

MINUTES of a **MEETING** of the **PLANNING COMMITTEE** held on 12 November 2025 at 2.15 pm

Present

Councillors: L J Cruwys (Chair)
G Cochran (Vice-Chair), F J Colthorpe,
G Czapiewski, J M Downes, G Duchesne,
C Harrower, B Holdman, M Jenkins and
S Robinson

Apologies

Councillors: S J Clist and N Letch

Also Present

Councillors: Cllr L Kennedy and Cllr D Wulff

Also Present

Officers: Maria De Leburne (Director of Legal, People & Governance (Monitoring Officer)), John Hammond (Development Management Manager), John Millar (Area Team Leader), Thomas Muston (Conservation Officer) and Angie Howell (Democratic Services Officer)

Councillor Online: Cllr S Keable

Officer online: Dr Stephen Carr (Corporate Performance and Improvement Manager)

1 APOLOGIES AND SUBSTITUTE MEMBERS (00:03:48)

Apologies were received from:

- Cllr N Letch
- Cllr S Clist who was substituted by Cllr J Downes.

2 PUBLIC QUESTION TIME (00:04:09)

Dr Frank O’Kelly referred to Application No. 25/01234/LBC

Question 1: - Are you aware of the direction of travel for NHS Healthcare Delivery?

I am Frank O'Kelly a local GP. I have been a doctor for 38 years and working as a GP at Clare House Surgery in Tiverton for the last 26 years. In that time,

I have also been a GP Anaesthetist for 11 years, worked in Tiverton Urgent Care Centre and run the wards in Tiverton Hospital for 20 years. I care passionately about the local delivery of care to the people of Tiverton and about the future of that delivery.

4 years ago, I reduced from being a full time GP to working 3 days in the practice and the rest of the time in medical leadership. Since 2022 I have been the Primary Care Partner Member on the Board of NHS Devon and this year have also become a member of the SW Peninsula Board in a similar role. As such I am involved in planning the future delivery all Healthcare care in Devon and Cornwall and especially Primary Care Medical, Pharmacy, Optometry and Dental services.

I am speaking to you today to ensure you are aware of the direction of travel of health care delivery. The NHS 10-year plan published in July 2025. This sets out the direction of travel for the NHS with three major shifts.

1. Analogue to Digital
2. Treatment to Prevention
3. Hospital to Community.

Great clarity as to what this means has been given in the NHS planning framework published in September. It is clear the NHS delivery model of the future is the Neighbourhood.

In my SW Peninsula Board role, I am helping to lead a bid to the November SW Board for a very significant investment in Neighbourhood working. This bid is in the region of a 5% increase on present funding. If successful, it has significant implications for how we deliver Neighbourhood health, in terms of personnel and estates.

When I joined the practice, we had 10,500 patients, 7 doctors with about 30 staff. We now have about 18,700 patient, 25 doctors and about 100 staff working at the Clare House and Bampton sites.

In 2004, when the new hospital was built, we endeavoured to move to that site. In 2008 we were told we would not be given planning permission because of the change in flood risk, so we looked to develop on the Clare House site. This was declined because of the Grade 2 listing.

In 2009 we looked to move out of the centre of town. When the Planning Committee realised our foot fall would move with us, we were given permission to build the modern extension. In 2013 the extension was completed, and we thought it enormous, at the time.

In 2025 our site is now inadequate for the patient population needs and the delivery of General Practice and PCN (Primary Care Network) work.

The Partnership now finds itself at a similar juncture as we did in 2009. With the move to Neighbourhood working, we are going to have to plan significant changes in healthcare delivery which means we may well need to come back to the Planning Committee over the next 2-10 years with further requests to meet the needs of the growing and increasingly elderly population.

I am in the twilight of my career, as a local GP, so my question is not about me or personal gain it is about future Healthcare in Tiverton.

Question 2:- The Practice needs to know now whether, you as a Committee, understand the direction of travel for the NHS, are in favour of Neighbourhood working and if so, want the Practice to pursue this within the town centre or once again start looking for an alternative site.

3 DECLARATION OF INTERESTS UNDER THE CODE OF CONDUCT (00:09:38)

Members were reminded of the need to declare any interests where appropriate.

Cllr B Holdman made a declaration of interest in accordance with Protocol of Good Practice in dealing with Planning matters regarding Application 25/01234/LBC as he had called in the application. However, he informed the Committee that he would have an open mind when determining the application today.

Cllr L Cruwys and B Holdman made a non-pecuniary declaration of interest in accordance with Protocol of Good Practice when dealing with planning matters regarding Application 25/01234/LBC as they were both patients of Clare House Practice.

4 MINUTES OF THE PREVIOUS MEETING (00:10:42)

The minutes of the previous meeting held on 8 October 2025 were agreed as a true record and **SIGNED** by the Chair.

5 CHAIR'S ANNOUNCEMENTS (00:11:01)

The Chair had no announcements to make.

6 WITHDRAWALS FROM THE AGENDA (00:11:10)

There were no withdrawals from the Agenda.

7 THE PLANS LIST (00:11:14)

The Committee considered the applications in the *Plans List.

1. 25/01234/LBC - Listed Building Consent for internal alterations to create 2 additional clinical rooms at Clare House Practice, Clare House, Newport Street, Tiverton.

The Conservation Officer outlined the contents of the report by way of a presentation and highlighted the following:-

- As the building was a grade 2 listed building the Council must be mindful of the duty as set out in Section 16 of the Planning List Buildings and Conservation Areas Act of 1990 and to have special regard to the desirability of preserving the listed building, its setting and features with special architectural or historic interests which it possessed.
- The main issues raised included DM25 - development affecting heritage assets; DM1 - high quality design; and economic and social benefits.
- The building was a large 19th century house built on the site of Clare Parsonage and contained 20th century alterations and extensions and was located within the Tiverton Conservation Area.
- The proposal was for two additional clinical rooms to be created within the historical core of the heritage asset.
- The proposed clinical rooms would result in the surviving and legible historic floor plan being adversely impacted through the division of the two rooms affecting the central fireplaces.
- The new partitions were joined to the existing window which would result in a visual change externally. The windows on the ground floor would adversely impact a historic and an architectural feature that could possibly contribute to the significance of the heritage asset.
- The joining of the two walls would interrupt the existing features including the ceiling roses within the rooms.
- The nature and extent of the proposal was considered less than substantial regarding the framework. However, that should not be equated with a less than substantial planning objection.
- As the works were largely internal it was considered that there would be no harm to the character or appearance of the Tiverton Conservation Area, and the harm would only be to the listed building.
- The continued use of the building as a surgery would generate economic and social benefits however there was no evidence that such benefits could not be achieved by a different scheme which would not result in the harm identified.
- Giving considerable importance and weight to the harm of the designated heritage asset it was found that the harm would not be outweighed by the public benefits.

In response to the public questions raised the Conservation Officer explained that it was for the Committee to reply as the questions were directed to the Committee.

Discussion took place regarding:-

- Whether the changes could be easily reversible as Studio 4 in the report stated that the changes could be reversed. It was explained that the application was for permanent changes.

- The previous alterations made to the listed building.
- Whether alternative changes had been proposed. It was explained that to unlock funding available through the NHS, the changes had to be internal and not to trigger a planning application. If an extension were to be looked at then planning permission would have been required.
- Whether it was possible to add conditions in order that changes could be reversed if the building was to be sold in the future for example to use materials that could easily be removed. It was explained that conditions could be added to that effect.

It was **RESOLVED** that building consent be granted subject to conditions that the work carried out would be reversed should the surgery vacate the building and that the Conservation Officer be consulted on the specific details of the method of the build-up, including section drawings to scale to show exactly how it would be inserted and installed as well as how the building would be reinstated.

The Development Management Manager would consult with the Chair of the Planning Committee and the Ward Member for the final wording of the conditions in accordance with the conditions discussed. The conditions to be provided in good time for the applicant to begin the work in order that the grant money was not lost due to timescales.

(Proposed by Cllr J Downes and seconded by Cllr G DuChesne)

Notes:-

- (i) Dr Nick Sherwin spoke on behalf of the applicant.
 - (ii) Cllr L Kennedy spoke on behalf of Tiverton Town Council.
 - (iii) Cllr D Wulff spoke as the Ward Member
2. 25/01282/MFUL - Variation of Conditions 7 and 12 of Planning Permission 24/00506/MFUL (Demolition of existing buildings and erection of 10 affordable dwellings with associated parking, landscaping and other minor associated works) to allow substitution of approved plans to reflect revised cycle and refuse storage locations, landscaping strategy, and improved vehicular access at Garages and Forecourt at Watery Lane & Land at Elmore Way & Sunningbrook Road, Tiverton, Devon

The Area Team Leader outlined the contents of the report by way of a presentation and highlighted the following:-

- The application was to vary the conditions attached to an existing permission.
- The application was to alter some of those approved plans specifically the landscaping and site plans.

- There would be a slight rearrangement of how the car parking spaces would be laid out however there would be no changes to the amount of parking provided.
- The hard surface to the rear of the site would be enlarged to allow improved access to residents to the southwest of the property for access to car parking spaces.
- The landscaping scheme would be altered very slightly to ensure there was the required levels of biodiversity net gain which was still in excess of 10%.
- A slight change to some of the positions of the recycling and bin stores was proposed.
- There was not much change in terms of the impact on the character of the area.
- There would be no changes to the living space and layout of the properties which all complied with the National Space Standards.

Discussion took place regarding:-

- Land ownership and whether the proposed plans would be contested by the land owners. It was confirmed that the plans had not been contested.
- Whether the proposed changes would have an impact on the sewerage plans. It was explained that there would be no impact.

It was **RESOLVED** that planning permission be granted subject to conditions.

(Proposed by Cllr G DuChesne and seconded by Cllr G Czapiewski)

*List and report previously circulated.

8 **MAJOR APPLICATIONS WITH NO DECISION (01:24:27)**

The Committee had before it, and **NOTED**, a list *of major applications with no decision.

The Committee agreed the following:-

1. 25/01326/MARM – to come to Committee (no site visit required)
2. 25/00735/MARM – to remain delegated as per the report
3. 25/01325/MFUL – to remain delegated as per the report
4. 25/01095/MARM – to remain delegated as per the report

Note: *List previously circulated.

9 **APPEAL DECISIONS (01:25:71)**

The Committee had before it, and **NOTED**, a *list of appeal decisions.

Note: *List previously circulated.

10 **PERFORMANCE DASHBOARD QUARTER 2 (01:28:07)**

The Corporate Performance and Improvement Manager presented the Committee with the Performance Dashboard for Quarter 2 2025/26.

The overall performance was presented in a pie chart which combined the RAG ratings (Red/Amber/Green). The indicators were presented with the current performance and the annual target to indicate whether or not the Council were on track to meet its target.

The following was highlighted within the report:-

- The performance dashboard for Quarter 2 aimed to give an understanding of how services were performing that related to this Committee.
- Major planning applications determined within 26 weeks and minor and other planning applications determined within 16 weeks were both showing as Amber.
- The Council continued to perform above the national targets which were 60% and 80% respectively.
- The cost of planning appeals showing as Red. No costs were awarded in Q2 and the position related to costs awarded in Q1.
- Planning fees income (statutory fees) were shown as Red due to the continuing market conditions.

Discussion took place regarding:

- Where the funding from appeals came from to cover the costs. It was explained that there was no budget and that it came from the Council reserves.
- The blue background on the slide and whether for printing purposes it could be changed. It was explained that the blue was the corporate branding and would continue to be used on the Council's website. However, for Committee reports this could be reviewed.

The Committee **NOTED** the Performance Dashboard for Quarter 2 2025/26.

Note: * Performance Dashboard previously circulated

(The meeting ended at 3.51pm)

CHAIR