

Dear Sir/Madam

Further to your attached email of 9/11/18 seeking comments on the Malvern Town Neighbourhood Plan, I wish to comment as follows on behalf of Worcestershire Acute Hospitals NHS Trust in respect of Policy MC2: Healthy Communities (replicated below)

This policy statement and also later clause 5.5.9, also replicated below, emphasise the impact of population growth upon primary health care facilities but the impact is equally significant upon secondary healthcare facilities for which similar legal agreements or CIL contributions should be obtained to improve the capacity of NHS secondary health care facilities. In the case of secondary healthcare (eg A/E services) for Malvern residents it should also be borne in mind that the nearest facility is the Worcestershire Royal Hospital for most forms of secondary care as Malvern Hospital is only a community hospital offering limited acute healthcare services

**Policy MC2: Healthy Communities**

*Proposals for new major residential development should demonstrate that there is sufficient capacity in the General Practices and Dental Practices within the Neighbourhood Plan Area to accommodate the resultant population from the development or make an appropriate contribution through a legal agreement or by a Community Infrastructure Levy payment to improve the capacity of NHS health facilities where necessary.*

*5.5.9. The 800 proposed houses at NE Malvern allocation will be the biggest immediate threat to primary care in Malvern. St Saviour's had to close its list to new patients earlier in the year during the merger due to their lack of capacity to take on additional patients. NHS SWCCG submitted a request for a S106 contribution in March 2017 relating to application ref. 15/01625/OUT21 for a financial contribution towards the development of an extension to St Saviours Surgery to meet the demand generated from the future residents of this development.*

Other forms of healthcare, including secondary hospital care, are briefly referenced in clause 5.5.10 replicated below but it should be made clear that the same proviso as is noted in policy MC2 above is also applicable to secondary health care ie proposals for new residential development should demonstrate there is sufficient secondary acute healthcare capacity within local Worcestershire Acute Hospitals NHS Trust healthcare facilities to accommodate the growth or make an appropriate CIL or section 106 contribution to improve the capacity

In addition clause 5.5.10 should also add Worcestershire Acute Hospitals NHS Trust to the list of NHS organisations listed of which the CCG is one other

*5.5.10. The impact of future residential proposals on primary, secondary and community health care will need to be assessed. There are many organisations that provide health services in the area including the NHS, CCG, WCC, individual General Medical and Dental Practices and other service providers such as Fortis. Applicants should contact the NHS South Worcestershire CCG to understand the current provision of health care and how it may be affected by their proposals. The applicant should demonstrate with the application that, following dialogue with healthcare providers and commissioners, there is sufficient provision within the catchment area. If there isn't, applicants may need to make provision or contribute towards the provision of healthcare facilities.*

Regards

Ruth

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