

## RCGP response: Consultation on the proposed reforms to the National Planning Policy Framework and other changes to the planning system

### Chapter 8 – Delivering community needs

#### Public infrastructure:

*3. There is a pressing need to improve the provision and modernisation of key public services infrastructure such as hospitals and criminal justice facilities. In recognition of that, we propose to add to the wording in NPPF paragraph 100 to make clear that significant weight should be placed on the importance of facilitating new, expanded, or upgraded public service infrastructure when considering proposals for development.*

#### **Question 67: Do you agree with the changes proposed to paragraph 100 of the existing NPPF?**

The RCGP supports the proposal to include reference to the prioritisation of expansion and upgrading of key public services infrastructure. And while there is an explicit reference to hospitals, primary care infrastructure should be also mentioned as is equally relevant and needed, being the part of the NHS where most patient care is delivered.

The limited physical capacity of GP estates is currently hindering the service's ability to meet the growing patient demand, which is particularly acute in areas of rapid housing growth. Therefore, it is essential that any new development is accompanied by sufficient primary care infrastructure to provide care to patients locally, and that this is supported by the planning system.

Infrastructure plays a critical role in ensuring GPs and their teams are able to deliver high-quality and safe healthcare for their patients. The Government's ambitions to move care into the community rely on a properly resourced general practice with adequate infrastructure; however, premises aren't currently in a fit state to meet demand. Therefore, the government must recognise this barrier and commit the necessary investment in general practice infrastructure to achieve this vision.

As emphasised in the Royal College of General Practitioners (RCGP) 2023 [Infrastructure report](#), the current state of general practice premises is a barrier to achieving such a goal. Our survey also revealed that 2 in 5 general practice staff members consider their premises are not fit for purpose. The reasons most commonly given are related to insufficient consulting rooms (88%), insufficient space to take on additional GP trainees (75%) or insufficient space for training GPs or professional development (66%).<sup>1</sup>

In addition, the NHS Long Term Workforce Plan outlines an increase of the number of GP trainees to 6,000 by 2031/32, which is welcomed by the College. In order to support this increase in GP trainee numbers, the appropriate physical capacity to accommodate this

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<sup>1</sup> RCGP (2023) [Fit for the Future Reshaping general practice infrastructure in England](#)

workforce expansion should be in place. However, at present, there is insufficient capacity to support the current levels of medical students and GP trainees, let alone an increase.

This issue was also echoed in the Institute for Government's recent report which outlined that *'there will be even more pressure on the estate, as a larger fully qualified workforce works alongside an expanded number of GP trainees'*.<sup>2</sup> As well as the increase in GP trainee numbers, the general practice workforce is also expanding due to wider MDT work taking place within general practice. This expansion also exacerbates the need for sufficient GP infrastructure to accommodate the growing general practice workforce.

It is vital that all future GP practices have sufficient space and resource to accommodate expanding primary care staff teams, utilise advances in technology, and to deliver on the NHS's sustainability commitments and the path to net zero.

Despite the importance of general practice, it is often deprioritised in NHS capital decision making. This can be seen in the previous Government's focus on building 40 new hospitals and primary care capital investment through ICSs. According to [NHS England Capital Guidance 2022 to 2025](#), investment allocated through ICSs to primary care estates and IT is just £100 million per year, which represents just 3% of the total NHS capital budget for 2022/23<sup>3</sup>. It is therefore important that planning guidance does not also encourage the prioritisation of hospitals over primary care.

Furthermore, as the government looks to build 1.5 million new homes it is vital that local planning authorities are given the necessary powers and resources so they can properly hold developers to account and ensure sufficient social infrastructure, such as GP practices, are in place to serve communities. The previous Government's [two-year delivery plan for recovering access to primary care](#) included welcome proposals to change local authority planning guidance aimed at raising the priority of primary care facilities when considering how funds from new housing developments are allocated.

Newly built NHS infrastructure needs long term revenue spending from the local NHS Integrated Care Board (ICB) as there is no point building a new GP practice without the GPs to run it. We therefore believe that the proposed changes to paragraph 100 clarifies the need for ICBs and planning teams to cooperate around long-term revenue funding as well as short term capital spend.

Consequently, the RCGP supports the proposal to edit paragraph 100 of the existing NPPF, as we believe that significant weight should be placed on new, expanded or upgraded public service infrastructure. However, given the vital importance of accessible primary care infrastructure to local communities, we request that reference to 'GP premises' is explicitly added to the list of infrastructure mentioned in the paragraph. This small addition to the framework would send a strong signal to local authorities as to the importance government places on general practice and the health of their communities and fits in with the ambitions set out in the joint NHS and Department for Health and Social Care (DHSC) Delivery plan for recovering access to primary care.

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<sup>2</sup> Institute for Government (2024) [Delivering a general practice estate that is fit for purpose](#)

<sup>3</sup> NHS (2022) [NHS England Capital Guidance for 2022 -25](#)