### GMSF 2018 Topic Paper T1b: Social Infrastructure

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1 Introduction

1.1 A series of Topic Papers have been prepared to support the GMSF consultation. The Topic Papers explain how this iteration of the draft GMSF policies and allocations have been derived based on the evidence, consultation comments and Integrated Assessment on the 2016 draft GMSF.

1.2 This Topic Paper focuses on the supporting social infrastructure required by the anticipated growth of Greater Manchester. The scope of this paper is limited to the consideration of health and social care and education. However, it is recognised that social infrastructure is a broad area extending beyond the realms of health and social care and education into cultural facilities, leisure and greenspace.

1.3 Other types of infrastructure are considered in the following topic papers:

- Physical infrastructure;
- Transport;
- Natural Environment - covering flood risk and water management; and
- Waste and minerals planning are covered by their respective Joint Development Plan Documents.

1.4 The provision of social infrastructure to meet the demands of new development over the GMSF plan period has been identified as an essential requirement. In response to this, the ten Greater Manchester districts are working with a range of stakeholders, including their respective education planning and health and social care commissioning colleagues, to provide evidence on the potential requirement for new or expanded social infrastructure facilities and services to meet the demand arising from all new development.

1.5 At this stage the principal focus of this Topic Paper is the provision of health and social care and education infrastructure and it is therefore split thematically.

1.6 The GMSF is a joint plan of all ten local authorities in Greater Manchester, providing a spatial interpretation of the Greater Manchester Strategy which will set out how Greater Manchester should develop over the next two decades up to the year 2037. It will:

- Identify the amount of new development that will come forward across the 10 districts, in terms of housing, offices, and industry and warehousing, and the main areas in which this will be focused.
- Ensure we have an appropriate supply of land to meet this need
- Protect the important environmental assets across the conurbation.
- Allocate sites for employment and housing outside of the urban area.
- Support the delivery of key infrastructure, such as transport and utilities.
- Define a new Green Belt boundary for Greater Manchester.
2 Policy context

National Planning Policy Framework

2.1 This section covers the policy content relevant to social infrastructure outlined in the revised (2018) National Planning Policy Framework (NPPF).

2.2 Paragraph 20 of the revised NPPF requires strategic policies to set out an overall strategy for the pattern, scale and quality of development, and to make sufficient provision for community facilities (such as health and education infrastructure).

2.3 Paragraph 21 highlights that strategic policies will need to address any relevant cross-boundary issues in order to provide a clear starting point for any non-strategic policies. Paragraphs 24-27 state that local planning authorities are under a duty to cooperate with each other, on strategic matters that cross boundary issues. Therefore strategic policy-making authorities should engage with local communities and relevant bodies such as infrastructure providers, to ensure that a positively prepared and justified strategy is produced.

2.4 Paragraph 34 establishes that plans should set out the contributions expected from development, including that needed for education and health, but that such policies should not undermine deliverability of the plan.

2.5 Paragraph 92 advises that planning policies and decisions ensure an integrated approach to considering the location of housing, economic uses and community facilities and services in order to provide the social, recreational and cultural facilities and services that communities need.

2.6 Paragraph 94 emphasises the key role of local planning authorities in planning for education through the plan making and decision-taking process to ensure a sufficient choice of school places is available to meet the needs of existing and new communities. Local planning authorities should take a proactive, positive and collaborative approach to meeting this requirement, and to development that will widen choice in education. Furthermore it is recommended that local planning authorities should work with schools promoters, delivery partners and statutory bodies to identify and resolve key planning issues before applications are submitted.

2.7 At a non-strategic level paragraph 28 of the NPPF highlights the potential role played by local and neighbourhood plans in setting out more detailed policies for specific areas, neighbourhoods or types of development that can include the provision of community facilities at a local level.
Planning Practice Guidance

2.8 Unlike Health and Wellbeing the Planning Practice Guidance (PPG) does not contain a specific section relating to education. However, there are a number of relevant mentions of infrastructure within the following sections of the PPG which are equally applicable to planning for both health and education infrastructure:

- Community Infrastructure Levy;
- Plan-making; and
- Planning obligations.

2.9 **Community Infrastructure Levy** – the ‘levy’ is a tool for local authorities in England and Wales to help deliver infrastructure to support the development of the area. Therefore the levy can be used to fund a range of infrastructure, including schools, hospitals, and other health and social care facilities, to support the GMSF.

2.10 **Plan-making** – Strategic policy making authorities are required to cooperate with each other, or other bodies when preparing, or supporting the preparation of policies which address strategic matters including community infrastructure.

2.11 **Planning obligations** – These are used to mitigate the impact of unacceptable development to make it acceptable in planning terms. Developer contributions for infrastructure can be achieved through a number of mechanisms (Community Infrastructure Levy; section 106 agreements; and section 278 highway agreements). Generally the planning obligations route is how most local planning authorities (LPA) mitigate against the unacceptable impact of a development on the provision of education within that location.

2.12 Critical to the consideration of a policy covering planning obligations is an understanding of development viability through the plan making process. Principally this means that all planning obligation requirements: health, education, open space, affordable housing and any other policy requirements must be considered together in order to determine whether they would prevent development from going forward.

2.13 The PPG emphasises that discussions about planning obligations should take place as early as possible in the planning process. Therefore early engagement with all parties with an interest in a site and relevant infrastructure providers is recommended.

2.14 **Health and Wellbeing** – This section advises LPA’s to ensure that health and wellbeing, and health infrastructure are considered in local plans and in planning decision making.

2.15 The PPG sets out the main health organisations that are responsible for commissioning health services and facilities. It also identifies key groups that LPA’s should consider engaging and consulting with in the local health and wellbeing system such as Health and Wellbeing Boards, Clinical Commissioning Groups (CCG) and NHS England.
2.16 The PPG confirms the importance of consulting with these organisations: “These bodies in consultation with local healthcare providers will be able to assist a local planning authority regarding its strategic policy to deliver health facilities and its assessment of the quality and capacity of health infrastructure as well as its ability to meet forecast demand. They will be able to provide information on their current and future strategies to refurbish, expand, reduce or build new facilities to meet the health needs of the existing population as well as those arising as a result of new and future development.”

2.17 Furthermore the PPG emphasises the need for cooperation between LPAs, the CCGs and NHS England in the decision making process where the impact of new development “…would have a significant or cumulatively significant effect on health infrastructure and/or the demand for healthcare services.” This is identified as assisting LPAs to consider whether the identified impacts on health infrastructure should be addressed through developer contributions or a planning condition.

2.18 Although the above relates to decision taking it clearly has an implication for plan making, specifically in setting the policy basis for developer contributions either through Section 106 or funding through the Community Infrastructure Levy.

Other Policy Considerations

2.19 The 1944 Education Act places a statutory duty upon local authorities to secure sufficient school places within their areas. The local authority acts as the admissions authority for community and voluntary controlled schools within its area, a requirement of this role is to annually set out the admission arrangements that comply with the relevant law and regulations before the beginning of each school year. Under current circumstances this provision of school places has to be met in collaboration with other providers such as voluntary aided schools; academies and free schools.

3 Summary of evidence

3.1 Planning for the types of social infrastructure covered by the topic paper is challenging because of the complex nature of service procurement, delivery and the provision of facilities. Each subject area is covered separately to give an overview.

Education

3.2 Pressure and demand for education facilities arises from increases in the size of the population and crucially changing demographics. It is important to recognise that the need for education facilities and services is influenced by a combination of factors:

- Population growth;

1 Planning Practice Guidance, Health and Wellbeing - Paragraph 003 Reference ID: 53-003-20140306
2 Planning Practice Guidance, Health and Wellbeing - Paragraph: 004 Reference ID: 53-004-20140306
The birth rate cycle;
Fluctuations in migration between and within areas;
Planned housing growth;
Parental choice; and
The standards of education available.

3.3 New homes are being proposed within the GMSF to accommodate a growing population. Thus, the demand for education facilities and services will be partially influenced by the pattern of new development, whether located within strategic sites, or from the existing baseline supply of housing sites throughout the urban area of Greater Manchester. However, it is important to note that the level of housing proposed through the baseline supply makes up the majority of proposed development over the GMSF plan period up to 2037. Therefore, careful consideration needs to be given to the location of new or expanded education facilities based on an assessment of the overall spatial distribution of all housing sites rather than focusing on just the strategic sites.

3.4 Whilst data on school capacity collected by districts for the Department for Education (DfE) is very specific the equivalent approach to pupil place planning is not. Given this flexibility, variations exist between forecasting methods, data inputs and assumptions used by individual local authorities and therefore pupil place planning varies across the GM.

3.5 At a GM level there is a Pupil Place Planning Group that meets throughout the year. This group discusses school place planning both at a district and Greater Manchester level and feeds into the other regional networks on a range of issues.

3.6 In response to the evidence required to support the development of the GMSF the ten Greater Manchester districts are liaising with their respective education planning colleagues in order to plan for potential new or expanded education facilities required to meet the demand arising from new development.

Health

3.7 Pressure and demand for health facilities and services arises from increases in the size of the population, changing demographics, and changing health needs within the population. New homes are being proposed within the GMSF to accommodate a growing population and to meet the needs of groups with specific housing requirements, e.g. families with children, older people and people with disabilities.

3.8 It is important to recognise that the need for health facilities and services is influenced by a combination of factors: the changing health needs of a growing population and the locations where those people may live. Therefore the additional demand for health facilities and services will be partially influenced by the pattern of new development, whether that is located at the proposed strategic sites, or from the new homes built as part of the housing baseline supply. It is also important to note when planning for health
as well as education that the level of housing proposed from through the baseline supply makes up the majority of proposed development over the GMSF plan period up to 2037. Therefore, careful consideration needs to be given to the location of new or expanded health facilities based on an assessment of the overall spatial distribution of all housing sites rather than focusing on the strategic sites.

3.9 The planning of health infrastructure involves a wide range of stakeholders across GM including:

- Department for Health;
- NHS England Clinical Commissioning Groups (CCGs);
- Acute Hospital Trusts;
- NHS Property Services;
- GM Health and Social Care Partnership;
- Local Strategic Estates Groups;
- Local Authorities – including Adult and Children Social Care; and
- Other healthcare providers.

3.10 The ten GM districts are cooperating with their respective Clinical Commissioning Groups (CCGs) in order to provide evidence on the potential health facilities and staff required to meet the demand arising from new development. This has been overseen by the GM Health and Social Care Partnership and been carried out through district Strategic Estates Groups.

3.11 Conclusion

3.12 Social infrastructure is as important as physical infrastructure and Greater Manchester requires additional and enhanced social infrastructure provision to meet the needs of our growing and diverse population and to deliver the Greater Manchester Strategy. However, Across the districts there has been varying levels of engagement and consistency in the approach to planning for health and social care.

3.13 The organisation, ownership and planning of social infrastructure is extremely complex cutting across multiple services such as health and education and involving multiple stakeholders. Furthermore taking education as an example, local authorities retain the responsibility for school place provision without the means to directly control capacity.

3.14 A range of activities are already underway led by individual districts and / or the GMCA through the portfolios on:

- Healthy Lives and Quality Care
- Education, Skills & Apprenticeships
- Culture
- Green City region
- Safer and Stronger
To ensure we are best placed to respond to social infrastructure challenges work is underway to look at the following types of infrastructure, education, health and wellbeing, culture, leisure and greenspaces. The work is aiming to:

- Understand the social infrastructure pipeline in Greater Manchester linked to Greater Manchester’s development plans
- Understand the consistency of data and forecasting used to plan social infrastructure across Greater Manchester
- Review barriers and impediments to delivery of social infrastructure
- Assess what more is needed at District or Greater Manchester level to secure and improve pipeline delivery

A number of initial interim findings from the work which will be further developed and reported to the GMCA in the coming months, are as follows:

- Whether a common data strategy across Greater Manchester would help to inform social infrastructure planning
- Whether a social infrastructure advisory group would be helpful to facilitate consistency
- How short and long term requirements to support growth aspirations can be better understood and co-ordinated across Greater Manchester, where appropriate.

Summary of consultation

The characteristic responses from individuals through consultation on the Draft GMSF (October 2016 – January 2017) highlighted the existing strain on the education and health services and other infrastructure, either:

- From personal experience, such as congestion and pollution caused by parents driving children to school or not being able to easily book a General Practitioner appointment; or
- From perceived issues, such as existing school place capacity, classroom overcrowding and the potential impact of overcrowding on educational attainment or the inability of the local hospital to cope with people attending Accident and Emergency.

The consultation also highlighted a significant level of public concern over a number of issues relating to education, including:

- The impact that new development would place on existing education and health services;
- How was the new demand for education and health services being planned for and
- Whether the strategic sites would contain new social infrastructure facilities.
4.3 These concerns should have been addressed by the wording and policy content in the Draft GMSF. However, it is clear from the feedback that people were either not convinced by the policy wording or missed the policy message.

5 Summary of the IA of the 2016 Draft Plan

5.1 An Integrated Assessment was produced to support the first draft of the GMSF. The Integrated Assessment is a key component of the GMSF evidence base, ensuring that sustainability, environmental, equality and health issues are addressed during its preparation. The Integrated Assessment combines the requirements and processes of the Sustainability Appraisal, Strategic Environmental Assessment, Equality Impact Assessment and the Health Impact Assessment into one document (the Habitat Regulation Assessment of the GMSF was completed separately by Greater Manchester Ecology Unit). The Integrated Assessment carried out an assessment of the draft GMSF policies by testing the potential impacts, and consideration of alternatives, against the plan's objectives and policies. This ensures that the potential impacts from the plan on the aim of achieving sustainable development are considered and that adequate mitigation and monitoring mechanisms are implemented.

5.2 The Integrated Assessment (IA) framework is made up of a series of objectives and assessment criteria which have been developed specifically for the GMSF. The IA Framework is used to identify the likely social, economic and environmental effects and guide mitigation and policy development. Using assessment criteria to appraise policies and sites helps the assessor to arrive at a conclusion about potential impacts in a methodical and consistent manner, and helps stakeholders to understand the reasoning behind the assessment.

5.3 In relation to Education, Skills and Knowledge (Policy GM21), the IA’s suggested potential mitigation/policy inputs are set out below, which will need to be considered to inform the revised draft of the GMSF:

- The policy should make the link between poverty/deprivation and education. New facilities should be targeted at areas of high deprivation;
- Where new education and training facilities are delivered the benefits should be felt by the existing communities as well as those new people moving into the area;
- Any new education provision as part of new development should try to link to existing communities; and The accessibility of new education facilities (e.g. for disabled people) should be considered and this should be linked to the policy on accessibility, design and social inclusion.

5.4 In relation to Health (Policy GM22), the IA’s suggested potential mitigation/policy inputs are set out below, which will need to be considered to inform the revised draft of the GMSF:
5.5 Where new health facilities are developed, ensure access for existing and new communities to foster good relations (by providing benefits to existing communities).

5.6 In addition social infrastructure was picked up in the assessment of many of the allocation policies, with the following suggested potential mitigation/policy inputs as set out below, which will need to be considered to inform the revised draft of the GMSF:

- AG1 Airport City South, AG3 Timperley Wedge, WG1 New Carrington, WG2 Western Cadishead and Irlam, WG3 Port Salford, WG4 Land at Flixton Station, NG1b South of M62, NG1c Whitefield, NG2 Land east and west of A627M, EG1 Ashton Moss/Littlemoss, ELR2 Cleworth Hall, M61C1 Junction 6, M61C2 Hulton Park and Chequerbent, M61C4 West of Gibfield, M6C1 Junction 25, OA2 Elton Reservoir, OA3 Walshaw, OA4 Holcombe Brook, OA5 Seedfield, OA6 Baldingstone, OA12 Robert Fletchers, OA13 Bamford/Norden, OA14 Land in Roch Valley, OA15 Trows Farm, OA16 Land to the North East of Smithy Bridge, OA17 Land at Lane End, OA18 East Boothstown, OA19 Hazelhurst Farm, OA20 Woodford, OA21 High Lane, OA22 Land off A34, OA23 Heald Green, OA24 Sidebottom Fold, OA25 South Tameside, OA26 Mottram M67 North and South, OA27 North Ashton, OA28 Liverpool Road, Hindley, and OA29 North of New Springs - Ensure any new provision of education and healthcare facilities are accessible to all and that local capacity is considered throughout future masterplanning stages.
- NG1a North of M62 – Suggested revision to policy wording to address absence of reference to healthcare facilities.
- OA24 Sidebottom Fold – Suggested revision to policy wording to address car dependent nature of development in relation to schools and healthcare facilities.
- ELR1 North of Mosley Common – Consider local capacity for schools and healthcare and how to integrate with existing communities.

6 GMSF Strategy, Policies and Allocations

6.1 In the 2016 draft of GMSF, there were a number of policies relating to the provision of social infrastructure: GM21 Education, skills and knowledge, GM22 Health and GM25 Allocations. None of these policies were wholly aimed at the provision of social infrastructure, rather they contained policy wording that covered a range of issues relating to the theme. In addition the individual policies covering the site allocations identified, where appropriate, the level of social infrastructure to be provided or policy wording identifying the mechanism for delivering new facilities, such as developer contributions (CIL and s106).

6.2 Changes are proposed to this approach in response to the ongoing development of evidence, stakeholder engagement, public consultation and the suggestions of the IA 2016. For example, there is no longer an overarching allocations policy (GM25), but an expectation that all relevant thematic policies will be applied to all development.
In addition to the key policy changes set out above, it is worth noting other means of providing clarity regarding social infrastructure provision. In line with the guidance set out in the PPG, an Infrastructure Funding Statement will be prepared by each Local Authority on an annual basis. This will demonstrate the delivery of infrastructure over the next five years, setting out the anticipated funding from developer contributions, and how these contributions are intended to be prioritised and spent by each Local Authority. This funding statement will contain information on a variety of types of infrastructure, and will not be limited to those types covered within the scope of this topic paper; it will set out a range of infrastructure projects and actions for the GMCA, partner organisations and delivery agencies. For each implementation action or project, information about responsible delivery bodies, a timescale for delivery and a degree of certainty/commitment will be provided.

There are now proposed to be a group of policies which relate to the implementation, funding and monitoring of the GMSF. On the specific needs of infrastructure provision in relation to development, many of these requirements are now integrated into the relevant chapters within the GMSF; for example requirements relating to health facilities are set out in the Policy GM-E 5 'Health'. Taking a more holistic approach to securing infrastructure, supported by a suite of implementation policies, provides a more robust approach the delivery of GMSF, thus addressing the concerns raised at the last stage of public consultation.