

Dacorum Local Plan to 2041
Statement of Common Ground
Between

Dacorum Borough Council
and
NHS Hertfordshire and West Essex ICB

February 2026

1. Introduction

- 1.1. This Statement of Common Ground (SoCG) has been prepared by Dacorum Borough Council (DBC) and NHS Hertfordshire and West Essex ICB (NHS ICB), hereafter referred to as “the parties”.
- 1.2. This SoCG supplements SCG03.1 that formalised the parties’ agreement that DBC had fulfilled the legal requirements of the duty to co-operate (as set out in Section 33A of the Planning and Compulsory Purchase Act 2004).
- 1.3. This SoCG documents those matters both agreed and not agreed with regard to the Dacorum Local Plan to 2041 (CD01.1) and supporting documents to assist the Inspectors during the Examination of the Local Plan.
- 1.4. This SoCG is principally intended to address the representations made by NHS Hertfordshire and West Essex ICB through Regulation 19 publicity period for the Dacorum Local Plan to 2041. To clarify, as a statutory consultee, the NHS’ Regulation 18 and 19 responses were a coordinated NHS HWE ICB and system partner response covering primary, community, mental health and acute healthcare, including ambulance services.
- 1.5. This SoCG should be read alongside the West Hertfordshire Teaching Hospitals NHS Trust (WHTH) Hearing Statement for Matter 5 – Site Allocations, with detailed project information relating to site allocations Hm03 - Hemel Hempstead Hospital Site and Hm05 - Hemel Hempstead Market Square not repeated here.

2. Background

- 2.1. DBC has made every effort throughout the preparation of the Dacorum Local Plan to 2041 to ensure the Plan provides a robust, strategic framework for the effective delivery of sustainable development.

- 2.2. Throughout this process, the Council has engaged with the NHS ICB including joint working on policy development, additional allocations, specific evidence base studies and efforts to ensure the Plan implements national policy appropriately.
- 2.3. The NHS ICB has fully engaged in the review of the Dacorum Local Plan to 2041, assessing and reviewing the impact of the spatial strategy against health infrastructure needs and against the NHS' long term health planning and pipeline projects, to determine whether these projects spatially meet the distribution of housing growth and the quantum of need in the Local Plan.
- 2.4. The NHS ICB also fully engaged in the draft IDPs, provided detailed information on NHS project requirements and costs for the HGGT IDP, covering primary, community, mental health and acute healthcare and the ambulance service, and provided detailed comments on the Dacorum IDP in the NHS' Regulation 19 response.
- 2.5. To assist the Inspectors this SoCG includes a Schedule of Proposed Modifications following representations made by the NHS ICB and the reasons for the proposed modification.
- 2.6. A separate Schedule also records those matters where DBC is not in agreement with the NHS ICB and the reasons why. These are presented in the following pages.

Table 1: Schedule of additional modifications and other outcomes agreed between the parties

Paragraph/ Policy	Reason	Modification
Chapter 1: The Sustainable Development Strategy		
Borough Vision	The NHS HWE ICB is supportive of the Vision and the parties have agreed for the Borough Vision to be amended to refer to "safe" communities in line with the NPPF, Chapter 8.	Amend the paragraph as follows: "Communities will be safe , inclusive, sustainable and embrace diversity."
1.43	Agreed for additional clarity	Amend the paragraph as follows: "... a new primary school, healthcare services and facilities , and substantial open greenspaces."
1.47	Agreed for additional clarity	Amend the paragraph as follows: "... service constraints, healthcare services and facilities , and open space deficiencies..."
1.48	Whilst the NHS ICB asked for the insertions of the words 'a new GP surgery' the NHS ICB accepts this wording which is consistent with wording agreed elsewhere.	Amend the paragraph as follows: "... a new primary school, secondary school, healthcare services and facilities , and substantial open greenspaces."
SS1	Agreed for additional clarity	Amend Strategic Policy SS1 as follows: "Strategic Settlement of Hemel Hempstead ... and community facilities such as new schools, healthcare services and facilities and upgraded railway stations. ... "Market Towns of Berkhamsted and Tring ... New urban extensions in these locations will deliver a balanced mix of new homes and job opportunities, alongside new schools, community hubs, healthcare services and facilities and shops."
Chapter 2: Delivering Growth at Hemel Hempstead		
2.26	Agreed for additional clarity	Amend the paragraph as follows: "... the County Council and other parties, including infrastructure providers , to ensure community facilities, healthcare services and facilities , open spaces and schools are provided in a timely manner."
2.29	Agreed for additional clarity	Amend the paragraph as follows: "... around 1,500 homes, primary schools, healthcare services and facilities , centres, local mobility hubs ..."
2.43	Agreed for additional clarity	Amend the paragraph as follows: "The Council is working proactively with the Hertfordshire and West Essex Integrated Care Board and the West Hertfordshire Teaching Hospitals NHS Trust and other health and social care providers to bring forward an Integrated Health Care Facility Campus in the town centre . This brings a number of benefits ..."
HGC3	For Local Plan consistency the words general medical services and facilities should be used. The NHS ICB sought amendments to HGC 3 b i (health campus at Hm05) to state that it was one option being considered, plus further additions of health services within the text, and the expansion of the ambulance station (3 b v). The suggested changes to Strategic Policy HGC3 – Town Centre Opportunity area is agreed in part where they make the policy	Amend 3b of Strategic Policy HGC3 as follows: "i. A new integrated health campus at Hm05: Market Square which provides hospital and other specialist health services and facilities, and general medical services and facilities to meet the rising patient demand in the immediate area; ... "v. An upgraded and expanded ambulance station ..."

Paragraph/ Policy	Reason	Modification
	<p>more effective.</p> <p>The NHS ICB accepts these changes but requests that supporting text to HGC3 clarifies that work completed on the Strategic Outline Case (for replacement primary and secondary healthcare at Hm05) has confirmed that Market Square has been identified as the most appropriate, available, developable, town centre site. However, the 'back-stop' second place alternative, should Hm05 not come forward, would be for healthcare services to be consolidated in a new facility (new build and/or refurbishment) on the existing hospital site.</p>	
Chapter 3: Housing		
H3	Agreed for clarity and aligns with NPPF definition	<p>Add Footnote to point 7 of Policy H3 as follows:</p> <p><u>"Applicants must provide evidence that they comply with the Local Connection Policy in terms of at least one of the following: current residency; employment; key worker criteria; family connection; special circumstances such as caring responsibilities."</u></p>
Chapter 5: Climate Change		
5.2	<p>The Council agrees to adding references to health and healthcare services into paragraph 5.2 in response to the NHS ICB request.</p> <p>Wording strengthens the role and importance of climate change considerations in planning decision making and the relationship between climate change risks and certain health conditions</p>	<p>Amend the paragraph as follows:</p> <p>"Plans can help strengthen the resilience of communities and infrastructure to the impacts of climate change and the predicted increase in flood risk and rising temperatures (paragraph 158). <u>This in turn will help protect the health and wellbeing of residents from threats arising from climate change and prevent additional burdens being placed on healthcare and other services that support them.</u> Measures ..."</p>
Chapter 5: Healthy Communities		
10.10 (HC2)	<p>The NHS ICB requested that the following amendments are made to the explanatory text to Policy HC2.</p> <p><i>'The Health Impact Assessment is expected to include a quantitative assessment of existing capacity at relevant primary, secondary and acute healthcare facilities and emergency ambulance facilities, as well as a quantitative assessment of the impacts of the proposed development on the identified facilities.'</i></p> <p>The Council agrees to amend the supporting text in paragraph 10.10 to explain what may be included in the scope of an HIA.</p>	<p>Amend the paragraph as follows:</p> <p>"A guidance note detailing the process of conducting a Health Impact Assessment will be provided separately. <u>A HIA may cover (but is not limited to):</u></p> <ul style="list-style-type: none"> • <u>Housing quality and design;</u> • <u>Access to healthcare services and other social infrastructure;</u> • <u>Access to open space and nature;</u> • <u>Air quality, noise, and neighbourhood amenities;</u> • <u>Accessibility and active travel;</u> • <u>Crime reduction and community safety;</u> • <u>Access to healthy food;</u> • <u>Access to work and training;</u> • <u>Social cohesion and lifetime neighbourhoods;</u> • <u>Minimising the use of resources; and</u> • <u>Climate change."</u>
10.26	Agreed for additional clarity	<p>Amend the paragraph as follows:</p> <p>"... cultural buildings, public houses, places of worship <u>and health services and facilities</u>, education facilities, open spaces (such as allotments and play areas), and sport facilities ..."</p>
Chapter 12: Site Allocations		

Paragraph/ Policy	Reason	Modification
Hm01	Agreed for additional clarity	"21. Recreation space and other community facilities including health a medical centre and sports provision within wider HGC Growth Areas."
Hm03	<p>The NHS ICB would like to revert back to the near original wording from the Reg 19 Plan in relation to space required for general practice.</p> <p>In addition to these changes, the NHS ICB requests that supporting text to Strategic Policy HGC3 – Town Centre Opportunity Area clarifies that work completed on the Strategic Outline Case (for replacement primary and secondary healthcare at Hm05) has confirmed that Market Square has been identified as the most appropriate, available, developable, town centre site. However, the 'back-stop' second place alternative, should Hm05 not come forward, would be for healthcare services to be consolidated in a new facility (new build and/or refurbishment) on the existing hospital site.</p>	"3. First preference is that space for a general medical services health facility medical centre is located within the new integrated health campus on site Hm05 Market Square. Alternatively, proposals for development will be required to provide general medical services a facility medical centre on this site."
Hm05	<p>The NHS ICB would like to revert back to the near original wording from the Reg 19 Plan in relation to space required for general practice.</p> <p>The NHS ICB accepts these changes but requests that supporting text to Strategic Policy HGC3 – Town Centre Opportunity Area clarifies that work completed on the Strategic Outline Case (for replacement primary and secondary healthcare at Hm05) has confirmed that Market Square has been identified as the most appropriate, available, developable, town centre site. However, the 'back-stop' second place alternative, should Hm05 not come forward, would be for healthcare services to be consolidated in a new facility (new build and/or refurbishment) on the existing hospital site.</p>	"1. First preference would be that existing hospital services, currently provided on site Hm03, would be relocated to a new integrated health campus on site. This should include space for a general medical services general practice health facility medical centre ."
Hm06	<p>NHS Herts and West Essex ICB requested the amendment of the social and community site-specific requirements for site Hm06 to include "the provision of a medical centre".</p> <p>The NHS ICB has reviewed its position and is now not seeking provision of a medical centre at this location, which was originally put forward as a fall-back option in the event of delays in the delivery of Hm05 or if required primary and community health provision at Hm03. The NHS ICB will seek developer contributions instead for</p>	No change needed and agreed between both parties.

Paragraph/ Policy	Reason	Modification
	a branch surgery for Fernville Surgery.	
Hm11	NHS Herts and West Essex ICB requested the amendment of the social and community site-specific requirements for site Hm11 to include "the provision of a medical centre". The NHS ICB notes that the key development and land use requirements for Hm11 states a neighbourhood centre to include space for health provision.	No change needed.
Bk01	NHS Herts and West Essex ICB requested the amendment of the social and community site-specific requirements for site Bk01 to include "the provision of a medical centre". The NHS ICB has reviewed its position and is now not seeking provision of a medical centre at this location. The NHS ICB will review its position in the event of an early review of the Local Plan.	No change needed.
Tr03	Agreed for additional clarity.	"A neighbourhood centre, including a sports/community hub and a medical centre "1. The neighbourhood centre should include new community facilities, a medical centre , and a small parade of shops to serve the day-to-day needs of existing residents."

1.1. The NHS HWE ICB, through their representations made to the Regulation 19 stage, suggested a number of modifications to the Local Plan to 2041. In reviewing these suggested modifications, DBC has accommodated a number of these requests, as listed in the table above. These are also reflected in Schedule of Proposed Changes to the Local Plan to 2041 (CD10.8) which accompanied submission of the Local Plan.

1.2. The parties recognise that a number of other suggested modifications were not carried forward by the Council. The Council's justification for these is set out in the table below and in Appendix B of the Regulation 22 Statement (CD10.2).

1.3. The parties agree that these suggested modifications, not accepted by the Council are not fundamental issues to the soundness of the Local Plan to 2041 or its policies.

Table 2: Schedule of Issues not agreed between the parties

Policy Area	NHS ICB Suggested Change	DBC position
Chapter 2: Delivering Growth at Hemel Hempstead		

Policy Area	NHS ICB Suggested Change	DBC position
Strategic Objective 7: Supporting Community Health Wellbeing and Cohesion	NHS ICB requested changes to bullet point 2: • To make sufficient provision to promote for a full range of social, leisure and community facilities and services	The suggested change is welcomed. The council notes that the change is very minor, and its preference is to maintain the current wording.
Strategic Objective 8: Enabling the Delivery of Infrastructure	NHS ICB requested the following change: • <i>To co-ordinate the timely delivery of new infrastructure with development.</i>	The suggested change is welcomed. The council notes that the change is very minor, and its preference is to maintain the current wording.
Paragraph 2.44	NHS ICB request the following changes: <i>"When delivered, it will likely replace much all of the remaining facilities on the existing hospital site on Hillfield Road, enabling that to come forward for other development, including new homes and a primary school to match future needs."</i>	The Council considers the suggested modifications are premature to the next steps that are needed to be undertaken with the Strategic Outline Case (SOC).
Chapter 3: Housing		
3.8/3.9	The NHS ICB requested that the explanatory text should include additional text that recognises the impact on health services arising from planning applications made by specialist housing providers. Where these are made, the NHS will seek developer contributions to mitigate the impact.	No changed required. The Council notes that the requirements of policy ID1 – Delivering the Infrastructure to Support Growth will apply to relevant proposals, including for specialist housing for older people. It requires developers to meet or mitigate arising needs and where necessary deliver on-site infrastructure or contribute towards off-site healthcare provision. The needs identified by the NHS Herts and West Essex ICB are included within the Infrastructure Delivery Plan. Therefore, the Council does not consider it necessary to amend the text of policy H1.
Strategic Policy H1 – Delivering the Housing Strategy	NHS ICB request that Table 1 and Table 2 are revised to include the 639 dwellings at the Hm03 site.	The Council welcomes the potential that the allocation could deliver more in the future, providing further flexibility on the number of homes that can be delivered in the plan period. The Council's evidence has not tested in detail this revised figure. Owing to the estimated timescales for the delivery of Hm03, the Council considers this matter is most appropriately dealt with through the next review of the Local Plan.
Chapter 10: Healthy Communities		
Strategic Policy HC1 – Health and Wellbeing	NHS ICB requested the following changes to strengthen the policy. 2. <i>The Plan will meet the Borough's needs for health by supporting and enabling the health strategies of health care providers, and supporting the delivery of sufficient provision of health and social care services and facilities. increasing the capacity and quality of health and social care facilities</i>	No change is considered necessary. NHS Herts and West Essex ICB requested amendments to points 2 and 3b of policy HC1, referring to the Local Plan's "support" for health care providers' health strategies and service delivery, and provision or funding for new or enhanced healthcare facilities to mitigate needs. The Council, however, notes that the role of the Local Plan is to "enable" the strategies of infrastructure providers, and that the requirement for mitigation is included in policy HC6 and in point 1 of policy ID1.
Strategic Policy HC1 – Health and Wellbeing	NHS ICB requested the following changes: 3. <i>The policies of the Plan will contribute towards reducing health inequalities, promoting active lifestyles and creating a healthier Borough for all by:</i>	No change is considered necessary. NHS Herts and West Essex ICB requested amendments be made to the explanatory text of policy HC2 detailing the expectations for a Health Impact Assessment.

Policy Area	NHS ICB Suggested Change	DBC position
	<i>b. Requiring the mitigation of quantitatively assessed impacts on healthcare facilities and services through the provision and/ or funding of new or enhanced healthcare facilities. development to make financial contributions towards, or deliver, additional health provision;</i>	The Council, however, has adopted the amendment to paragraph 10.10 suggested by Hertfordshire County Council and considers this sufficient.
Strategic Policy HGC3 - Town Centre Opportunity Area – Part 2 b	NHS ICB request the following changes: “b. Hm03 - Hemel Hempstead Hospital (around 639 homes as option 1; with around 450 homes as option 2, if healthcare services are retained on site).”	The Council does not consider this approach to be effective for an allocation, but welcome the potential that the allocation could deliver more in the future, providing further flexibility on the number of homes that can be delivered in the plan period. The Council's evidence has not tested in detail this revised figure. Owing to the estimated timescales for the delivery of Hm03, the Council considers this matter is most appropriately dealt with through the next review of the Local Plan.
Chapter 12: Site Allocations		
Hm03	NHS ICB request the following changes: “1 st option - Around 639 dwellings (to include provision for older people), subject to master planning. A 3FE primary school (including nursery provision). Public open space. 2 nd option – (If healthcare services are retained on site) Around 450 dwellings (to include provision for older people), subject to master planning. A 3FE primary school (including nursery provision). Public open space.”	The Council does not consider this approach to be effective for an allocation, but welcome the potential that the allocation could deliver more in the future, providing further flexibility on the number of homes that can be delivered in the plan period. The Council's evidence has not tested in detail this revised figure. Owing to the estimated timescales for the delivery of Hm03, the Council considers this matter is most appropriately dealt with through the next review of the Local Plan.
Hm05	NHS ICB request the following changes: “1. Design codes will be developed alongside the preparation of any outline planning application and agreed by means of condition. 2. The design must incorporate an active frontage and enhanced public realm that maintains at least one pedestrian and visual connections between Marlowes and Waterhouse Street, and a public square facing onto the Water Gardens.”	The Council's position on this is set out in its Statement of Common Ground with Historic England (DBC/ED44).
Hm10	NHS Herts and West Essex ICB requested the amendment of the social and community site-specific requirements for site Hm10 to include “the provision of a medical centre”. The NHS ICB is not in agreement with the Council and would like to retain the option for provision of a medical centre at Hm10 as a fall back option, if site Hm11 were not to come forward in the plan period. Without an additional health facility, such a large number of new homes in the Hemel Two waters Opportunity Area, will have a significant impact on local GP practices, especially Lincoln	The Council does not consider the suggested changes necessary as appropriate healthcare provision in Apsley is planned for site Hm11 – Shendish Manor, in close proximity to Hm10 – Apsley Mills Retail Park. Hm10 is not expected to come forward until later in the plan period and therefore this position can be reviewed as part of the wider review of the plan. The Council understands that the request for a medical centre at Hm11 will also serve the residents of Kings Langley. The Council considers that Hm11 spatially relates more to Apsley and the edge of Hemel Hempstead and opportunities should be explored for a medical centre at Hm11 to serve both catchments.

Policy Area	NHS ICB Suggested Change	DBC position
	House and Bennetts End surgeries.	

Stage 3 Matters

Matter 5 – Site Allocations

Hemel Hempstead Hospital Site (Hm03)

- 2.8. The parties agree that there is a clear need for deliverable sites in the short, medium and long term to meet identified housing needs in a timely manner and to sustain a five-year housing land supply.
- 2.9. The parties agree that this site is allocated in accordance with the Spatial Strategy of the Local Plan to 2041, and that, in accordance with the National Planning Policy Framework and Planning Practice Guidance, the site is within a sustainable location, and is suitable, available, achievable and developable.
- 2.10. The parties agree the Council's evidence base studies have demonstrated that this site is sustainable, and that the Council is adequately planning for infrastructure for this site, and that appropriate infrastructure will be delivered, as set out in the Infrastructure Delivery Plan.
- 2.11. It is agreed between the parties that the site is not subject to any insurmountable environmental, legal ownership or technical constraints that would otherwise impede development.
- 2.12. The parties agree the allocation of Hm03 is in a highly sustainable location on the edge of Hemel Hempstead Town Centre, with excellent accessibility and proximity to existing services, facilities and transport connections.
- 2.13. Except where set out elsewhere in this Statement and the Hearing Statement for Matter 5 – Site Allocations, the parties broadly agree with the site-specific requirements for the allocation Hm03 as set out within Chapter 12 of the Pre-Submission version of the Dacorum Local Plan to 2041.
- 2.14. The parties note the high-level capacity study by West Hertfordshire Teaching Hospitals Trust (WHTH) for site Hm03 and amend its potential delivery capacity to 'around 639 units, subject to masterplanning'.
- 2.15. The Council notes that the allocation allows for some flexibility with allocation numbers and would therefore not be viewed as a maximum figure.
- 2.16. In respect of Policy ID1 and recognising the unique context of the proposed development of HM03, the parties agree that it is necessary for the Council to provide further detailed guidance on the approach to securing developer contributions.
- 2.17. The parties agree that the site Hm03, if recommended by the Inspectors to be allocated for 450 homes, can be delivered in general accordance with the policies contained in the new Dacorum Local Plan to 2041 within the period of the Local Plan, in broad accordance with the following trajectory:

2024/ 25	2025/ 26	2026/ 27	2027/ 28	2028/ 29	2029/ 30	2030/ 31	2031/ 32	2032/ 33	2033/ 34	2034/ 35	2035/ 36	2036/ 37	2037/ 38	2038/ 39	2039/ 40	2040/ 41	Total
		0	0	0	0	0	0	0	0	0	0	50	100	100	150	50	450

2.18. As explained in full in the West Hertfordshire Teaching Hospitals NHS Trust (WHTH) Hearing Statement for Matter 5 – Site Allocations, the parties are exploring options for the redevelopment of this site alongside Market Square (Hm05).

Hemel Hempstead Market Square (Hm05)

2.19. The parties, alongside WHTH, have identified Market Square as a preferred way forward for the establishment of a new neighbourhood health centre – Hemel Health Campus, as part of a regeneration plan for the area.

2.20. The draft SOC proposes a neighbourhood health centre on the high street, providing an anchor institution in the town centre, accessible by public transport, increasing footfall.

2.21. HHC will bring together prevention, diagnostics, specialist and same-day services, primary care, community and mental health services, voluntary, community, faith and social enterprise (VCFSE) partners, and social prescribing within a single, modern facility. By co-locating and integrating services, HHC will enable care to be delivered closer to home, reducing avoidable hospital attendances and admissions while improving outcomes and experience for local people.

2.22. HHC delivers three benefits for Hemel Hempstead:

1. **Neighbourhood health on the high street** – Accessible, integrated health and care services at the heart of the town centre.
2. **Town centre regeneration** – A landmark anchor building that supports growth, creates local jobs, fosters civic pride, and increases footfall to strengthen the local economy.
3. **Homes for the future** – The release of 5.3 hectares of land to support much-needed local housing development.

2.23. It is not possible, at this early stage, to be definitive about when the HHC will be completed, because of the local and central government procedures for the business case, and planning, procurement and construction processes.

2.24. For this reason, the parties agree that the cautious and pragmatic approach to delivery as set out in the Dacorum Local Plan to 2041 appropriately reflects this position and that there is a reasonable prospect that Hm05 will come forward at the time envisaged.

2.25. Market Square is an appropriate size and in a suitable location to pursue a town centre option. DBC can confirm ownership and control over the land.

2.26. WHTH own the freehold of the existing hospital site where CLCH are tenants, Hertfordshire Partnership University NHS Foundation Trust (HPFT) owns a freehold site in Hemel Hempstead (St Paul's, Slippers Hill) and there are also

NHS leasehold interests on primary and secondary healthcare assets within the town centre.

- 2.27. The parties note the positives steps made with Historic England to address concerns relating to the impact of development of Hm05 for a Health Campus on heritage assets. The parties agree that the modification agreed between DBC and Historic England through a separate Statement of Common Ground is a welcomed step.
- 2.28. The NHS ICB and WHTH's position is that further modification is required to policy Hm05 as set out within the Hearing Statement for Matter 5 – Site Allocations.

3. Conclusions

- 3.1. Dacorum Borough Council welcomes the NHS ICB's support and suggested amendments to the policies and supporting text relating to health, contained within the Dacorum Local Plan to 2041. This SoCG addresses many of the representations raised by NHS ICB throughout the Regulation 19 publicity period with the parties committed to continue to work together on future iterations and updates to the HGGT and Dacorum wide IDPs.
- 3.2. The proposal to allocate Hm03, and replacement primary and secondary healthcare at Hm05 is a shared vision resulting from a joint working partnership between DBC, West Hertfordshire Teaching Hospitals NHS Trust (WHTH) and the Hertfordshire and West Essex Integrated Care Board (HWE ICB), all of whom are strategically aligned on the need to make significant improvements to health and well-being services in Dacorum. All parties are working jointly to ensure delivery of the planned development of the Hemel Hempstead Hospital site (Hm03) alongside the Market Square site (Hm05) and will continue to work cooperatively on all matters of mutual interest.
- 3.3. The parties welcome the adoption of the Dacorum Local Plan to 2041 at the earliest opportunity.

Signatures

Signed on behalf of Dacorum Borough Council



Ronan Leydon
Head of Strategic Planning

19/02/2025

Signed on behalf of NHS Herts and West Essex ICB



Rachael Donovan
Town Planning Policy Manager

19/02/2025