NHS
Lancashire and South Cumbria
Integrated Care Board

Integrated Care Board

Date of meeting	7 December 2022
Title of paper	Section 106 / Community Infrastructure Levy Policy and Procedure for Health Facilities
Presented by	Sam Proffitt
Author	Alistair Rose/Phil Hargreaves – Strategic Estates Team
Agenda item	14
Confidential	No

Purpose of the paper

To approve a policy for the ICB relating to future Section 106/Community Infrastructure Levy Funding allocations.

Executive summary

Section 106 (S106) of the Town and Country Planning Act 1990 enables a Local Authority to enter into an agreement with a landowner or developer as part of the planning application process. S106 relates to individual and specific developments and their implications on public services.

The Planning Act 2008 introduced the Community Infrastructure Levy (CIL) which is similar in effect, for the purpose of this Policy both S106 and CIL are considered likewise in approach in that they provide monies for public services through contributions by developers in return for securing planning permission.

A S106 or CIL agreement will contain legally enforceable planning obligations that may include payment towards infrastructure, roads, schools or for a specific number of dwellings to be affordable housing within the overall development for housing schemes.

The Section 106 Monies and Community Infrastructure Levy Funding Policy for Health Facilities is attached.

Recommendations

The Board is asked to:

- Approve the Section 106 / Community Infrastructure Levy Policy
- Note consequential actions by the Strategic Estates Team

Governance and reporting (list other forums that have discussed this paper)

Meeting	Date	Outcomes
Finance Core Team meeting	4 October 2022	Policy to progress for ratification at Board

Conflicts of interest identified				
None				
Implications				
If yes, please provide a brief risk description and reference number	**Yes**	**No**	**N/A**	**Comments**
Quality impact assessment completed				
Equality impact assessment completed				
Data privacy impact assessment completed				
Financial impact assessment completed				
Associated risks				
Are associated risks detailed on the ICB Risk Register?				

Report authorised by:	Sam Proffitt, Executive Director of Finance

Section 106 Policy / Community Infrastructure Levy Policy and Procedure for Health Facilities

1. Introduction

Section 106 (S106) of the Town and Country Planning Act 1990 enables a Local Authority to enter into an agreement with a landowner or developer as part of the planning application process. S106 relates to individual and specific developments and their implications on public services.

The Planning Act 2008 introduced the Community Infrastructure Levy (CIL) which is similar in effect, for the purpose of this Policy both S106 and CIL are considered likewise in approach in that they provide monies for public services through contributions by developers in return for securing planning permission.

A S106 or CIL agreement will contain legally enforceable planning obligations that may include payment towards infrastructure, roads, schools or for a specific number of dwellings to be affordable housing within the overall development for housing schemes.

Additionally, the NHS has the opportunity to benefit from S106/CIL monies by agreement with planning authorities through negotiation, and where it can be established that an increase in the local population may put additional pressure on NHS services in particular Primary Care services, this can be demonstrated as demand growth in proportion to population growth in the local area.

2. Section 106 / Community Infrastructure Levy Policy and Procedure

This S106 / CIL Policy and Procedure when adopted by the ICB, enables the NHS to confirm to all the Local Authorities in its operating area that it has taken over the role of statutory consultee on behalf of the NHS. This role was previously held by CCGs, some of which held and used similar policies to successfully secure financial contribution to facilitate the expansion and development of Primary Care Facilities.

There is no requirement for the ICB to have a S106 / CIL Policy, but it does need one if it is to confirm its role in the planning application process and beneficiary of future monies.

S106/CIL applications are agreed on a case by case basis and are not retrospective, **ie** future planning applications after this policy have the opportunity to benefit from this

funding but applications that have already been negotiated and agreed will not have included the NHS and no additional monies will be made available to the NHS for related developments.

Developer contributions remain with the respective local authorities and are made available / called on to support future Health developments, eg, an extension to Ingol Health Centre in North Preston is being part funded by a previous S106 contribution to the CCG.

The Section 106 Monies and Community Infrastructure Levy Funding Policy and Procedure for Health Facilities can be found here:
http://www.lancashireandsouthcumbria.icb.nhs.uk/additionalpapers

3. Conclusion

Upon agreement of this policy and procedure, the consequential engagement with local authorities will be by the Strategic Estates Team.

Each local authority in Lancashire and South Cumbria will be written to, forwarding the policy and introducing the Strategic Estates Team as the point of contact regarding future S106 allocations.

As and when future housing developments are proposed to Local Authorities they will contact the ICB (Strategic Estates Team) who will engage with ICB primary care colleagues regarding their current and future needs in the areas proposed for future development. These needs and associated costs will form part of the negotiations with local authorities and developments.

4. Recommendations

The Board is asked to:

- Approve the Section 106 Policy and Procedure
- Note consequential actions by the Strategic Estates Team

Alistair Rose

7 December 2022