Set Response (see full comment below)

Commenter ID	Name	
4823	Wafaa Salim	
3014	Charith Gunawardena	
4822	Valerie Lestrade	
4819	Julia Mountain	
4817	Frances Nehme	
4818	Hannah Newton	
3444	Brendan O'Brien	*
3445	Carwyn Rahman	
4821	Paula Robinson	
4816	E Rossides	
3153	Evelyn Ryan	*
4820	Pamela Sladek	

I propose that the London Plan includes policy to restrict the sale/use of NHS land unless the following points are given proper consideration:

- I am concerned at the damage that would be done to the NHS estate, and to the contribution of planning to London, if any sale of NHS land in London takes place before a strategic framework is in place that has been subject to meaningful public consultation.
- there are several options that provide better value for money, and more public benefit, as well as housing gain, than a straight sale of NHS land.
- When any NHS land is identified as not being in clinical use, the Mayor should encourage the NHS to adopt a sequential test to appraise the use options for the land.
- **Buildings currently in clinical use** The useful life of a healthcare building today is often as short as 30 years. Furthermore, clinical services change frequently, driving frequent internal reorganisation within buildings. Where there is a backlog of maintenance, it will be important in each case to consider, first, whether there is a business case for carrying out that maintenance. This must be compared with a business case for renovating, adapting or even replacing the building. Until these determinations are known, there can be no responsible decision to sell any NHS land that is available for this purpose.
- **Expansion, replacement, and new facilities** Where the NHS owns land that is convenient for expansion and replacement of facilities, this should be retained.
- **Step-down care** Experts consider that it is bad value for money for the government to sell NHS land for private house-building when such land, much of it co-located with hospitals, or in their vicinity could be used for "step-down" care to relieve acute beds.
- **Residential units for NHS staff** Building co-located residential units for NHS staff mitigates many problems in a single sweep, e.g. staff located near to work will be housed locally in good quality housing allowing them time to rest rather than commute and would be a big selling point when recruiting NHS staff.
- Land swaps with other public-sector land The Mayor should encourage the NHS not to dispose of land until it has been considered for other public uses by all local stakeholders.
- No unsuitable developments on former NHS land near hospitals If, at the end of this sequential test, there is a case for selling any NHS site into the private sector, then the Mayor should favour a planning policy that prevents any type of development that would be unsuitable near any hospital.