



## Property Services

Leighton Linlade Town Council  
The White House  
Hockliffe St  
Leighton Buzzard  
LU7 1HD  
[paul.russell@leightonlinlade-tc.gov.uk](mailto:paul.russell@leightonlinlade-tc.gov.uk)

NHS Property Services Ltd  
10 South Colonnade  
Canary Wharf  
London E14 4PU  
[town.planning@property.nhs.uk](mailto:town.planning@property.nhs.uk)  
[www.property.nhs.uk](http://www.property.nhs.uk)

18 November 2025

BY EMAIL ONLY

### **RE: Consultation on Leighton Linlade Neighbourhood Plan 2024 - 2042**

Thank you for the opportunity to comment on the above document. The following representations are submitted by NHS Property Services (NHSPS).

#### **NHS Property Services**

NHS Property Services (NHSPS) manages, maintains and improves NHS properties and facilities, working in partnership with NHS organisations to create safe, efficient, sustainable and modern healthcare environments. We partner with local NHS Integrated Care Boards (ICBs) and wider NHS organisations to help them plan and manage their estates to unlock greater value and ensure every patient can get the care they need in the right place and space for them. NHSPS is part of the NHS and is wholly owned by the Department of Health and Social Care (DHSC) – all surplus funds are reinvested directly into the NHS to tackle the biggest estates challenges including space utilisation, quality, and access with the core objective to enable excellent patient care.

Our detailed comments set out below are focused on ensuring that the needs of the health service are embedded into the Neighbourhood Plan in a way that supports sustainable growth.

#### **Draft Policies LL5: Land South of the High Street and LL12: Infrastructure Priorities**

One of the objectives of the Neighbourhood Plan seeks to expand the range of social infrastructure in order to promote good health (supporting paragraph 3.2). In line with this objective, draft Policies LL5 and LL12 set out the Neighbourhood Plan's support towards development proposals which seek to deliver a new Neighbourhood Health Centre, particularly at the allocated Land South of the High Street (draft Policy LL5).

We acknowledge the Neighbourhood Plan area raises the need for additional health infrastructure in the local area. However, to ensure the appropriate and effective delivery of any new health infrastructure within the plan area, NHSPS strongly recommend for Leighton Linlade Town Council (LLTC) to first engage with local health commissioners, including the local Integrated Care Board (ICB).

The ICB are the primary responsible body for the commissioning of primary healthcare services and in the planning of the delivery of required healthcare infrastructure. Policies HQ2 and HQ3 of the adopted Central Bedfordshire Local Plan stipulates that the Council will need to work in

partnership with service providers in order to ensure an integrated approach in the delivery of necessary infrastructure, including for new health facilities and services.

To ensure consistency with the adopted Local Plan and ensure that the required health infrastructure is delivered effectively and appropriately, NHSPS recommend the LLTC to engage and actively work with healthcare partners to identify and deliver the required health infrastructure. This will also ensure the delivery of any required infrastructure is appropriately planned for across both strategic and local levels.

### **Draft Policy LL7: Local Community Assets**

Draft Policy LL7 focuses on the provision of new community facilities and redevelopment of existing community facilities, and includes the protection of existing community facilities. NHSPS supports the provision of sufficient, quality community facilities but does not consider the proposed policy approach to be effective in its current form, particularly in light of adopted Central Bedfordshire Local Plan HQ3. Where healthcare facilities are included within the Local's Plan definition of community facilities, policies aimed at preventing the loss or change of use of community facilities and assets can potentially have a harmful impact on the NHS's ability to ensure the delivery of essential facilities and services for the community.

The NHS requires flexibility with regards to the use of its estate to deliver its core objective of enabling excellent patient care and support key healthcare strategies such as the NHS Long Term Plan. In particular, the disposal of sites and properties which are redundant or no longer suitable for healthcare for best value (open market value) is a critical component in helping to fund new or improved services within a local area. Requiring NHS disposal sites to explore the potential for alternative community uses and/or to retain a substantial proportion of community facility provision adds unjustified delay to vital reinvestment in facilities and services for the community.

All NHS land disposals must follow a rigorous process to ensure that levels of healthcare service provision in the locality of disposals are maintained or enhanced, and proceeds from land sales are re-invested in the provision of healthcare services locally and nationally. The decision about whether a property is surplus to NHS requirements is made by local health commissioners and NHS England. Sites can only be disposed of once the operational health requirement has ceased. This does not mean that the healthcare services are no longer needed in the area, rather it means that there are alternative provisions that are being invested in to modernise services.

Where it can be demonstrated that health facilities are surplus to requirements or will be changed as part of wider NHS estate reorganisation and service transformation programmes, it should be accepted that a facility is neither needed nor viable for its current use, and policies within the Local Plan should support the principle of alternative uses for NHS sites with no requirement for retention of a community facility use on the land or submission of onerous information. To ensure the Plan is positively prepared and effective, and is consistent with Central Bedfordshire Local Plan Policy HQ3, NHSPS are seeking the following modification (*shown in red italics*) to Point (A) - Draft Policy LL7 to ensure the principle of alternative uses for NHS land and property will be fully supported:

Proposed Modification to Draft Policy LL7, Point A):

- A) Proposals that will result in either the loss of, or cause significant harm to, an existing facility will be resisted, unless it can be clearly demonstrated that the operation of the facility is no longer viable or surplus to requirement *and or* that the facility has been actively

marketed for alternative community uses for a minimum of 12 months consecutively or it can be re-provided in an alternative location with the neighbourhood plan area.

**Conclusion**

NHSPS thank Leighton Linlode Town Council for the opportunity to comment on the Leighton Linlode Neighbourhood Plan (LLNP). We trust our comments will be taken into consideration, and we look forward to reviewing future iterations of the Plan. Should you have any queries or require any further information, please do not hesitate to contact me.

NHSPS would be grateful to be kept informed of the progression of the Neighbourhood Plan and any future consultations via our dedicated email address, [town.planning@property.nhs.uk](mailto:town.planning@property.nhs.uk).

Yours faithfully,

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**For and on behalf of NHS Property Services Ltd**