LAVENHAM PARISH COUNCIL

FORMAL EXAMINATION OF BABERGH AND MID SUFFOLK DISTRICT COUNCILS JOINT LOCAL PLAN

Matter 8 Healthy Communities and Infrastructure Policies

The Joint Local Plan

The Joint Local Plan as submitted in November 2020 states:

"16.21 The Councils have worked closely with SCC **through the IDP** [Infrastructure Delivery Plan 2020] to identify the educational requirements needed to accommodate growth in the Plan ... the delivery of new schools and school **expansions is important for the delivery of the Plan**

Similarly, with high demand for school places within the Districts it is important that existing educational facilities are offered a level of protection.

16.22 Similarly, the Council has worked closely with the relevant healthcare **providers** ... it is assumed that the ongoing healthcare needs of the population will need to be met at a level deemed acceptable by the relevant healthcare providers, on a continuous basis."

Elsewhere in its IDP, the two Councils confirm they have also consulted with the local CCGs (of which there are two relevant to this Local Plan).

Further submission on the issues raised by Examiners

8.3 a Is the definition of community services in policy LP31 reasonable?

This is addressed in our submission on Matter 6 and Tourism.

- 8.1 c In broad terms will the policy be effective in ensuring the provision of infrastructure and local services necessary to meet future development needs?
- 8.5 a Does the Infrastructure Delivery Plan (Doc ER01) provide the robust evidence necessary to justify policy LP33 ...
- 8.5 b ... with regards to the need to address cumulative impacts?

Education

The use of PAN in isolation of other standards is flawed. If applied strictly it leads to the combination of year groups, substandard outdoor and specialist space (such as the absence of dedicated IT and laboratory rooms) and fails to provide space adequate for wheelchair users. 1.63 sqm per pupil in classes of 30 (the PAN standard) does not allow for any wheelchair access in a classroom. As the sole basis for capacity calculation it represents institutionalised prejudice towards the disabled population.

However, in the IDP, the two Councils commit to a different methodology and one that demonstrates the local school is already ABOVE its maximum capacity and thus has no capacity for the planned growth. Lavenham is an example of the IDP not being worked through to its consequences within the JLP (while using very different planned housing assumptions from those already approved or in the plan itself).

Both are grounds for the entire JLP being rejected.

The IDP costs Lavenham as needing just £0.015m CIL and s 106 (only allocating CIL for pre-school) and thus assumes that the 0-11 population will rise cumulatively 2011-2036 by *just 20* for a housing *cumulative* growth of 241 new dwellings in the same period. By just including a proportion of planned for 2018-2036, the JLP fails to assess the cumulative impact of that delivered 2011-2018 (often above plan).

Based on that single incidence of variance between IDP and JLP assumptions, we question the validity of the Infrastructure Delivery Plan and whether it has accurately assessed the cumulative impact of housing development (including windfall) since 2011. The current assessment is based on 80 new dwellings at 0.25 *new 0-11 yo per household* when considerably more new households have been delivered.

The regional norm for new housing is that on average 1.02 householders of primary school age are found in each new house (source Suffolk Observatory and ONS). On that basis alone, s 106 and CIL combined for Lavenham should be £0.712m - against which a figure of £0.015m is mythical.

2001-2011 saw an increase of 103 new dwellings but a net gain of 48 dwellings (due to the increase in holiday lets) leading to a population increase of 28 in the 0-11 year age group (despite a reduction in overall population). Even at that rate this derives an increase over 2011-2036 of 175 pre and primary school age pupils during the life of the cumulative assessment to 2036 and not 20.

However, the mix of proposed houses is being targeted towards families, social and affordable housing and is predicted to see a higher than Lavenham average rise in the 0-11 age group (that is more in keeping with the published regional norms).

There is no evidence that the local community has been involved in an assessment of its local school, while the use of PAN as the planning assumption prejudices against teachers and students whom are disabled and has contributed to the local school being downgraded from Outstanding to Good due to *inadequate outdoor space*.

We do not believe the Infrastructure Delivery Plan (IDP) is either well-constructed or is adequate to the task of supporting the growth proposed in the Local Plan. Its assumption of 0.25 *0-11yo per new dwelling* is contradicted by analysing 2001-2021 growth and by published regional norms of actual household size. Its assumed level of increase in housing is not that found in the JLP.

We question the basis of calculating infrastructure therefore and submit that the Local Plan should be rejected *in its entirety* until a fit for purpose Infrastructure Delivery Plan can be constructed, consulted on and *independently* assessed.

What educational space or plot size is required for Lavenham?

We provide two examples (local educational and local healthcare infrastructure) by way of illustration of a **general** fault in the IDP methodology and thus these are not submitted under Matter 9 as specific issues.

According to the IDP, typically, a new primary school of 420 places would require 2.2ha of land. Lavenham requires a minimum of 140-240 places by 2036 (and the potential to rise to 300 based on proposed housing if we achieve regional norms for new houses).

Proportionately this requires a plot of **12,500-15,700 sqm** or **1.25ha**.

If we apply the IDP figures to the current approved housing by 2021 (the starting position), a PAN of 140 (as assessed by SCC and Babergh as the maximum capacity) CURRENTLY requires a plot of 7300 sq m or 0.73ha.

The current plot however is **under 0.1 ha** at around 500 sq m.

The joint authorities' own costing in paragraph 3.5.2 of the IDP (*if applied to either expansion or new build to meet the 7300 sqm target they have used*) gives rise to a range of £3.34 to £4.05 million build (excluding land and infrastructure) which matches the locally assessed figure of £3.3 to £3.8m.

In what world does this give rise to a derisory requirement of just £0.015m CIL and £0 s 106 to address infrastructure, when their own Infrastructure costing methodology shows over two hundred times that figure is required?

Moreover, their costing is then based on one 0-11 yo per 4 dwellings when the regional norm is 1.02 *per dwelling*. On what basis and with what evidence do they assume a 75% reduction in that age group specific to Babergh or to Lavenham when we have seen a rise in 2001-2011 higher than that locally?

Certainly, Babergh's plans are unsafe until we have sight of the next Census 2021 and thus understand the true impact on population of current developments that can then be used to forecast future need.

Healthcare

On page 65, the Infrastructure Delivery Plan uses yet another different figure for healthcare infrastructure and this time quotes cumulative growth 2011-2036 under the JLP *as just 20 new houses* in total.

Local primary healthcare has already seen waiting times move from 3 days for routine 2011-2018 to 3 weeks for routine 2018 to date. My own experience was of a wait May to August to discuss a blood test result requested by the practice and marked as **HIGH PANIC** by the pathologist. This is not an isolated experience. The image of Corporal Jones running in circles crying "Don't Panic! Don't Panic!" for 4 months comes to mind.

The space within the existing medical practise is then below the sq m needed for the average number of GPs required to serve our village population at present (let alone an increase due to new housing).

Professor Carr-Hill identified (in the research upon which the new GP contract is based) that new resident numbers place an additional burden on GPs regardless of age and deprivation (as subsequently built into the M11 corridor housing assessment). The impact of new residents is greater on primary healthcare than the impact of deprivation or age.

Significant new housing as planned and approved (certainly the accumulated position is in excess of 238 and not 20) will have a major impact on new resident numbers (in the range 476 to 970) to which windfall must be added. This is not low growth but growth that requires mitigation [1]

On the basis of this one example, the methodology used for the IDP is clearly flawed and the entire Plan should be rejected.

May 2021

Footnotes

[1] The Joint Local Plan at 09.11 uses the following for 2018 to 2036

Already identified Total

Lavenham 98 118

Neither figure accords with the IDP figure used of just 20 in the IDP on page 65, thus Infrastructure assumptions and new housing assumptions are somehow disconnected.