

Sarah Kasparian
Senior Planning Officer- Major Projects
Council Offices
Gernon Road
Letchworth Garden City
SG6 3JF

NHS Property Services Ltd
10 South Colonnade
Canary Wharf
E14 4PU
Email: mark.adams@property.nhs.uk
Twitter: @NHSPROPERTY
www.property.nhs.uk

BY EMAIL ONLY: sarah.kasparian@north-herts.gov.uk

3rd October 2025

Dear Sarah,

Application Ref: 24/01013/OP

Address Land Surrounding Burloes Cottages, Newmarket Road, Royston, Hertfordshire

Proposal Outline Application : Hybrid application for residential development of up to 325 dwellings comprising (a) full planning application for Phase 1 comprising 102 dwellings and associated infrastructure including access from Newmarket Road, emergency and pedestrian/cycle access from Burloes Hall Drive, internal highways, public open space, landscaping and drainage and b) outline application for up to 223 dwellings and associated infrastructure with all matters reserved apart from primary means of access and emergency and pedestrian/cycle access from Burloes Hall Drive

Please accept this joint response update on the position of Primary Health Care provision in relation to application 24/01013/OP on behalf of Cambridge and Peterborough Integrated Care System (C&PICS) as local primary healthcare commissioners.

Previous Consultation Response

C&PICS outlined in our previous consultation response dated 21st June 2024 that the proposed development will have an impact on healthcare infrastructure and that mitigation would be required in the form of a financial contribution towards the extension and refurbishment of existing healthcare facilities to create the additional space required to meet the needs of the population coming forward from the proposed development.

Updated Healthcare needs arising from the proposed development

Over the course of the last year C&PICS have been in discussions with local healthcare providers related to healthcare projects within Royston to meet the needs of populations coming forward from developments. Although the extension and refurbishment of existing facilities could provide additional healthcare infrastructure, the estates strategy for this area has shifted towards the provision of a new build facility, ensuring the delivery of primary care services from a futureproofed fit for purpose building. The mitigation being sought from this development therefore needs to be



updated to reflect the current healthcare position and anticipated mitigation project expected to come forward within the area.

Based on the 325 unit and North Hertfordshire's average population per household figure of 2.3 (based on 2021 Census Data), the proposed development will result in 748 people. The additional floorspace requirement (sqm) arising from this residential population is calculated based on 150sqm GIA per 1,750 patients to align to the requirements of Health Building Note 11:01: Facilities for Primary and Community Care (HBN 11-01). Within Royston the ICB has identified the requirement for development of a new primary-care led facility. The required S106 financial contribution is therefore based on creating new/increasing clinical space (build cost of £7,273/sqm) within the impacted PCNs. Table 2 below provide the capital cost calculation of delivering the additional health infrastructure required to support the prosed development

Table 2. Capital costs calculation of additional primary healthcare services

	Total residential units	Population Increase	Floorspace required	Delivery Approach	Capital required to create the floorspace
Proposed Development	325	748	64.07	New Build	£466,013

The build cost for new build primary care facilities is derived from NHS Property Services (NHSPS) build cost benchmarks. As a government owned healthcare specialist property owner, manager, advisor and service provider, NHSPS works in collaboration with leading expert consultants to provide expertise in primary care delivery for ICBs across the country. NHSPS build cost benchmarks are prepared by independent quantity surveyors with a healthcare specialism to ensure accordance with HBN11-01.

The identified capital costs are based on delivering healthcare spaces that are ready for occupation by healthcare services, as opposed to a shell and core condition. This reflects the full costs of delivering health infrastructure projects and therefore incorporate a range of allowances including (but not limited to) fit out, professional fees, externals and contingency. However, they do not include the cost of land acquisition. NHSPS updates cost benchmarks on an annual basis to reflect current market conditions and rebases costs to the locality of the proposed development using the Build Cost Information Service (BCIS) TPS.

The contribution request is directly related to the development, being based on the proposed development, the specific population increase, and the resultant primary care floorspace requirement. The request is fairly and reasonably related in scale and kind to the development, as the financial contribution is based on the capital cost of delivering the required additional capacity within the primary care estate that will be impacted by the proposed development.

S106 Heads of Terms (HoT)

The ICB expects that the above capital cost would be secured as a financial contribution in the S106 linked to grant of planning permission. To ensure the required health mitigation is appropriately secured in the S106 agreement, we request the following be included in the S106 HoT when presenting the development to the planning committee or before issuing a decision notice:

- Healthcare contribution of £466,013 (index linked) to be applied by the Integrated Care Board towards the provision of primary care-led facilities and associated infrastructure within the local Primary Care Network (PCN).

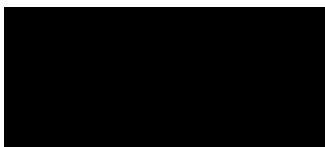
To enable the required additional capacity to be in place in a timely manner, the ICB's preference is that the contribution is paid prior to commencement of the development. The financial contribution should be indexed linked to the Build Cost Information Service (BCIS) All-In Tender Price Index. It is important that the detailed drafting of any S106 provides appropriate flexibility to align with ICB commissioning processes and estates plans, and we would welcome discussion on this should the application be approved.

Conclusion

As noted in our previous consultation response, there is not sufficient existing capacity locally to accommodate the population growth generated by the proposed development. Mitigation is therefore required in the form of a financial contribution of £466,013 towards the capital cost of delivering the additional primary care floorspace required to serve residents of the new development. Without this mitigation, the development would not comply with Policy SP7 (North Hertfordshire Local Plan 2011-2031), and paragraphs 56 to 59 of the NPPF and related Planning Practice Guidance. Without appropriate healthcare mitigation, the development will be unsustainable, putting future residents' health at risk.

Should you need additional information or clarification on any matter please do not hesitate to contact me.

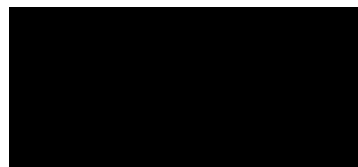
Yours sincerely,



David Parke

Assistant Director Infrastructure &
Sustainability

Cambridge & Peterborough
Integrated Care Board



Mark Adams MRTPI

Town Planning Partner

NHS Property Services Ltd