



Leicester
City Council

Minutes of the Meeting of the
JOINT MEETING OF THE ADULT SOCIAL CARE SCRUTINY COMMISSION AND
THE HEALTH & WELLBEING SCRUTINY COMMISSION
Virtual Meeting using Zoom

Held: MONDAY, 26 OCTOBER 2020 at 5:30 pm

P R E S E N T:

Councillor Kitterick (Chair)
Councillor Joshi (Vice Chair)

Councillor Aldred
Councillor Batool
Councillor Chamund

Councillor Fonseca
Councillor Kaur Saini
Councillor March

Councillor Thalukdar

In Attendance

Councillor Clair, Deputy City Mayor – Culture, Leisure and Sport
Councillor Dempster, Assistant City Mayor – Health
Councillor Russell, Deputy City Mayor – Social Care and Anti-Poverty

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1. WELCOME AND INTRODUCTIONS

Councillor Patrick Kitterick was appointed as Chair for the meeting.

The procedure for the meeting was outlined to those present. At the invitation of the Chair, all Councillors and officers present at the meeting introduced themselves.

2. APOLOGIES FOR ABSENCE

Apologies were received from Councillor Paul Westley. Apologies were also received from Caroline Trevithick, Executive Director of Nursing, Quality & Performance LLR CCGs.

3. DECLARATIONS OF INTEREST

Members were asked to declare any interests they had in the business on the

agenda.

Councillor Joshi declared an Other Disclosable Interest in that his wife worked for the Reablement Team at Leicester City Council.

In accordance with the Council's Code of Conduct, the interest was not considered so significant that it was likely to prejudice the Councillor's judgement of the public interest. Councillor Joshi was not, therefore, required to withdraw from the meeting during consideration and discussion of the agenda items.

4. DRAFT LEICESTER LOCAL PLAN (2020 - 2036) PUBLIC CONSULTATION

The Chair outlined the format for the evening's meeting and also that a number of questions had been submitted by members of the public, who were informed they would be allowed one supplementary question based on their original question.

The Head of Planning gave a presentation, a copy of which had been circulated with the agenda papers. During the presentation, particular attention was drawn to the following points:

- Adult Social Care and Health was a cross-cutting agenda. There were a range of policy areas in the plan, including the nature of housing design of quality, accessibility, looking at active travel, public transport, the health aspects of climate change such as air quality, and employment, jobs and training.
- The Government had issued a consultation which proposed radical change to the local plan process. The consultation, which was due to finish the week of the Scrutiny Meeting, had substantial implications but might take some time for it to be clear as to how and when it would be brought forward.
- The consultation included a whole range of things including 3 different land designations, nationally set development management policies so there would be no local planning policies in local plans, extension of permitted developments, permission in principle, looking for more of a focus on design and design codes with less scrutiny in the form of planning committee and shortened local plan processes. They were also consulting on a new housing methodology which might set different housing targets.
- It was proposed to carry on the process of consulting on the Local Plan which had been delayed due to Covid-19, the document for which had been approved at Full Council in March 2020. It was believed there would be a transition period put in place should the new system be put forward following consultation on the White Paper.
- The government encouraged councils to continue consulting on their local plans, and the authority had taken advantage to consult on two elements of additional evidence and were interested in people's views on them. That evidence had not informed the current draft plan but would be used to support the drafting of the next version of the plan.
- The Government expected councils to adopt 15-year plans. The plan included specific policies when considering planning application. It was

important to evidence the plan as viable, deliverable and achievable, and it was noted planning inspectors would be looking at that aspect closely.

- The plan of Leicester showed a tightly drawn boundary which gave problems in how the development of the city was managed, along with delivery of infrastructure to support the growth of the city.
- The Council had been working in partnership with adjacent district councils in the form of a strategic growth plan which looked longer term to 2050 and was a vehicle to try to agree how the districts could help meet some of the housing demands generated by the growing city. There was in principle a tentative agreement that around a third of the city's growth may need to be reached by redistributing to districts, and more than that in the longer term towards 2050.
- The current requirements the government were setting were quite testing standards and were looking for the Council to provide 1,712 homes a year up to 2036, which equated to almost 30k dwellings.
- An agreement would need to be formally reached with the districts through a Statement of Common Ground on which good progress had been made.
- The adjacent districts, before they would agree to accept any of the Council's housing need, would want to see the Council had looked rigorously and had gone as far as it could in the Local Plan to meet those housing demands.
- The Plan consults on 85 sites for housing and five strategic sites to meet housing demand. It also sets out aspirations for development on the city centre and brownfield sites in the form of a Central Development Area (CDA). The plan shown outlined the individual strategic sites, CDA, strategic employment area and schools proposed.
- The sites total around 21k dwellings when looking at existing developments across the planned period, which left a shortfall of 7.7k houses to be redistributed in agreement with the district councils.
- One part of the additional evidence was a housing needs study, which would be useful evidence to inform the next draft of the Plan. The evidence confirmed overall need position and began to look at, for example, affordable housing, the demographics and potential demand for housing for the elderly, specialist housing, adapted and accessible housing for wheelchair users. It would enable the authority to require developers to provide a certain percentage of accessible and adapted homes, and the information in the study would help shape the level of policy, and also looked at demand for student need over the planned period, and other types of housing, for example, custom build which was a small element of the supply.
- A substantial portion of the development would be delivered in the CDA, but would have a big focus for commercial, retail and leisure amongst other development. A lot of work had been undertaken on trying to define the character areas and where areas might be able to accommodate more of the growth, and which areas may need to be retained and protected, for example, areas of high levels of historical heritage quality.
- The health and wellbeing aspects of the plan were cross cutting. Working closely with Public Health colleagues a new health and wellbeing chapter had been introduced to the Plan which looked at how to reduce health

inequalities and set a policy on how tools could be employed such as health impact assessments in terms of major developments in the Plan to be able to test and keep track of how the Plan was dealing with health issues.

- There were other standards and policies to be discussed, for example, the nature and type of housing, space standards, how to facilitate well-designed development, well located in terms of travel, to enable access to jobs, food growing on allotments, open space, and air quality.
- A number of sites in the plan were being allocated for employment purposes, and to promote better quality office development.
- A challenge identified was in striking a balance between retaining and enhancing open space, but also delivering on housing and employment commitments. It was acknowledged that with a combination of population grown and the Plan developing, some green wedge and open space would be lost, though the authority was keen to secure new and improved public open space, for example, the development of a small portion of St Mary's allotments allocated in the 2006 Local Plan generated receipts to be reinvested in other areas such as formal and informal open space, sustainable drainage, and would be the model the Council would be looking to follow on other Council-owned sites.
- There was ongoing work with consultation expected on 2021 on the new Local Transport Plan, and further consultation to be undertaken on the Workplace Parking Levy and the Transforming Cities Programme.
- The city would be looking to improve transport and accessibility and manage the transport and traffic impacts of development in the interests of supporting transport choice and improving air quality.
- The council had produced a new Action Plan on climate change. It was stated there was an issue in terms of energy policy as the government was restrictive on how much discretion local councils would have to be able to implement their own standards in terms of energy policy. Further information was awaited on what the government would say, such as, future homes standards, and if it would allow councils to set their own policies or set them centrally.
- Also touched upon in the Draft Local Plan was well-designed open space with regards to health and wellbeing, affordable housing with viability assessments showing a possible 30% on greenfield sites (less scope on brownfield sites).
- The Council was proposing to adopt the National Space Standards for development citywide, the improvement of local housing policies in terms of houses of multiple occupation, quality design of tall buildings, retaining and enhancement of archaeology and heritage assets, and were looking at how to develop the culture and tourism aspects of the city.
- Other policies to be looked at included the cultural quarter, neighbourhood employment areas and retailing. The government had introduced a very significant new change to the way the Use Class Order operated in respect of commercial uses, which meant those aspects of the Plan would be looked at carefully for the next draft.
- Policies to be adopted included the maintaining and enhancement of the quality of open space in terms of Section 106, Biodiversity net gain was a new requirement coming through with the Environment Bill, and also the

- protection of existing sports pitches and provision of new facilities.
- Under the timetable for consultation it was currently at the Regulation 18 stage for public consultation. The next version of plan will be prepared next year for further consultation prior to being submitted to government for public examination, with anticipated adoption on summer / autumn 2022.

Following the presentation, the Chair asked Members of the public to present their questions in turn and were provided with a response.

Questions from Sally Ruane:

1. What information have UHL supplied in support of their wish to sell off land and buildings on the site of LGH? What information are they required to supply?

Response:

UHL have completed a 'Call for Sites' Land Availability form which sets out basic information about the site's characteristics with an indication of proposed potential development uses and phasing of disposal/development. It recognises the potential retention of some clinical facilities on the site and the need to conclude their current consultation and funding processes.

For a strategic site to proceed to allocation in a Local Plan, a range of information is required about proposed development, how site constraints and necessary supporting infrastructure will be dealt with. The Council would need to have confidence in the deliverability of the development proposal, which will depend largely upon this information. Meetings have been held with the Trust, who have confirmed their intention to submit the necessary information after conclusion of their Consultation currently underway in time for the progression of the next stage of the Local Plan.

Supplementary Question:

- Is there going to be another chance for the public to be involved in that at that stage? Will we be able to be involved in scrutiny like this and ask questions?

Response:

The information will be publicly available and there will be another consultation process and further opportunity to be involved.

2. Does the council have powers to obstruct the sale of land at the Leicester General Hospital if it considers such a sale contrary to the interests of patients and/or public in Leicester?

Response:

The Trust need to comply with the applicable Government regulation in terms of disposal of assets, this is not a matter for planning control nor the Council to

regulate.

The Local Plan should only consider material planning considerations as set out in the National Planning Policy Framework. This can include the scope and extent of community infrastructure needed to support the proposed strategy for development of the city to 2036. The Plan consultation seeks views on an assessment of the potential Infrastructure Requirements (including health provision) available on the consultation website. This assessment will be reviewed and updated for the next round of Local plan consultation so review and comment on this element is particularly encouraged at this stage, and it included information from the CCG, Hospital Trust and other bodies such as the Police and schools.

The council can participate in LUHT consultations relating to the transformation proposals but should not use the Local Plan to seek to influence matters which are subject to other legislative processes and beyond its remit.

Questions from Robert Ball

3. If the site is sold (General Hospital Site), is it possible to reserve it for council house building?

Response:

Housing mix and affordability is considered at a plan level and the Council can obviously seek to deliver council housing on sites in its ownership if they are allocated. In respect of 3rd party owned sites, if allocated in the final adopted Local Plan, this would establish the principle of residential development but not dictate the tenure of the development, beyond the application of any adopted Affordable Housing policy in place at the time a subsequent planning application would be considered.

4. With mooted changes to planning regulations, would the sale of land and buildings on the Leicester General site run the risk of giving us the worst of all worlds – where we lose land which could have been used for health services but do not gain the kind of housing development needed?

Response:

By proceeding with the Local Plan under the present planning system, the uncertainties of the 'Planning for the Future' White Paper proposals can be avoided, provided the plan reaches the appropriate stage (likely Submission Draft) to meet the terms of the Government's transitional arrangements.

If the Plan were to be adopted before the Government introduced the transitional period, there would be a period of almost two and a half years where the Plan would be in place, so it was important to make progress with the Plan now.

Supplementary Question:

- So there is two and a half years reserve time to get this completed?

Response:

No, if the Council get the Plan adopted before the transitional period, there would be no need for a new plan for a 30 month period.

Questions from Steve Score

5. The Local Plan points to significant population growth in the coming decades, and the Office for National Statistics' population projections for Leicester, Leicestershire and Rutland confirm this. However, the hospital reconfiguration proposals currently under consultation, make no provision for the expansion of hospital facilities after 2024. Would the sale of land and buildings on the site of the General Hospital, on the scale outlined, not jeopardise the ability of the local NHS to provide the hospital services, and possibly community services, needed in the years to come?

Response:

This point will also need to be considered in the light of a range of factors such as the future housing targets set by Government, including the potential unmet need being accommodated beyond the city and the next iteration of the Infrastructure Requirement assessment as mentioned above.

The Plan (and the Planning Inspector at Examination) will consider the infrastructure needs and the relative balance of priority between allocating land for residential demands during the plan period as opposed to safeguarding or mothballing a site that the Trust deems not to be required for future health needs.

The arena for testing the demographic and operational aspects of capacity and functionality of health provision would be more properly via the Government's statutory health planning processes, with the Local Plan responding to the resultant land use planning implications.

In the longer term, the adopted Strategic Growth Plan for Leicester and Leicestershire to 2050 envisages up to two thirds of Leicester's future annual housing requirement to be potentially met by the other district councils so distribution of supporting infrastructure does need to be considered beyond the Plan period too.

Supplementary Question:

- Myself and other people have concerns that the Hospital Trust's plans don't necessarily have enough capacity built into them for the future, and presumably that would be a concern for Leicester City Councillors as well. The discussion of the Plan as well as the consultation of the Trust were going on simultaneously, and it seems it would impact on the health and wellbeing of the residents of Leicester. The point made about expansion beyond the city boundaries for housing in the future, obviously all of the

Hospital Trust facilities are provided within the city boundary and if there was not enough capacity then it would impact on those residents within the city boundary as well as those beyond . So it does seem that it will be an issue of concern that the councillors will have to take up as well.

Response:

If Councillors felt there was a more pressing need to safeguard a site for future capacity, then that is a valid question for Councillors to consider. But if the Health Trust and the CCG determine there is a more efficient way of operating, that is tested through the Government's health planning process and is not for the Local Plan. The Local Plan considers the potential need for community infrastructure, but it is not for the Local Plan to determine the best way to respond to the very complex health demands and the funding aspects that health colleagues have to work to.

The Government see a significant priority in terms of meeting housing need, and it was expected that the Planning Inspector would be interested in substantial sites such as this in meeting the City's housing need, particularly if CCG and Health Partners feel there isn't a need to safeguard the three sites. The primary route is the current ongoing transformation consultation.

6. Are there any legal impediments to the sale of the land and buildings?

Response:

The Local Plan needs to be confident that sites would be deliverable and would be looking to test, but any legal issues were a matter for the Trust and not for the Planning Authority.

Questions from Brenda Worrall

7. NHS representatives have stated at a number of public engagement events that the land at the General Hospital can be used to build houses for key workers, including NHS staff. What guarantees are there that, should the site be sold, key worker housing and affordable housing would be the main focus of development on the site of the General Hospital?

Response:

The Trust in disposing of land can prescribe and restrict its future use and development.

If allocated in the Local Plan, this would establish the principle of residential development but not dictate the tenure of the development, beyond the application of any adopted Affordable Housing policies in place at adoption.

Supplementary Question:

- So that means that the NHS representatives who've been saying for quite a few years that the houses would be for key workers and there would be

affordable housing is not up to them to say that?

Response:

They can say that and restrict any sale if that is what they want, but the Council cannot dictate it in its Local Plan allocation.

The Chair then invited questions from Members on the General Hospital site. Responses were given by the Head of Planning.

- Once we dispose of the Leicester General Hospital site, how many dwellings will that provide?
- The services currently provided at Leicester General Hospital are to be moved to the other two hospital sites at Leicester Royal Infirmary and Glenfield Hospital. Will these two hospitals be able to provide the services needed with the expansion of population and the services we will need in years to come?
- It was acknowledged that housing need in Leicester, Leicestershire and Rutland was a major issue, but there were concerns preference was being given to houses rather than future health issues that this might have a detrimental effect in years to come. Would the other two hospitals be able to cope with the sale of the Leicester General Hospital.

Response:

The initial indication was around 600 houses, but the number would be refined as it went through the process. The nature and capacity in which the Health Service would be managed was subject to current transformation consultation and information from the Trust. There was a judgement call in terms of the plan period to 2036, so the indication in terms of balance was between five to six hundred houses, with some retained facilities. The figure was a broad capacity assessment based on typical densities.

- The pre-consultation business case looked at demographics till 2023, but the Local Plan was for 2035. Did this provide difficulties in trying to come to the general overall strategic land uses and hospital capacity? The number of potential users in hospitals could do with better coordination.

Response:

The Local Plan infrastructure study evidence on the website looked at the whole period and relied on health partners responding to the consultation to inform on how to plan for the longer term.

- There was going to be a lot more people in Leicester, Leicestershire and Rutland in 2035 and if they had those concerns they should direct themselves towards those infrastructures?

Response:

There is a study on the website that tries to answer the question and would be refreshed and updated moving towards the next stage of the plan.

- What is the planning use for hospital land which it would be changed from to residential?

Response:

In terms of the use classes order looking at the site as a whole it would be community use.

- Would the infrastructure plan come to a conclusion of how many hectares of potential health hospital related sites were available in the city? If we sell of a huge chunk of available land which would be directly usable for health hospital use and change it to residential, and then in a few years it is needed and a site that large cannot be identified, would the plan measure for that?

Response:

There not a formula for acres of hospital land required for population, which obviously was a complex issue. The Trust and the CCGs would need to give their views, and it would be up to the Council to consider and balance to responses to the consultation.

- To have concerns that the Council was leaving itself without potential expansion space for hospital and health services over the period of the plan to 2035, would that be a legitimate concern?

Response:

Yes, that would be a legitimate concern.

- There is allusion in the pre-consultation business case of the disposal of land around Glenfield Hospital as well as that contained in the proposals for the Local Plan.

Response:

It was not known what land was referred to, other than land at the Paddock off Anstey Lane that had been put forward for disposal. If information was brought forward it would be sent to Members of the Scrutiny Commission.

- It was noted when talking about the climate emergency that it was clear we needed to go further with the policies and how we are tying into that. Is that correct?

Response:

The Climate Emergency Action Plan that the Council adopted recognised the ability to meet aspirations would depend upon the Government and other actions in terms of legislation from the Government. The Government had consulted on things such as improving energy standards but has not yet been clear on how to deliver that requirement if via the building regulations, it would not be a matter for the Local Plan but would apply to all building across the country.

The Council was waiting to see how far the Government would allow individual local plans to go with local standards, as opposed to setting national standards. The Council had commissioned some consultants to look at the art of the possible in terms of climate policy. That work would inform the next draft of the Plan, and there was an intention to go further in developing local policy if the Government allowed this. The White Paper talked about national development management policies which would mean all the development management policies would be national rather than local. There was suspicion the Government would probably centralize the policy rather than allow all different councils to approve their own standards.

- Are we assuming they are going to loosen the standards?

Response:

Not necessarily as the Government may want to meet the zero-carbon commitment nationally and the extent to which they expect local councils to help them with that was not known. The other aspect was if new building standards were to be introduced in local policy they had to be viable, for example, if it was stated that every house needed to be Passivhaus standard, the viability assessment would struggle to get that past the Inspector in terms of the viability test. The work commissioned that would be brought forward with the next version of the Plan would look at the exemplary policy that had been adopted and tested elsewhere in other council's to be implemented as long as it was deliverable in the local market.

- I am concerned about the loss of green wedge and public open space. It was known there was climate emergency and one of the things clear during the pandemic was how much we rely on green spaces. The challenge raised was in a growing city how could we be sure we were retaining enough green space and for now and for the future for the growing number of people to use that?

Response:

The current core strategy standard was 2.8 hectares of open space per head of population. When determining the allocation that number was likely to change with the growing population and less open space. Figures were benchmarked when looking at other cities and this was considered quite a high provision when looking at other cities. It was noted a lot of green spaces were constrained by things like flooding, so could not be built upon. The quality and accessibility of open space, and the ways development could be used to

enhance open space with both formal and informal areas would be considered.

In terms of the overall balance, if the Council decided it wasn't going to allocate sites to meet the Government's housing requirement, it would not get through the examination, and there was a danger the Inspectors would determine which sites should be put in and would be out of the Council's control.

Councillors in adjacent districts were being asked to allocate green spaces to take city growth. If the 7.5k requirement of unmet housing need went up, the districts were likely to refuse to agree this. There was a balance to be struck between meeting the housing target whilst protecting the most important green spaces.

- Wildlife corridors in the city were essential to make sure wildlife can move freely and thrive. How would the loss of green wedge impact on that?

Response:

There was a report on the evidence page on the website that highlighted three to four functions of green wedge and how it currently performed those functions. The Council assessed the relative performance of the bits of green wedge in terms of how they performed against those criteria and were scored. The allocations had taken into account that scoring, but this could be challenged if it was believed the scoring was wrong.

- Here we are encroaching on parts of green wedge. The 15 to 20-year Local Plan is already looking towards greenfield sites. What will happen in another 20 years after we have done this consultation and we look to another plan when there is more need for further land developments? Which land sites are we going to be looking at? Are we seriously running out of brownfield sites and are we now looking into going into greenfield sites in 20, 30, 40 years? What are our future thoughts on the need for further housing in four decades?

Response:

The Strategic Growth Plan had been agreed with adjacent districts, which indicates that two thirds of the city's housing needs beyond 2031 will be accommodated outside of the city boundary, because the districts recognised it could not all be developed in the city. The current annual target was 1,700 per year, and the indicative target in the longer term went down to just over 500 per year. When thinking about future regeneration development, on brownfield land, things like conversion extensions, in future plans those aspects will be debated rather than allocating green sites.

Adjacent councils currently wanted the City Council to go as far as possible with the Local Plan in order for them to sign up to an agreement under the current duty to cooperate, to take some of the city's housing need. One concern was the Government's White Paper which had indicated abolishing the duty to cooperate and had not indicated what they were going to replace it with.

If it was not replaced with something robust there was a danger the city would be expected to meet the future housing targets without the ability to negotiate with the adjacent districts.

- With reference to the local housing needs study 2020, it mentioned that extra care housing had additional facilities, including restaurants, more rooms for domestic support and personal care. What process have we put in place to consult with adult social care homes in the city where either private owners, private companies and care home residents are going to be consulted on this particular matter as well? We have talked about the increasing number of adult population that will require more care in the future. Have we sufficiently addressed this in the Local Plan with reference to limited land space in our city to build care homes, also the impact of the long-lasting Covid-19 for years to come? How will Brexit affect the workforce of adult social care services where there is a lot of uncertainty? How are we going to make sure that people from the European Union will be able to work in the UK as far as Brexit is concerned?

Response:

Planning works closely with colleagues in adult social care. One of the positive aspects of the sites being looked at is that many of them are in council control so a case can be made to use those sites to meet the demands raised above. Housing colleagues and adult social care colleagues are considering the sites closely.

With regards to Brexit, the issue was difficult to answer as it affected retail, jobs and office space. Using specialist advice that had been commissioned through the Plan, the short, medium and longer term issues would be looked at, if as it was hoped Covid-19 was managed within a couple of years through vaccines. It was reasonable to assume the medium and longer-term planning propositions were reasonably sound, but the short-term issues needed to be looked at, such as retail policy and employment policy, employment and skills. Economic health and the ability to be able to recruit care staff was something that Covid-19 would have an impact on, and this was perhaps beyond what the Plan could deal with, which was more about land use and making sure there was enough land use to accommodate demands as opposed to labour supply.

There was a 10-year plan for adult social care which also included children's needs as well as children's transition from childhood into adulthood as well. The plan would be published in the near future and engage Adult Social Care Scrutiny in that discussion. The Plan details the type of accommodation needs over the next 10 years, and quite a lot of work had been done in terms of projecting need going forward. It would also look at the different groups in terms of those that need specialist support such as those individuals that had complex needs, for example, those in hospital with a learning disability that required placement in the community. A lot of work had been done to identify what was needed going forward, including working with development and housing colleagues in terms of housing sites for suitable development in a phased process over the next 10 years. In terms of Brexit, Adult Social Care

were acutely aware of the potential impact on the workforce, who were on average around 16% EU nationals. There had been no particular shortfalls yet in staff leaving the care sector to return to their own country of origin, but it would be closely monitored.

- Looking specifically at site 307, it illustrated a wider concern. The site was a plan for 100 older peoples flats with care, and whilst projections may indicate there would be a lot of older people needing care, there were similar properties across the A6 that seemed not to sell readily and were clearly not as desirable as hoped. The concern was whilst it was short term big returns on investment for the property developers who build the flats, it did not seem responsible to include them in the long-term figures of meeting the housing requirement if they were not the sort of homes people were looking to buy and did not want to live in older people communities.

Response:

Reference was made to the Mary Gee site with a current planning application under consideration. The Local Plan looked at overall need but what it could not do was empirically split out which sites delivered X amount of sheltered housing in a detailed specification. This would be covered by the affordable housing policies and council delivery planning beyond the Plan adoption.

The council has proactive programme planning where it could influence through direct delivery, and as previously noted, a 10-year plan was being developed for sites in the Plan. What could not be influenced was the standard of privately provided care facilities where to what extent could planning control and manage specification of the standard of accommodation. It was difficult from a planning point of view but there other design policies and standards might be considered as the Plan was developed, but should not raise expectations that the Plan would be able to effectively manage the specification of elderly care provision, as there were other regulatory regimes that would look at that quite carefully.

With regards to the target of 1,700 a year, the Council had to report on how it was meeting the target. The Government included formulas in respect of things like student accommodation, halls of residence and sheltered housing, and they all count towards the supply and the housing target, but the Government measure that in a slightly different way. It was important to try to meet all the needs through Housing and Social Care colleagues' activities, but also through the private sector which had a big part to play.

- It is not enough for the market and the property developers to want to build, when there is the same thing is lying disused elsewhere, whereas there is a housing shortage in the city, issues around homelessness. Is there a way of harnessing market forces to try and fix the actual problem rather than just try and chase investment returns, to actually meet what we need, in the context of particularly sheltered flats or older peoples living communities?

Response:

When looking at things like intervention through Section 106, Affordable Housing, the nature of those policies, Housing and Adult Social Care colleagues work closely with the registered providers to look at where the Council can intervene, where it might be able to meet those demands. The Council can look at specifics, such as, providing bungalows if it chooses to do so on its sites when the market chooses not to. However, the Government don't expect that all this will be met through local government intervention, and to meet the Government housing targets there will have to be a significant proportion of private development and a substantial role for the market.

- It is very welcome that the Council will introduce minimum space standards. What kickback have we had to that as pre-Covid-19 we did have developers who were touting the idea of co-living spaces, where residents would have a bedroom and about five or six different households would share the same kitchen facilities and bathroom facilities. Was there anyone still promoting the idea of co-living post Covid-19.

Response:

There had not been too many specific proposals seen. There were a couple of items of good news. Firstly the Government had indicated that the space standards should apply to permitted development which was positive. Currently permitted development was exempt from space standards, i.e. some developments did not need planning permission, for example, conversion of offices to flats, and Planning did not have as much control as it would wish. The Government had now said they have to meet the space standards.

Secondly the Council had adopted and published informal guidance about how it would assert its current policies to negotiate a better standard of accommodation and were finding some developers were looking to provide space standard compliant accommodation more willingly.

There was a lot of private rented sector developments either approved or coming through, and the way the market was now working was that there was an expectation from funders and investors for space standards to be met. There was an expectancy to accommodate space standards more fully into the system and the Council keen to adopt space standards in the local plan. In the context of the White Paper, bearing in mind Government were saying there would not be any local development management policies, just a national set of development management policies, it was expected that they would have space standards embedded in it.

- What themes are emerging in the consultation so far on the documents that have been published?

There had been local concern about sites, and the importance of open space in terms of mental health and wellbeing, and how that had been drawn into sharper focus as a result of current circumstances. One other area was around some of small sites in and around schools and school developments. Letters

had been sent to those living near all sites and leaflets sent to all households in the city and beyond. Responses to the consultation were in the hundreds at this stage.

- The next steps and particularly running consultations during Covid-19 and being in Tier 2, how are we going to try and accommodate the fact that we wouldn't consult ideally as we'd like to, particularly for those with accessibility issues? What are the next steps and how does the rest of the Plan go?

Response

Officers were keen to try and help anyone who was struggling online and were doing as much as they could. Councillors have advised constituents to speak to officers over the phone, especially those who were uncomfortable about using the web, who would like hard copy extracts of bits of the plan or hard copy questionnaires all of which could be accommodated. Following on from the example of the Castle Ward Meeting, a number of virtual ward meetings would be held where officers would be happy to attend and present at those. Hard copies of the Plan documents could not be put in libraries, as they would need to be quarantined for 72 hours after someone had read them. The department was happy to take suggestions on further consultation routes, which would run to 7th December 2020.

Officers would be working hard to go through all representations received in preparation for the next draft plan for consultation due late summer 2021, and hopefully there would be the ability to engage physically more than the current situation allowed.

- In looking at the Local Plan, in future can you cap the new development of restaurants and takeaways when residents say they are finding it difficult because of people coming and causing parking issues.

Response:

There policies drafted in the Local Plan do look at control around restaurants and hot food takeaways. But also to be considered was the use class order such as shops, cafes, restaurants, offices, gyms, creches, nurseries, indoor recreation, which could now change use from one to another use without seeking planning permission. A few months previously there had only been a much smaller class uses that could be controlled easier, which was reflected in the draft Local Plan. The next version of the Plan would include a wider range of uses and the Council would have less control over the uses.

Hot food takeaways were not in a Use Class and would still be considered on its own merits, so there would still be some control.

- In the Local Plan there was a lot of housing development, is there going to be community facilities or congregational prayer facilities land or building for the people who reside in the Local Plan area.

Community groups who felt a growing demand for community facilities should be encouraged to engage with the process because some of the sites were hard to find and there may be proposals for substantial new developments on some of the larger site allocations. Again, it was important that the community facilities that Plan accommodates did not just relate to health, but social skills, education and places of worship as well.

The Chair, in noting all that was discussed in the meeting, summarised the points raised as follows:

- The Local Plan did not have a lot of specificity in that it was quite broad in that it could give a general direction for a land use, but could not address things such as whether some things should be socially rented to cater for older people, and that it was quite hard beyond general residential use to find specificity.
- In terms of the General Hospital site, further specific information about the provision of health facilities under the Community Facilities heading was needed. There was real concern over the disposal of such a large site at General Hospital, and possible site around Glenfield Hospital (though could not be confirmed at the meeting) that disposal of land based on a plan to 2023 would not be seen through to 2035, and once disposed of it might be able to be bought back but at great cost to the taxpayer. On top of looking at the feasibility of the site as residential accommodation, evidence that the where the county cater for some of the city's needs in terms of housing, that the city will need to cater for the county's needs in terms of health services and particularly acute health services. The Chair pressed the need to see more evidence and ask those who were promoting the disposal of the General Hospital and potentially other University Hospital Leicester sites to other uses to have an answer for where it would stand in 2035.
- In terms of open space standards, it was considered the St Mary's allotment site provided a blueprint of something that could be achieved with the disposal of a site, with a good mix in terms of the use of the space to provide much needed housing, and high quality provision of green open space and facilities for both the houses and surrounding community and was a good way to bring back in sites. However, it was noted that it was relatively easy to achieve the development as it was within the Council's ownership, and would need to look for ways to embed that into the Local Plan and compel the City Council and private developers to achieve developments across the same standard.
- In terms of private space standards, the Members noted the encouraging signs from government, in terms of offices being flipped over to residential without any need for a planning application, that they would achieve minimum space standards, and that those minimum space standards should be adopted.
- The open space standards and the private space standards clearly had a mental and physical health remit.
- It was noted under use class orders the ability to change one property use into another but was also noted that takeaways would still require permission. The Health and Wellbeing Scrutiny Commission would

specifically within its physical health remit be interested in what controls the Local Plan would seek to put particularly over takeaway food outlets.

- It was noted with interest there would be a 10-year plan in terms of the provision of social care that would be shared with the Adult Social Care Scrutiny Commission at a future meeting. It was asked that as far as practical to ensure that future care home demand is taken into account in the Local Plan, which would interact with the strategy. This was seconded by Councillor Joshi.

AGREED:

that

1. the points summarised above discussion to be provided to officers as consultation feed back from the Joint Adult Social Care / Health and Wellbeing Scrutiny Commission.
2. The 10-year plan in terms of the provision of social care be taken to a future meeting of the Adult Social Care Scrutiny Commission.
3. The Health and Wellbeing Scrutiny Commission to look at what controls the Local Plan would seek to put over takeaway food outlets.

5. ANY OTHER URGENT BUSINESS

The Chair had not been notified of any other urgent business.

- The Chair informed Health and Wellbeing Scrutiny Members that a meeting would be convened to look at the General Hospital plan for disposal.

6. CLOSE OF MEETING

The meeting closed at 7.13 pm.