dwellings is **£2,118,427.00**. This contribution will be used directly to provide additional health care services to meet patient demand as detailed in Appendix 3

The BHT concluded that 'In the circumstances, it is evident from the above that the Trust's request for a contribution is not only necessary to make the development acceptable in planning terms it is directly related to the development; and fairly and reasonably related in scale and kind to the development. The contribution will ensure that Health services are maintained for current and future generations and that way make the development sustainable.'

**The Canal & River Trust**

The Canal & River Trust (the Trust) previously objected to this proposal because the towpath is not suitable, in its present form, to cope with the increased usage generated by this development, and any further degradation will render it unsuitable for all users or place additional burdens on the Trust who own and maintain it. We made it clear however that we would remove this objection if we could ensure that our concerns were considered as part of the application process and suitable mitigation measures were put in place. The Trust has continued to discuss mitigation measures with both the County Council and applicants and following those discussions we are now able to withdraw our objection, subject to the imposition of suitably worded conditions and a legal agreement.

**Chiltern Conservation Board (CCB)**

Setting of AONB would experience a significant effect, but will reduce overtime and subject to success of planting being carefully considered. Seek clarification on the relationship between the illustrative masterplan green infrastructure within the site and off-site

landscape receptors. Encourage lighting plans are embedded into the development to mitigate lighting intrusions into the AONB – CCB support a condition which requires a lighting management framework to deal with longer term lighting control. Consider a robust method of future proofing lighting plans. CCB notes that there would be no notable change to the special quality of panoramic views across the southern vale. CCB seek greater use of green roofs and the principles are incorporated into a design code. Views out of AONB need to be mitigated by avoiding continuous linear development.

### **Crime Prevention Design Advisor (CPDA)**

Raises no objections to the proposals at this time, but advises that there are a number of opportunities to design out crime and promote personal safety at reserved matters stage. Reserved Matters need to address safety and security for the detailed proposals, within a Design Code.

### **Ecology**

No Objections: The updated ecological statement is considered sufficient. The updated Biodiversity Impact Assessment demonstrates a 15% net gain in Biodiversity. Secure the Biodiversity Net Gains proposed on site though a planning condition requiring a Landscape and Ecological Management Plan.

### **Economic Development**

ED welcomes and supports the approval of this application which provides 102,800 sq. of B1, B2 and B8 employment floor space as part of an important strategic Local Plan allocation in Aylesbury Garden Town and with Enterprise Zone status. The HEDNA has identified a shortage of employment space which this application would help with in a sustainable location which is well connected and is a prime location for employment development and growth to support the housing growth also around Aylesbury. The Aylesbury Garden Town, Bucks Local Industrial Strategy, Aston Clinton NP, and VALP have all identified Woodlands as a key employment site for the area. Information from local commercial agents confirmed that demand for industrial use had remained strong and delivery of this scheme would provide new commercial space into the market increasing economic growth and boosting local investment and providing up to 4396 jobs in and around Aylesbury which represents significant local and regional benefits to the economy and its recovery. The fact that the site has been identified in so many key documents shows that delivery of this site is of key strategic importance for the area.

### **Education**

Based on current projections and housing growth, there is no school capacity in the relevant planning area to accommodate a development of this scale. The proposed on-site primary school (including nursery) would be provided in line with BCC policy i.e. site transfer should take place to enable new primary schools to be opened at the point in which admissions into reception from within the development reaches 15 pupils (which BCC estimates to be on occupation of the 350th home or four years from commencement, whichever is the earlier) sufficient to justify the opening of a new school balanced against the environmental and financial cost of transporting pupils to neighbouring schools. The primary school has been sized to accommodate all the demand generated from the Woodlands scheme. New secondary schools are currently planned on the former Quarrendon site and on the

Kingsbrook development to accommodate demand from these developments. BCC would look to expand existing special schools (i.e. Booker Park and Stocklake Park) to accommodate demand from the development.

The viability of Woodlands remains a significant challenge (as confirmed by the District Valuer) because of the site constraints. BCC is currently exploring measures to mitigate a potential reduction in the secondary contributions on the Woodlands development through a number of measures including:

- A review mechanism to revisit the viability of the scheme as it progresses (as agreed for the Kingsbrook development) which could allow the s106 contribution to increase should costs fall or land values rise;
- Pursuing cost-effective approaches to drive down costs (e.g. by utilising effective procurement frameworks; value engineering);
- Investigate potential opportunities to secure additional third party funding through government initiatives;

When considering viability mitigation measures, it is important to note that the government's policy (as set out in Paragraph 173 of the NPPF) states that development should not be subjected to such a scale of s106 obligations that the development becomes unviable. Accordingly, where an applicant has demonstrated satisfactorily through a tested viability appraisal that a planning obligation being required would cause the proposed development to be unviable, local authorities are advised to be flexible in seeking such planning obligations but at the same time ensuring that the adverse impacts from the proposed development are adequately mitigated.

### **Environment Agency**

EA have reviewed the latest fluvial flood modelling submitted by the applicant and the following related flood risk documents that are available on Buckinghamshire Council's planning portal:

- Flood Risk Assessment Addendum, Revision E, prepared by Stantec UK Ltd, dated November 2021
- Aylesbury Woodlands Hydraulic Modelling Report 2021, Revision C, prepared by Stantec UK Ltd, dated November 2021

While these recent rounds of consultations have focused on the topic of flood risk, following the Regulation 22 Town and Country Planning EIA Regulations 2011 request by AVDC in March 2020, our position also reflects those other issues within EA's planning remit that were previously considered and noted in EA's letters to ADVC on 3 February 2017 (EA reference WA/2016/122289/02) and 19 February 2019 (EA reference WA/2016/122289/05). The proposed development will only meet the National Planning Policy Framework's requirements if planning conditions are included on any planning decision notice.

Without these conditions the proposed development would result in a risk to people and the environment and we would object to the scheme as submitted. An informative for the applicant relating to Environmental Permits and additional advice to the council relating to the flood risk sequential test are also noted.

The Flood Risk Assessment Addendum, Revision E, prepared by Stantec UK Ltd, dated November 2021 is informed by site specific hydraulic modelling. We have reviewed this modelling in accordance with current requirements. Following the latest model revisions and further clarifications by the applicant we have now concluded that the submitted fluvial flood model (updated following the March 2020 Regulation 22 (EIA Regulations) request by the council) is suitable for the purposes of informing a site specific flood risk assessment and related masterplan for this outline planning application.

The submitted fluvial flood model includes site specific hydraulic modelling of onsite watercourses in the current (baseline) situation. Post scheme modelling including the raised road embankment and creation of a preferential flood flow route and flood storage area to mitigate against the effect of the embankment on flood flows was also submitted. The modelling also considers appropriate allowances for the effects of climate change. We acknowledge that the proposed preferential flow route/flood mitigation scheme would not normally be considered as an appropriate form of mitigation against the impacts of built development within the floodplain. However, it has been satisfactorily demonstrated that in this instance, due to site specific flow constraints which control flood water exiting the site, that the impacts of built development within the floodplain are contained within the application site. Therefore, in this instance we consider that this approach is acceptable.

In the indicative post-development scenario the submitted fluvial flood modelling has also demonstrated that flood risk off site does not increase when compared to the baseline situation. Therefore, the proposed development does not increase flood risk to third parties in accordance with national and local planning policy. Furthermore the modelling indicates that there is a betterment along the Bear Brook, Burcott Brook and Drayton Mead Ditch downstream of the site resulting in some offsite betterment heading into Aylesbury to the west and north of the canal.

However, as this is an outline planning application with the majority of matters reserved, further detailed hydraulic modelling will be required before the site layout is agreed at the reserved matters stage. This is due to the design of the embankment, bridges, flood relief culverts, the preferential flow route and flood storage area being currently shown in an indicative design and layout. Consequently we have requested a specific planning condition relating to this matter.

As noted above, the post scheme modelling demonstrates that the impact of the Eastern Link Road will be appropriately mitigated to ensure flood risk is not increased elsewhere. Additionally, we would encourage the applicant to explore any opportunities to provide betterment for offsite flood risk at the reserved matter stage. The applicant has committed within their Flood Risk Assessment that elements within the proposed development classified as 'more vulnerable' and 'less vulnerable' development in terms of flood risk vulnerability classifications (Flood Risk Tables 1, 2 and 3 and the National Planning Practice Guidance [NPPG]) will be located outside the modelled 1% annual probability including an appropriate allowance for climate change flood extent. For clarity while this flood extent is location dependent, in the majority of instances this would usually result in these elements of the development being located within flood zone 1. However, in some locations this may mean that some of these development elements will be placed in flood zone 2 but outside



of the Government's design flood event (i.e 1% annual probability with an appropriate allowance for climate change).

If Buckinghamshire Council deem the proposed road 'Essential Infrastructure' then in planning and flood risk terms it may be located in the highest risk flood zones 3 and 3b once the flood risk sequential test has been passed and satisfactory flood risk mitigation measures have been proposed/implemented to ensure that these elements of the development are safe for the scheme's lifetime and that flood risk will not be increased elsewhere.

Finally, should the proposed development be brought forward in a phased approach, it is essential that each phase (or phase groupings if more than one phase is brought forward at the same time) can clearly demonstrate how it independently is safe and will not increase flood risk elsewhere. This is vital to ensure that the required flood risk mitigation measures (i.e. flood water storage compensation, flow routes, etc...) are implemented and operational before or at the same time as the relevant phase as to ensure that people and the environment are protected. It would not be acceptable for a phase of the development to proceed if the appropriate flood risk mitigation measures and compensation was not provided at the same time (or before) as this is likely to lead to an increase in flood risk elsewhere. This would be contrary to national and local planning policy.

#### **Environmental Health (Noise Impacts)**

With regard to noise impacts the significant effects identified in the original Environmental Statement remain substantially unchanged, however, since the production of the original ES there have been a number of updates to relevant standards and guidance.

Recommends that if approved the application should be subject to conditions on

- Construction Noise/vibration,
- Road Traffic Noise,
- Noise from proposed employment/industrial units/plant areas/mixed use local centre.
- Local school developments

#### **Environmental Health (Pollution Control)**

##### *Contaminated Land Comments*

The Environmental Statement (ES) originally submitted with the application was updated in November 2020 and as such an ES addendum has been submitted. Chapter 3.6 Ground Conditions of the ES Addendum – Non Technical Summary, reference: 32113/3013 dated November 2020, reiterates the findings of the previous Ground Conditions Desk Study Report in that the likelihood of significant contamination (in terms of soil or groundwater contamination or soil gas risk) being present at the site is very low. It goes on to say that this will be confirmed through further investigation and that further tiers of risk assessment will

also be carried out to quantify the risks. If necessary, remediation works will then be recommended to reduce or eliminate any identified risks to human health or the environment. After reviewing this chapter I agree that additional investigative works are required at the site and recommend they are completed.

#### *Air Quality Comments*

The methodology and baseline data adopted in conducting the air quality impact assessment for the proposed development meets approval.

During the construction phase no new or different construction effects to those previously reported have been identified. Therefore as stated within the Non Technical ES Summary, reference: 32113/3013 dated November 2020, the March 2016 ES and the April 2017 ES Addendum did identify that there is the potential for construction dust to affect existing and future receptors in close proximity to the site. However, through the implementation of mitigation measures, including compliance with the Construction Environmental Management Plan, the residual effects on receptors will be 'not significant'.

Recommends that mitigation measures are implemented to ensure there is no impact on existing and future receptors at the site during the construction phase

During the operational phase of the development it is acknowledged that the proposed development will generate additional traffic and that the emissions of nitrogen dioxide (NO<sub>2</sub>) and fine particulate matter (PM<sub>10</sub> and PM<sub>2.5</sub>) from these vehicles have the potential to impact on human receptors. However, modelling completed within the air quality impact assessment predicts that pollutant concentrations generated from this additional traffic will not breach the National Air Quality Objectives (NAQOs) for existing and future residential locations. It is therefore concluded that as the proposed development will not cause any exceedance of the NAQOs the overall impact on human receptors from the development will be 'not significant' and as such no mitigation measures in relation to air quality are considered to be necessary. After reviewing the results of the modelling and the air quality impact assessment I agree with this conclusion

#### **Heritage**

The application would not raise any heritage objection. The proposed development will not harm the setting of the heritage assets; however further consideration should be given a heritage contribution as part of any future planning obligation to ensure the proper conservation of the identified listed canal structures.

#### **Highways**

The full and detailed assessments of the application both individually and cumulatively, have demonstrated that any adverse effects of the proposals can be appropriately mitigated through planning conditions and S106 obligations. The position reached in 2017 remains the same, and therefore the Council can confirm that it has no objections subject to Conditions and S106 Obligations to be advised.

Highways comments are referred to in the evaluation section of the report and the full consultee comment is provided in Appendix I including Highways response to Hampden Fields Action Group.

### **Historic England**

On the basis of the information submitted, no comment. The views of the Council's specialist conservation and archaeological advisers should be sought as relevant.

**Landscape and Urban Design:** Notes that the landscape is made up of large fields with native species hedgerows and occasional trees and water courses with associated vegetation. It is generally an open landscape with Woodlands cover, except from the Woodlands area (5.5ha) close to the A41 to the south east. The majority of site permits openness with extensive views of the Chilterns AONB (approx. 2.5k to the south east). Arla site lies to the east of the boundary which is an intrusive element in the setting of the site. The site is within the Southern Vale LCA (8.10) and the condition of the landscape is noted as being poor with moderate sensitivity, with guidelines for the LCA looking to restore and enhance the local character of the existing landscape. The Applicant has submitted a Landscape Baseline as part of ES alongside a Landscape and Visual Impact Assessment (LVIA) as part of Chapter 14 of the ES. This identifies significant adverse landscape character effects on 3 receptors at year 1 and to year 15 (residual effects). It identifies significant adverse impacts on the visual amenity of 8 visual receptors at year 1 and on 4 receptors in year 15 (residual). It concludes there would be significant adverse effects on residential receptors at 7 locations in year 1 and 3 at year 15 (residual). The ES identifies the cumulative impacts of the development with other major schemes (such as Kingsbrook, Hampden Fields etc) would result in permanent significant adverse cumulative impacts on the Southern Vale and Hulcott Vale LCAs and on the larger Vale Landscape Character Type (LCT 8), as well as significant permanent adverse impacts on the setting of the AONB. The Landscape officer is in agreement with the conclusions in the ES.

### **LLFA**

No objection to the proposed development subject to planning conditions being placed on any planning approval.

The LLFA comment relates only to surface water and groundwater flood risk, the Environment Agency (EA) are the statutory consultee for fluvial flood risk associated with Flood Zone 2 and 3.

**Natural England: No Objections** . Based on the plans submitted, Natural England considers that the proposed development will not have significant adverse impacts on designated sites and protected landscapes and has no objection. Natural England recommends conditions to be attached as follows:

Protected Landscapes, conditions should be secured to protect the landscape character of the area and views from the AONB in line with the mitigation proposed in the Landscape Phasing Strategy edp2524/89b dated 12 May 2017.

Biodiversity net gain, conditions should be secured around the proposed offsite mitigation outlined in the Aylesbury Woodlands ES Addendum Appendix G.1 Biodiversity Strategy V4 including;

- a biodiversity offset management plan;
- a monitoring and evaluation plan
- implementation milestones with time commitments and
- success criteria linked to the species and BMV agricultural land impacted.

Climate change and green infrastructure, conditions should be secured around the layout and connectedness of greenspace as outlined in the Aylesbury Woodlands Environmental Statement Addendum Appendix G.1 Indicative Ecological Masterplan.

Best and most versatile agricultural land, conditions should be sought around the proposed offsite mitigation outlined in the Aylesbury Woodland Environmental Statement Addendum Appendix G.4 Biodiversity Strategy V4 including mitigation for the impacts to BMV land.

Air Quality - Natural England notes that the updated Air Quality assessment provided in Aylesbury Woodlands Environmental Statement Addendum Chapters 6 and 9 dated November 2020 has screened the proposal to check for the likelihood of significant effects from aerial emissions on Chilterns Beechwoods Special Area of Conservation (SAC). The assessment concludes that the proposal is unlikely to result in any adverse effects on SAC integrity through air quality, either alone or in combination with other plans or projects. On the basis of information provided, Natural England concurs with this view.

Natural England response on the Appropriate Assessment - Based on the available plans, NE agree with the conclusion of the assessment that the application would not have any significant adverse effects on the integrity of the Chilterns Beechwood SAC. Following the publication of the new March 2022 evidence NE confirm that any development before 14 March 2022 forms part of the baseline development, and that no further information is requested at this stage. NE point out that any reserved matters applications will need further consultation with NE and consideration of the impact on recreational pressure at that stage.

**Parks and Recreation:** The proposed sports facilities should be in accordance with the latest Buckinghamshire Council Playing Pitch Strategy, which is currently in draft form but which will hopefully be completed by or early in 2022.

The current proposed Equipped Play Areas indicated on the Illustrative Masterplan are unacceptable as they fail to demonstrate minimum requirements, as per required Fields in Trust guidance.

The illustrative masterplan still does not include the required pavilion and car parking to serve the cricket, bowls, tennis and allotment provision, I have no other comments to make.

**Recycling And Waste:** No objection is raised at this time. A waste vehicle tracking plan is needed.

**Rights of Way:** No objection BCC would like to see the proposed development at Woodlands to support provision of the Grand Union Triangle scheme, which is highlighted within the Buckinghamshire GI Strategy and Delivery Plan. It is suggested that safe, segregated cycling and walking solutions need to be designed to take walkers and cyclists alongside the road that connects each side of College Road North across the A41 bridge.

**Sports England:** Sport England has raised questions previously about the proposed mix and type of sports facilities, albeit that they are illustrative at this stage, given the lack of evidence base or Playing Pitch Strategy (PPS). Since then the former Aylesbury Vale District Council has been developing a new Playing Pitch Strategy for their area. Currently, the assessment work has been completed and it is at the stage where there are emerging findings available in relation to the key issues for playing pitches/field within the Aylesbury Vale district, both in quantitative and qualitative terms. Sport England has sought to engage the council both on the planning and sport and leisure side to better understand the rationale and evidence base behind the planned sports provision and make the link between this and the ongoing work the council is doing to develop a new Playing Pitch Strategy (PPS). Unfortunately, we have had no response to our attempts to engage with them on these plans. Our view is that the sports provision proposals should be supported by and informed by the findings of the PPS. Sport England has consulted the national governing bodies for sport on the further information provided and we have received the following comments.

The Football Foundation on behalf of the FA comment that they support Sport England's position in relation to the need for the sports provision element of the proposal to be informed by the emerging Playing Pitch Strategy work.

England Hockey comment that there is no robust PPS available, so at present no strategic evidence base to draw from, so it is requested that the developer outlines how they have reached the proposed pitch provision? How has the proposed mix of facilities been factored in to existing provision and ongoing viability? In addition, what are the plans for RAF Halton and its existing facilities which is within 3 miles of the proposed development?

Below is a list of multi Sports facilities located within 5 miles of proposed Aylesbury Woodland Sports Hub:

- Stoke Mandeville Stadium (approx. 5 miles)
- Aylesbury Sports Club (approx. 4 miles)
- RAF Halton – what does the plan look like to enhance/develop existing sports provision? (approx. 3 miles)
- Halton Tennis Centre – aspiration to develop? (approx. 2.5 miles)

England Hockey comment that with one hockey club servicing the current needs for Aylesbury's population and with the rapid expansion of new developments along the A41, England Hockey would like to see consideration given to a multi-sport, sand based AGP

within the Sports Hub to create a 'home' for Aylesbury Hockey Club. The RFU has two Rugby clubs in close proximity to the proposed development:

- Aylesbury RFC – Weston Turville – approx. 2 miles (4mins) from the proposed development
- Tring RFC (This is Dacorum BC and in Hertfordshire) approx. 7 miles (9 mins)

The RFU comment that there is no need to develop a new rugby club site at Aylesbury woodlands as both clubs would be able to service the additional population, both clubs have ambitious facility plans and would be able to provide suitable projects for offsite contributions to support the additional Rugby footfall from the development. There is a 3G WR22 compliant artificial pitch at ARFC already. The RFU do not object to the development.

### **Sports England**

In accordance with the NPPF, Sport England seeks to ensure that the development meets any new sports facility needs arising as a result of the development. Sport England have been in discussions with the Council to develop a Playing Pitch Strategy which, once completed, could inform the proposed playing pitch mix within the proposals. This approach would be robust and therefore Sport England are keen that the application allows the flexibility to change as the need is established. Sport England request that the provision of sports facilities and playing pitches are secured at the outline stage and ensure that proposed playing pitches meet Sport England's quality standard (to be conditioned).

The indicative layout proposes 12 small sided AGP's/courts, presumably for football. The FA's current approach, however, is to provide full size adult AGP's which can be subdivided into smaller sided pitches if needed. This results in a far more flexible space than individual small sided AGP's as it allows for senior 11 a-side matches as well as all levels of junior football and smaller sided adult football to be played. Strategically there is a need for an additional 6 full-size 3G AGP's in Aylesbury Vale to meet the current demand of the number of football teams within the area. This, of course, does not take into consideration the additional residents that the proposed housing at Aylesbury Woodlands would accommodate. Sport England strongly recommend that the AGP provision currently indicated is reconsidered and advise that the applicants liaise with The FA as the proposals develop.

Conclusion: Provided the term within the s.106, condition(s) and re-consideration of the AGP are incorporated within the scheme/decision, Sport England would not now not object to this application and would also like to work alongside the applicant/Council to develop the final sports facility mix that would be provided.

### **Thames Water**

#### **Waste Comments**

Foul Water Network - Following initial investigations, Thames Water has identified an inability of the existing FOUL WATER network infrastructure to accommodate the needs of this development proposal. Thames Water has contacted the developer in an attempt to agree a position for foul water networks but has been unable to do so in the time available and as such Thames Water request that the conditions be added to any planning permission

Sewer Network - Thames Water recognises this catchment is subject to high infiltration flows during certain groundwater conditions. The scale of the proposed development doesn't materially affect the sewer network and as such we have no objection. In the longer term Thames Water, along with other partners, are working on a strategy to reduce groundwater entering the sewer network.

SURFACE WATER - The application indicates that SURFACE WATER will NOT be discharged to the public network and as such Thames Water has no objection, however approval should be sought from the Lead Local Flood Authority. Should the applicant subsequently seek a connection to discharge surface water into the public network in the future then we would consider this to be a material change to the proposal, which would require an amendment to the application at which point we would need to review our position.

Existing Water Network - Following initial investigations, Thames Water has identified an inability of the existing water network infrastructure to accommodate the needs of this development proposal. Thames Water has recommended conditions be added to any planning permission

#### Strategic Water Mains

- The proposed development is located within 5m of a strategic water main. Thames Water do NOT permit the building over or construction within 5m, of strategic water mains. No objections subject to conditions
- The proposed development is located within 15m of a strategic water main.- No objections subject to conditions

On other matters relating to construction of buildings with 3m of water mains and development located within 15m of underground water assets, Thames water has recommended an informative to be attached. Furthermore, a consortia led approach is advocated for so that cumulative detriment to the existing sewerage infrastructure can be avoided.

#### Trees

The tree survey data is now out of date and the majority of the concerns are intrinsic to the technical design stage, and all are potentially resolvable. Further information required at reserved matters stage. Recommends conditions to be attached to any permission.