

Appendix A

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
3.2.18	The Cambridge Biomedical Campus is of national importance. This policy will guide development within the existing campus and also identifies <u>additional</u> land to be released from the Green Belt for <u>expansion a future phase</u>. It establishes requirements for a new masterplan which will secure a coordinated approach to infrastructure, services and facilities to meet the needs of campus users, to ensure a campus which can deliver high quality local <u>and regional</u> health services as well as complete internationally as a centre of research <u>and innovation</u>.	The term “future phase” should be replaced with “expansion” to avoid the potential inference that the development of the expansion land should only occur after the existing Campus has been regenerated. Expansion will provide both essential infrastructure and funding contributions towards campus enhancements - it is necessary for expansion to come forward alongside the further development of the Campus. The completion of the “Phase 1” development is contingent on a successful business case and funding award for the Acute Hospital, which CUH see as the anchor to the entire campus. Whilst we are making the case to Government for further funding to develop the Outline Business Case for the project, we agree that this should not be a barrier to ongoing development and improvements to the campus, which would benefit the acute hospital when it comes forward. This approach is illustrated in Section 3.4 of the Spatial Framework (October 2023, updated July 2025), which has previously been submitted to the GCSP. This is also acknowledged in part 27(c) of the draft policy, on which specific comments have been made. The additional proposed amendments to the text are: - To recognise that the health services serve more than the local community; - To fix a typographic error in the word “complete”; and - To recognise that the Campus is internationally recognised as a centre of research and innovation, which more accurately reflects the breadth of work carried out at the Campus.

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Policy S/CBC: Cambridge Biomedical Campus (including Addenbrooke's Hospital)		
1.	The Biomedical Campus including the land allocated for expansion through release of land from the Green Belt as shown on the Policies Map, is appropriate for a mix of uses which meet local, regional or national health care needs; or for <u>life sciences</u> , biomedical and biotechnology research and development activities, related higher education, and sui generis medical research institutes. The Campus will include provision for <u>an innovation hub, visitor accommodation</u> , additional campus worker homes and <u>other</u> supporting services and facilities to support those that work, live, visit and pass through the Campus.	CUH strongly supports the overall vision for CBC. However, we recommend including an explicit reference to “life sciences” to ensure the full scope of work undertaken at the Campus is accurately reflected. This proposed amendment aligns with the uses outlined in paragraph 2 of the draft policy. Additionally, the suggested references to “an innovation hub” and “visitor accommodation” are important to highlight, given the significant benefits these elements will bring to the Campus and its wider community.
Vision and identity		
2.	The Cambridge Biomedical Campus will continue to evolve as a globally significant centre of healthcare, research and innovation, where clinical, academic and commercial activities collaborate seamlessly to improve lives. Anchored by <u>three leading NHS teaching hospitals (Addenbrooke's Hospital, the Rosie Hospital and Royal Papworth Hospital)</u> , the Campus will remain a nationally significant centre for specialised patient care while driving forward advances in life sciences that benefit communities locally, nationally and internationally.	CUH support this wording. Describing CBC as globally significant is an accurate reflection of its international standing. The unique mix of uses at the Campus make it a world-leading centre of research, development, and medical application. The policy rightly recognises this position and sets an appropriately defined context for expansion of the Campus. The Campus is home to three teaching hospitals: Addenbrooke's Hospital, the Rosie Hospital and Royal Papworth Hospital.
3.	As one of Europe's largest centres for health, life sciences and clinical research, the Campus brings together leading NHS teaching hospitals, world-class academic institutions and a concentration of global life science businesses in a way rarely matched elsewhere. This close integration creates a unique advantage with the ability to rapidly translate discoveries into clinical practice and patient care. Future development will	CUH support this wording.

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	protect and strengthen this relationship, maximising opportunities to bring people together in a range of shared spaces and facilities to promote collaboration and foster an active, connected research community across the Campus. Ultimately, this will help to ensure the Campus continues to be a world- leading location for healthcare, education, medical innovation and life sciences research.	
4.	The Campus will also grow to form a vibrant and sustainable Cambridge neighbourhood, capitalising on its highly accessible location. It will be a high quality and vibrant place to live, visit and work. Further development, <u>on both the existing campus and the expansion land</u> , will deliver high-quality buildings, spaces and infrastructure, including a range of on-site services and facilities, that reflect both its international importance and its strong connections to the wider city and sub-region by walking, cycling and high quality public transport.	CUH support this wording, with a slight modification for clarity.
5.	The Campus will deliver a coherent and legible environment, utilising high-quality materials, landscaping and public realm that reflect the character of Cambridge and promote wellbeing, collaboration and innovation. Development will improve the navigability of the Campus and provide a range of services, facilities and green spaces that meet the needs of patients, staff, residents and visitors as well as being well integrated with surrounding neighbourhoods and the wider community. The Campus will include shared spaces promoting interaction between people across firms and sectors, promoting the sharing of ideas, where firms locating here are joining an active research community.	CUH support this wording.
6.	Excellence in placemaking, sustainability, health and wellbeing will underpin this approach, ensuring the Campus remains not only a cornerstone of the UK's health and life sciences leadership, but also a positive and exemplary part of Cambridge's future.	CUH support this wording.

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7.	Areas to the south of the Campus in the Cambridge Green Belt will be enhanced to provide additional green space, landscaping and biodiversity improvements to mitigate the impact of development and enhance its wider setting.	CUH supports the identification of land to the south of the Campus for green infrastructure enhancements, including open space and biodiversity. We acknowledge that further work will be required to achieve the optimal balance of uses within the Green Belt areas. Our primary objective would be to ensure that the expansion land and associated enhancement land, provides an opportunity for enhanced recreational access for our staff, patients and visitors. We note the introduction of two designations on the Concept Diagram (Figure 63) and request greater clarity on the purpose and role of the designations of Strategic Enhancement Area (SEA) and Landscape Improvement Area (LIA). This will be important when balancing the various objectives from the Green Infrastructure network (e.g. recreational access, flood mitigation and biodiversity enhancement). We would say that elements such as flood mitigation and biodiversity enhancement can be accommodated further from the campus (if appropriate) but it is important to locate space for recreation in the right places on the campus to maximise the benefits to all users.
Uses		
8.	Land at the Cambridge Biomedical Campus as shown on the Policies Map and indicative Spatial Framework, including land removed from the Green Belt adjoining Babraham Road, is allocated for a mix of uses contributing to health and life sciences, commercial, <u>education</u> and innovation floorspace, including:	The provision of higher education uses within the Campus is a key component of its offer and success. The proposed amendment ensures that this is recognised. We suggest clarity is required over whether the reference to the Spatial Framework is to the diagram at Figure 63, or the wider emerging spatial framework as prepared by the Landowner Collaboration Group.

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8. a.	Healthcare provision serving local, <u>regional and</u> to international needs, including new and updated NHS buildings and supporting clinical infrastructure;	
8. b.	<u>Approximately 500,000 net additional square metres (Gross Internal Area, excluding plant) of b</u> Biomedical, biotechnology and life sciences research and development, including <u>commercial uses,</u> academic institutions and medical research institutes;	We propose that paragraph 8(e), which states a floorspace figure for research and development and healthcare uses <u>only</u> (excluding higher education, leisure, hotels, and other supporting uses) be deleted and for additional text to be included at paragraph 8(b) instead. This provides greater clarity on what the floorspace figure relates to by confirming that it applies only to specific uses and that other uses would be additional. The amended text intentionally presents an indicative, rounded figure to act as a broad guide to potential growth, avoiding any false precision implied by the previous figure, which was based on an early, high-level design study. The scale of development at the Campus should be determined by physical and infrastructure constraints such as building heights, the trip budget, and land availability. These constraints require further assessment and current work does not support a defined minimum or maximum. Flexibility to optimise land at the Campus is essential, as its success depends on achieving an efficient density and co-locating a diverse mix of uses in close proximity to foster innovation. Given that land has been released from the Green Belt to facilitate this, it remains critical that the available land be used as efficiently as possible. A floorspace figure for healthcare provision has not been included. It is essential that the scale of new healthcare buildings be determined by the specific operational requirements of the Trust, the model of care to be delivered, and the clinical and spatial standards that apply at the time of design. These factors cannot be meaningfully fixed at

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		this stage. As is common practice for applications at the campus and to reflect work undertaken by LCG, plant has been excluded. We recommend including an explicit reference to commercial uses to ensure the full scope of work undertaken at the Campus is accurately reflected. Reference to academic institutions has been removed as this is captured under paragraph 8(c). A reference to use classes is not necessary and may unduly limit the scope of potential uses. For example, research and innovation spaces will need office accommodation, which may fall under Use Class E(g)(i). These uses should not be considered unacceptable, rather they are an essential component of the Campus. Flexibility is particularly important given the evolving nature of life sciences research, which is increasingly associated with AI and data-driven methodologies. As a result, there may be a shift from traditional wet lab facilities to dry lab environments.
8. c.	Higher education <u>uses (academic teaching and research)</u> and training facilities supporting the development and retention of healthcare related skills and talent; <u>and</u>	CUH support this position is supported and we enjoy excellent partnership working across healthcare, academic and commercial research partners on campus, which should be encouraged,
8. d.	Capacity for approximately 1,0 <u>3</u> 00 additional homes on the campus.	The LCG's evidence base submitted to GCSP identifies an opportunity to deliver approximately 1,000 additional homes on the Campus. The Expansion Landowners are therefore very supportive of this element of the draft policy. However, we propose an amendment to increase the indicative number of units to allow greater flexibility for additional homes to be delivered on the expansion land, provided they satisfy the tests in part 11 of the draft policy. A range of housing

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		typologies and tenures will benefit the campus as a whole.
8. e.	Approximately 687,000 net additional square metres (Gross Internal Area) of research and development floorspace (use class E(g)(ii)) specifically related to, biomedical and biotechnology uses, and clinical healthcare and hospital facilities.	See explanation at paragraph 8(b).
9.	Development proposals must make a positive and meaningful contribution to it becoming a world leading healthcare, life-science and educational cluster.	CUH support this wording.
10.	Given the range of existing and proposed uses and the 24-hour nature of <u>at</u> the Campus, a comprehensive framework <u>Amenity Strategy</u> is required to achieve a thriving and world leading place. Supportive and ancillary uses such as hotels, conference centres, nurseries, sports, leisure, food and beverage, convenience retail, community gardens and food-growing spaces are required <u>across the campus</u> to achieve this, and proposals will need to:	The requirement for a Framework Amenity Strategy for the Campus is supported. However, we do not agree with describing the Campus as a “24-hour” community. While the hospitals operate around the clock, these activities do not generate a night-time economy. Paragraph 10(a) appropriately requires the Amenity Strategy to accommodate those users that are on the Campus during night hours, but any further references risk undermining the effectiveness of the Amenity Strategy. The term “comprehensive” has also been deleted as it could be misinterpreted as implying a level of detail that is not intended at this stage. The LCG does not consider this to be the intention of the draft policy as such an interpretation would be inconsistent with the ongoing work required to establish a framework of principles and strategies to guide the Campus’s expansion and regeneration. The revised wording therefore seeks to clarify this position. The LCG notes that the delivery of new homes on the Campus, as set out in paragraphs 8(d) and 11(e) will support a strengthened amenity offer by increasing the demand for diverse services and facilities. The additional reference to the delivery of ancillary uses “across the

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		campus” is considered necessary to clarify that new spaces will be provided on the existing campus as well as on expansion land.
10. a.	Support the needs of the campus users throughout the day and night;	CUH supports this wording.
10. b.	Provide services and facilities which are appropriately located across the Campus, in particular at key areas of activity, to reduce the need for people to travel <u>off the Campus</u> ;	A well-designed masterplan for the Campus should intentionally promote interaction between people who live, work, and visit there. An approach that focuses solely on reducing the need to travel to access services and facilities, such as by providing self-contained amenities within individual buildings, could have the unintended consequence of limiting opportunities for such interaction. The additional text therefore seeks to address this issue and ensure that the core principle of bringing people together to create a successful innovation ecosystem is not inadvertently undermined. This ambition is consistent with the approach that is being taken to enhance interaction in Phase 2 where movement between buildings is essential.
10. c.	Ensure they do not compromise the operational needs of the Campus;	CUH supports this wording. Safe and effective hospital operations are an absolutely critical requirement.
10. d.	Enhance the vibrancy of the Campus and the visitor, patient and employee experience	CUH supports this wording.
11.	To support the housing needs of those working on the Campus, the development and <u>/or</u> intensification of plots within the existing Campus for residential uses will be supported where they:	Housing proposals on campus will not be capable of meeting all housing needs for the NHS or wider campus users. This is a case that both CUH and CBC Limited have been making clear in recent years to all stakeholders. In terms of housing proposed on Campus, we

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		support the objective that the majority of housing delivered on the Campus will be located within the existing boundaries and will be provided by CUH to meet the needs of CUH and wider NHS campus staff. This will not however meet all needs, and needs to be complemented by innovative housing tenures to support the needs of our workforce on other growth sites in Greater Cambridge (and beyond). We are clear that in order for staff housing to be viable, an element of market housing or build to rent may be necessary to cross subsidise the delivery, and to achieve target rents which are affordable to our staff. We understand that expansion landowners also have an aspiration to enable the delivery of build-to-rent homes for Campus workers within the expansion land. This would help to reduce trips to and from the Campus and respond to the well-evidenced challenges faced by Campus workers in securing affordable homes close to their place of work. The proposed changes are essential to provide clarity that housing delivery may occur not only through the intensification of existing plots but also through new development, ensuring flexibility to meet future needs. CUH is supportive of this position.
11. e.	Primarily serve CUH/NHS campus workers including medical students. Short term accommodation for patients and/or their families and/or for non-CUH/NHS campus workers housing for those employed by a corporation or institution that is resident within the Campus may be acceptable where this is not prioritised or over provided relative to CUH/NHS accommodation;	This amendment is seeking to bring greater clarity and a clearer definition to the type of housing that can be acceptably delivered within the Campus. We are clear that in order for staff housing to be viable, an element of market housing or build to rent may be necessary to cross subsidise the delivery, and to achieve rents which are affordable to our staff, as set out in the housing needs evidence prepared by both CUH and by CBC Limited. The suggestion of this being housing for people

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		employed on campus, would ensure such accommodation is available for campus staff, recognising there are a range of job grades and salaries to cater for.
11. f.	Provide opportunities for co-living, supporting community cohesion;	CUH is supportive of this position, although further work is required on the appropriate form of accommodation for our staff.
11. g.	Support campus vitality, with appropriate design;	CUH is supportive of this position.
11. h.	Provide necessary services and infrastructure that are within close proximity;	CUH is supportive of this position.
11. i.	Do not compromise healthcare operations or clinical safety.	CUH is supportive of this position. This is our absolute priority.
12.	Applications for development will also be supported for:	
12. j.	The progressive renewal of NHS estate buildings;	CUH is supportive of this position. Work is underway to deliver two new hospitals on campus: Cambridge Cancer Research Hospital (CCRH) and Cambridge Children's Hospital (CCH). We are making the case for significant renewal of our wider hospital estate and a case is being put forward to Government for funding to develop the business case for a new Acute Hospital, on the unbuilt elements of Phase 1 (to the south of MSCP2 and Royal Papworth Hospital, and to the west of the proposed Cambridge Children's Hospital).
12. k.	The delivery of infrastructure to support hospital operations including <u>a helipad or elevated helideck</u> for <u>Helicopter Emergency Medical Services</u> ;	Amendment proposed as the helipad is not exclusive to the East Anglian Air Ambulance, but used by a range of air ambulance charities. Our longer term ambition is to deliver an elevated helideck, hence the modifications proposed to this limb of the policy.

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12. h.	Mixed use buildings that include incubator spaces to support research and development (class E(g)ii) floorspace and supporting uses.	Wording changed for the same reasons are set out in the comments against part 8 of the draft policy.
The development of Cambridge Biomedical Campus must do the following:		
Context		
13.	Ensure the built area of the Campus is contained within the Site Allocation boundary identified on the Policies Map. Beyond this, other associated uses and mitigation may be provided in the Strategic Enhancement Area, including drainage, habitat compensation and, in appropriate locations, open space. <u>Any departures from this approach will be considered on their merits against the relevant planning tests, including Green Belt.</u>	Whilst CUH is generally supportive of this principle, and accept and support the need to limit the footprint of the campus, there may be occasions where a different approach is required. For example, we are currently progressing proposals for a temporary helipad, which is to be located off campus pending delivery of a permanent roof mounted helideck on campus. Our proposals will be to include a helideck as part of the acute hospital project, providing direct lift access into the major trauma centre. Until such time as that project is delivered, we will require a meanwhile use to ensure the best possible outcomes for our patients.
14.	Adopt a design-led approach to the planning and design of further development at the Campus ensuring its setting within Cambridge's urban and rural edge is respected <u>whilst optimising the use of the developable land within the Campus boundary</u> . To achieve this, development must <u>should</u> align with the <u>indicative</u> Spatial Framework <u>and/or agreed framework masterplan</u> for the Campus and must <u>should</u> also:	The LCG supports the requirement for a design-led approach to the expansion and regeneration of the Campus, which will help to optimise the use of the land and ensure that the Campus continues to function as a world-leading centre of healthcare and scientific excellence. Additional wording is proposed to reinforce this approach and to ensure that available land is not underutilised. Part 8 of the draft policy refers to the Spatial Framework as being indicative. This is appropriate, as the Spatial Framework is necessarily a high-level diagram that illustrates a potentially acceptable approach to the design and development of the Campus.

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		It should not, and cannot, be interpreted as a definitive or prescriptive blueprint for development. Requiring that development “must” be in accordance with the Spatial Framework would therefore be unjustified and unhelpfully restrictive. More flexible wording is proposed to allow the GCSP to consider alternative proposals in the future, where these are appropriately justified. Importantly, this flexibility would not prejudice GCSP’s decision-making. Reflecting this approach, reference is made to the Campus-wide masterplan required under part 27(a) of the draft policy, which is to be submitted to and approved by GCSP. It is possible that such a masterplan may diverge from the indicative Spatial Framework (figure 63) and may reflect a more refined proposal when compared to the emerging Spatial Framework prepared by the LCG. Where any such divergence is considered acceptable and is approved by GCSP, the policy should not act as a barrier to development proposals that accord with the approved Campus-wide masterplan.
14. a.	Integrate sensitively with adjoining residential neighbourhoods, the wider Green Belt, and countryside to the south, ensuring appropriate transitions in height, scale, and landscaping <u>without infringing on the optimisation and functionality of land within the Campus</u>;	The LCG understands and agrees that the Campus should be a “good neighbour” to its surroundings, including both the adjacent open countryside and residential communities. However, for reasons set out above, it is essential that the land available within the Campus is used as effectively as possible and that what constitutes an “appropriate transition” is considered within this context.
14. b.	Retain and, <u>where practical</u>, enhance key strategic and local views and landscape features, especially from Nine Wells Local Nature Reserve, Magog Down and wider countryside approaches;	As currently drafted the wording seems to conflate the value of Nine Wells Local Nature Reserve (which is an important ecological feature but not one from which there are particularly sensitive or important views) and the key strategic and local views from Magog Down and

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	<u>Retain and enhance local landscape features, especially Nine Wells Local Nature Reserve</u> ; and	the wider countryside. The proposed amendments seek to bring clarity to this, so that appropriate mitigation measures can be put in place.
14. c.	<u>Seek to respect and respond</u> Contribute positively to the setting of designated and locally listed heritage assets and enhance the interface between the built form and its natural context; and	To ensure that the policy is effective and not overly prescriptive, amendments are proposed to avoid requiring enhancement in every circumstance. High-quality design does not always mean visible “enhancement” of views. The amended wording aligns with a design-led, context responsive approach and allows the decision-maker to weigh site-specific factors (e.g., land availability, essential clinical/research floorspace, critical infrastructure) in the planning balance, which would ensure the policy is effective.
14. d.	Respect the operational needs of existing NHS and institutional facilities and mitigate any adverse impacts on surrounding communities.	CUH is supportive of this position. This is our absolute priority.
15.	To maximise the potential for collaboration and ingenuity across the Campus, proposals for shared infrastructure, including affordable lab space, innovation hubs and <u>residential</u> accommodation that promotes inclusion and affordability, will be supported.	To bring greater clarity to the draft wording.
Built form		
16.	Respect and <u>seek to</u> enhance local landscape, townscape and heritage and	As per comments against part 14(c) of the draft policy.

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	adopt principles of high quality design by: a) <u>optimising the efficient use of land through a design-led approach that responds positively to the strategic importance of the site;</u>	It is essential that the policy recognises that land optimisation will sometimes require development forms, scales, or configurations that do not enable the enhancement of all existing views into or across the site. While the enhancement of views and visual amenity is an important consideration, it should not be treated as an absolute requirement where this would unduly constrain development or lead to the underutilisation of land that is critical to delivering the Campus's wider strategic objectives. The proposed amendments do not seek to diminish the importance of good design, landscape integration, or the mitigation of visual impacts. Rather, they introduce a more balanced and realistic policy approach that is positively prepared and justified, reflecting the strategic importance of the Campus and the real-world constraints on land availability. The amendments would enable site-specific decision-making, while remaining consistent with national policy by promoting high-quality design, appropriate mitigation, and the efficient use of land. In particular, the amendments acknowledge that in certain locations, where land availability is limited and demand for development is exceptionally high, optimising land use may necessitate careful trade-offs. In such circumstances, it may not always be possible or appropriate to achieve net enhancements to views, provided that any adverse impacts are appropriately mitigated through high-quality design, layout, and placemaking. As an example, the proposals for a new acute hospital are likely to see the need to accommodate a very large building (or buildings) on campus, and the policy framework should be suitably flexible to accommodate this (subject to appropriate design and mitigation of impacts, including visual impact).

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16. a.	<u>b)</u> Aligning with design principles that respond to local character and the city's townscape, using varied building forms and typologies to deliver high design quality, architectural features and materials;	CUH is supportive of this position
16. b.	<u>c)</u> Where appropriate, providing active ground floor uses to activate streets, spaces and communal areas <u>whilst recognising the physical (vibration etc) advantages of enabling R&D uses to exist at ground floor level;</u>	The use of "where appropriate" is essential and must be retained to provide the necessary flexibility for some buildings to use the ground floor for scientific equipment that must be located at that level. This is a view that CUH is very supportive of, and the design process of both Cambridge Cancer Research Hospital and Cambridge Children's Hospital have brought into focus the various competing demands on the ground floor. The desire for activation does need to be balanced with other key design requirements, for example for a hospital building, where active uses are supporting the primary function of a building.
16. c.	<u>d)</u> Supporting appropriately sited taller buildings where they enhance legibility, mark key destinations, and do not adversely <u>unacceptably</u> impact sensitive views, heritage assets and their setting or neighbouring communities;	The policy wording should recognise that the proposals will bring about a substantial amount of change, and that some of these changes may adversely affect views or heritage assets (for example). Those adverse effects may not be severe or significant, however, and even in instances where they are, are still capable of being found acceptable depending on the nature of the proposals. This is a point raised by LCG (as a group) but is particularly pertinent when considering potential requirements for future hospital buildings. Seeking to avoid any adverse impacts would potentially be unrealistic and could prevent critical investment in our estate.
16. d.	<u>e)</u> <u>Where practical, viable, and in the public interest,</u> prioritising the retrofit and reuse of buildings, especially where they are of heritage or operational value;	Draft Policy CC/CE(d) recognises that, in certain circumstances, proposals for demolition may deliver benefits that outweigh the carbon savings associated with retaining the existing building. It is

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		also recognised in supporting text paragraph 3.2.23 that many of the older buildings in the Campus are in need of renewal. Given the very substantial benefits related to the growth of the Campus, it is in the public interest to ensure the most efficient and effective use of the land can be achieved. This may, in some cases, necessitate the demolition of existing buildings. Accordingly, amendments are proposed to more closely align part 16(d) of this policy with the approach set out in Draft Policy CC/CE. From a CUH perspective, our long term ambition is to decant from the existing 1960s hospital buildings, into modern purpose built facilities, benefitting our staff, patients, visitors and researchers. The emerging masterplan anticipates comprehensive redevelopment of the existing hospital buildings. The same may also be said of some of the residential blocks on campus, where retrofit may not be a viable option to meet the housing needs of our workers. We do however accept the need to justify this on a case by case basis, and the suggested amendments reflect that a case is to be made.
16. e.	f) Achieving high standards of energy and environmental performance, including climate resilience;	CUH is supportive of this position
16. f.	g) Responding sensitively to adjoining Green Belt and residential areas through scale transitions and soft landscaping buffers;	CUH is supportive of this position
16. g.	h) Ensuring boundary treatments, lighting, servicing and operational layouts are designed to minimise negative impacts and contribute to the overall public realm.	CUH is supportive of this position
Nature		
17.	Establish a strong, varied and well connected framework of accessible	CUH is supportive of this position

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	green infrastructure optimising biodiversity value and integrating nature-rich open spaces and ecological corridors throughout the site. The design of such spaces must ensure:	
17. a.	delivery of biodiversity enhancements, while accommodating appropriate amenity, recreation, and wellbeing functions;	CUH is supportive of this position
17. b.	habitat features are, where possible, embedded within development parcels, enhancing the southern green edge and providing multifunctional landscapes that balance ecological protection with informal play, sport, and relaxation, supporting both campus users and the surrounding community;	CUH is supportive of this position
17. c.	existing agricultural, grassland and woodland habitats are enhanced, improving ecological links between Nine Wells LNR and Gog Magog Hills;	CUH is supportive of this position
17. d.	provision of a well vegetated landscape buffer within the Strategic Enhancement Area (S/SEA/CBC) to the south of the campus that responds positively and sensitively to the existing topography and habitats, including planting of native species, wetlands, woodland and hedgerows.	CUH has been part of the LCG team that developed a first draft masterplan proposal for the campus. We support the requirement for a well vegetated landscape buffer that will achieve the purposes listed at paragraph 17.d and feel that the land identified as the SEA is important given its relative proximity to the hospital, particularly as our centre of gravity moves onto the undeveloped Phase 1 land (over time). We recognise that the Landscape Improvement Area may also have a role to play, but comprehensive landscape enhancements and recreational offering in the SEA could offer significant benefits to all campus users, close to the heart of the campus.
18.	Proposals in the Landscape Improvement Area must:	CUH requests that GCSP consider giving greater clarity on the

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		respective roles of the Strategic Enhancement Area and Landscape Improvement Area such that the balance between such objectives as biodiversity enhancement, recreational access, access and movement corridors, landscape buffering/screening and impact on views can be assessed in the round. CUH feels that the SEA land remains a priority for elements of this strategy to maximise benefits to all campus users, with proximity being important.
18. a.	Create and/or enhance existing ecological corridors between the nature reserves of Nine Wells and Beechwoods;	CUH is supportive of this position
18. b.	Establish high quality active travel routes from Limekiln Road into the southern end of the Campus;	CUH is supportive of this position
18. c.	Incorporate natural drainage features which specifically addresses surface water flood risk associated with the expansion land north of Granham's Road.	CUH is supportive of this position
Public space		
19.	Provide a network of world class, coherent, well-designed and high-quality public and communal spaces, taking a holistic Campus wide approach to ensure a range of user needs are addressed, including amenity spaces for employees and visitors and spaces and facilities to support accelerated patient recovery, and to maximise delivery of complementary biodiversity enhancements. This will be achieved by provision of:	CUH is supportive of this position
19. a.	A well-connected network of open spaces, squares and courtyards, all within walking distance of campus users, that are proportional in size and function to the number of people working, visiting or	CUH is supportive of this position

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	passing through these areas;	
19. b.	Safe, inclusive and accessible public spaces that can be used at any time;	CUH is supportive of this position
19. c.	Coherent signage to improve wayfinding and legibility, including within buildings , helping to create a sense of place;	The signage provided within buildings is not a planning matter.
19. d.	Accessible spaces to promote wellbeing, social interaction and collaboration for the benefit of all campus users ; and	CUH is supportive of this position
19. e.	Carefully landscaped campus edges to create a green transition to from the city to the surrounding countryside, integrating the Campus with its surroundings, helping to reduce the visual and operational impact, and supporting the setting of Nine Wells and the Green Belt.	CUH is supportive of this position, noting our comments elsewhere on the policy about the importance of providing accessible spaces in the areas where people need them. The northern edge of the SEA has a potentially important role to support recreational needs of campus users.
Movement		
20.	Deliver an exemplar approach to movement and transport within and through the site, promoting sustainable, inclusive access by:	CUH is supportive of this position
20. a.	Prioritising walking, cycling, and public transport as the primary means of access with legible high quality street network in accordance with <u>Healthy Streets guidance</u> and <u>National Design Guidance</u> ;	CUH is supportive of this position
20. b.	Delivering a safe, legible and accessible internal movement network, with a clear active travel hierarchy and infrastructure improvements to key routes including Francis Crick Avenue, Dame Mary Archer Way, Robinson Way and Puddicombe Way;	CUH is supportive of this position
20. c.	<u>As a long term ambition</u> , providing enhanced access to Cambridge	The LCG remain committed to the long term ambition to deliver the

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
	South Station through a new east-west 'high street' for active travel and buses and a mobility hub adjacent to the station. <u>Interim solutions that can be delivered to improve pedestrian and/or cycle connectivity earlier in the development programme should be explored;</u>	east-west link, or High Street, as a public transport and active travel corridor, linking the Addenbrooke's roundabout/bus station in the east, through the Green & the Gardens, and Cambridge South Station/Guided Busway in the west. It is essential that the policy recognises that its delivery is likely to occur at a later stage in the overall development programme. Initial feasibility testing undertaken by CUH has demonstrated that delivery of the east-west link / High Street is contingent upon the total relocation of existing hospital theatre block and the main hospital food court, which is currently an essential component of the hospital, and is blocking the desired route. This will necessitate the construction of new hospital buildings elsewhere within the Campus to accommodate those critical functions – most likely through delivery of the Acute Hospital – which would see the majority of the current hospital functions vacate. Further work is required on the building requirements for the acute hospital, an assessment of the remaining elements of the existing hospital, establishment of a clear budget and importantly work to establish if there are any ongoing operational needs in this area (for example retention of theatres), before CUH will be in a position to commit to vacation of these critical elements of its estate. Only once these facilities have been successfully relocated could the existing buildings be demolished, reconfigured, or otherwise adapted to enable the delivery of the east west link. As a result, the precise timing of delivery remains uncertain and will inevitably be longer term and most likely no earlier than 2040. It could also be argued that whilst an on campus improvement, it will also offer betterment to public transport on a macro level, and therefore we would wish to encourage discussions with GCSP and

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
		Government on alternative funding approaches to ensure it is funded, for instance through an emerging Community Infrastructure Levy for Strategic Transport improvements. This would for example ensure growth of residential and other uses, which become better connected to the new Cambridge South Station, contribute to these improvements. In order for the policy to be considered effective and deliverable over the plan period, flexibility must be embedded within the policy wording. This flexibility should acknowledge the complex dependencies and allow for appropriate interim solutions that enable active travel connectivity to come forward until such time as the east-west street can be fully delivered. There is also considerable cost and complexity in delivering a full public transport / active travel link, as well as careful phasing considerations. CUH's position is that the link should not be relied upon in the short or medium term, and should be described it as an ambition, not a requirement of the masterplan. We will seek to ensure it is excluded as a <u>requirement</u> for delivery in the Infrastructure Delivery Strategy until there is sufficient clarity over its funding.
20. d.	Providing sufficient capacity to accommodate travel improvements and connectivity to existing nearby Park and Ride sites at Babraham Road, Trumpington Road and other travel hubs;	CUH is supportive of this position
20. e.	Incorporating <u>Exploring opportunities</u> for <u>consolidating</u> delivery <u>of goods including</u> through last-mile logistics, including dynamic kerbside management and future technologies;	The trip budget will incentivise the LCG to consolidate deliveries and servicing trips in and out of the Campus so far as is practically possible. The proposed amendments seek to recognise this and give additional flexibility to exactly how that is achieved. This flexibility is

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
		needed to both reflect the many uses that will be operating within the Campus but also the rate of technological change that may well provide not-yet anticipated ways of consolidating delivery and servicing trips. We have suggested that the policies encourages <u>exploration</u> of such solutions, as considerably more work is required to establish deliverable solutions in these areas. From a CUH perspective, sharing logistics may be particularly problematic and therefore this cannot be stipulated as an absolute requirement. We are however committed to exploring options with our campus partners.
20. f.	Enabling new multi-modal access from a realigned Granham's Road to relieve congestion on Babraham Road and Hills Road whilst <u>implementing measures that seek introducing a modal filter south of Dame Mary Archer Way to prevent the rat running manage the through traffic</u> of private vehicles through the Campus;	The introduction of a modal filter south of Dame Marcher Way is not part of the Transport Strategy that the LCG has formulated to date and indeed could undermine the benefits that the southern access road is intended to deliver, which would make the policy ineffective. Any such modal filter would prejudice the new access's ability to relieve congestion on the Addenbrooke's roundabout and Hills Road. It should therefore be sufficient for the policy to set out the ambition but remain agnostic as to how it is achieved.
20. g.	Consolidating <u>new or re-provided</u> car parking into mobility hubs, limiting new <u>permanent</u> surface parking, and providing high-quality cycle parking, shared mobility infrastructure, and accessible transport for all users;	There is existing car parking that policy cannot compel its users to give up. Patient parking requires particular consideration, as patients will need to be able to park close to where they received treatment. This is an absolute priority for CUH. The additional wording therefore clarifies that the requirement to consolidate parking should only apply to new or re-provided parking. This proposed amendments also seek to provide flexibility for temporary or surface car parking to be delivered as a 'meanwhile' use as has been successfully done at the Campus before.

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
		We support the use of innovative techniques to deliver safe and accessible cycle parking.
20. h.	Ensuring blue light routes maintain prioritised access to key hospital departments;	CUH is supportive of this position. This is critical to safe hospital operations and patient outcomes.
20. i.	Implementing data capture devices such as Automatic Number Plate Recognition (ANPR) that can monitor freight activity across the campus, allowing for the analysis of impacts of freight, and to support a policy framework <u>of measures</u> that <u>seeks to</u> optimise freight activity as the campus expands; and	Amendments are seeking to make the application more flexible in how any analysis is implemented.
20. j.	Implementing a monitored and enforceable peak-hour trip budget, supported by demand management measures and high-quality mobility services such as employee-specific buses, that prioritises modal shift and monitors ongoing performance.	CUH is supportive of this position. As noted in paragraph 21, great care is required in setting the Trip Budget, and we maintain a position that it is premature to set the precise trip budget cap at this stage, particularly in the absence of clarity on the Greater Cambridge Transport Strategy and prior to the preparation of a Transport Assessment to sit alongside any comprehensive development proposals. As the hospital implements new models of care, patient demands for the hospital may evolve and be driven by the absolute requirements to access healthcare. More work will need to be done as the new models of care are rolled out, and as part of scoping the requirements for a new Acute Hospital on campus.
21.	<u>The current agreed indicative trip budget for the Campus is 2,800 arrivals and 850 departures in the AM peak, and 850 arrivals and 2,400 departures in the PM peak.</u> A revised trip budget based on detailed evidence must <u>may</u> be agreed with the Local Highways Authority prior to <u>as part of</u> planning applications for further development. <u>The trip budget will be cognisant of both capacity and previous planning approvals and</u>	The wording has been restructured to clarify that the trip budget figures represent a current position only and will evolve as more detailed evidence becomes available over time, particularly through new planning applications.

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	allocations. The current agreed trip budget for the Campus is 2,800 arrivals and 850 departures in the AM peak, and 850 arrivals and 2,400 departures in the PM peak. A monitor and manage approach will be taken to ensure that the development <u>overall</u> remains within the agreed trip budget for the site throughout its delivery <u>and any temporary exceedances can be reduced over time through the implementation of trip reduction measures and/or infrastructure delivery in accordance with an agreed transport mitigation plan.</u>	Additional wording is proposed to make clear that the trip budget is not intended to be an absolute cap on daily vehicle trip numbers, nor over short and medium periods of time. Such an approach would be impractical to manage, difficult to enforce and could undermine the effective operation of the Campus. For the trip budget to be effective it must be sufficiently flexible and capable of responding to changing circumstances. This includes allowing for exceedances over defined periods, providing there is a clear and agreed mechanism for monitoring performance and for bringing trip generation back within the agreed range over time. A rigid, inflexible cap would risk rendering the policy ineffective in practice. The proposed approach is consistent with the arrangements for Waterbeach, where appropriate controls and review mechanisms have been secured through the section 106 agreement. As the hospital implements new models of care, patient demands for the hospital may evolve and be driven by the absolute requirements to access healthcare. More work will need to be done as the new models of care are rolled out, and as part of scoping the requirements for a new Acute Hospital on campus.
22.	To support delivery of the agreed campus-wide masterplan, <u>planning applications should be supported by</u> a strategic and local transport mitigation plan must be prepared by the developer(s) in consultation with the Local Highways Authority and Local Planning Authority. This must include:	Additional text is proposed to make clear that it should be through planning applications that the transport mitigation plan is prepared and submitted to local planning authority. It is only at this stage that there will be the necessary level of detail available to ensure that any such plan can be effective and deliverable. It is also important

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
		that the plan is able to take account of committed schemes that may affect the transport strategy.
22. a.	Sustainable transport measures;	
22. b.	Indicative costings;	
22. c.	Phasing; and	
22. d.	Potential delivery via a Section 106 agreement or CIL.	The allowance for contributions to be secured via section 106 contributions <u>or</u> a CIL payment is supported. Policy should provide flexibility to enable infrastructure to be delivered in a timely, efficient, and proportionate manner, reflecting site-specific circumstances and viability considerations.
Resources		
23.	Utilise innovative approaches to water management on-site, including sustainable drainage systems (SuDS), water reuse and natural systems and landscaped solutions <u>as appropriate to the function of the buildings and landscape</u> , to help address flood risk, including surface water, foul drainage and sewage disposal, and maximise the sustainability of the Campus.	The scope for water re-use in healthcare is extremely limited. This approach was tested through applications for Cambridge Cancer Research Hospital. Additional text is proposed to recognise this, and that any such approaches to water management will have to be cognisant of the types of uses it is supporting.
24.	Contribute to the efficient use of resources and the long-term sustainability of the campus by incorporating other low-carbon energy infrastructure and circular economy principles wherever <u>possible practical and viable</u> .	The LCG are committed to delivering sustainable development that reduces carbon impact. However, the use of the word 'possible' implies that such principles and measures should be used in all circumstances where it is physically possible to do so. Recognition must be given though to the budget constraints that healthcare development is under, and that whilst it may be possible to deliver

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
		certain measures from an engineering or technological perspective, the cost of doing so may not be feasible. The amended text provides some greater flexibility to allow for such scenarios to be accommodated.
25.	Planning for necessary services, facilities and infrastructure, identified in the Amenity Strategy and Infrastructure Delivery Strategy, must be undertaken in a comprehensive manner, ensuring their timely and efficient delivery to avoid overburdening existing services, and in particular prioritising seeking early delivery of green infrastructure, sustainable transport links and essential utilities.	CUH shares the view of GCSP that the Amenity Strategy and Infrastructure Delivery Strategy should be comprehensive and give clear and binding commitments on the timely delivery of amenities for the campus, open spaces/green infrastructure and sustainable transport proposals. To date, CUH do not feel that the draft Infrastructure Delivery Strategy is suitably resolved and therefore whilst we are supportive of the principle of expanding the campus, we remain concerned to ensure it is done in the most appropriate way, with phased and timely delivery of infrastructure, amenity provision and open space. As set out in the covering letter, CUH wishes to invite GCSP and the Cambridge Growth Company to facilitate further detailed discussions about the Infrastructure Delivery Strategy, to reach as much common ground as possible. Through this process, we anticipate that certain items of amenity provision, open space delivery or connectivity will become absolute requirements, early in the process. CUH is supportive of working with GCSP to explore amendments to the policy such that the policy is precise and clear about expectations, to provide clarity to applicants' on expectations when applications come forward. It is recognised

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
		that some flexibility is needed, but some guide rails are considered necessary.
Lifespan		
26.	Further phases of major development at Cambridge Biomedical Campus, including the further extension to the south, must be planned and delivered in a comprehensive and coordinated manner to ensure the vision for the site is successfully achieved, contributing to the long-term, coordinated evolution of the Campus through a comprehensive and enforceable spatial approach.	CUH is supportive of this position
27.	There are a range of matters that will need to be fully addressed before further development will be supported. To address these, the applicant must prepare and submit, for approval as part of future outline planning applications:	CUH is supportive of GCSP's position that a range of matters need to be addressed before any significant developments are brought forward on campus. Whilst we would naturally promote the need for flexibility and pragmatism, we are concerned that if key principles are not resolved at a masterplan level, there is a risk that the desired outcomes will not be achieved. We are clear that this will necessitate considerable work to agree the principles of the framework masterplan, the transport strategy, detailed triggers for delivery of key items, but in the absence of a clear agreed plan, of what each parcel of land should contribute towards in terms of the overall objective, we are concerned that the outcome will risk being sub-optimal. We accept that this may then need to flex over time, but we need a clear start point, where the expectations of each phase or parcel of

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
		land are clear, both in terms of its physical contribution to the masterplan, but also financial or other expectations towards infrastructure, or apportionment of trips (within the trip cap) or parking spaces. This should create an imperative for all parties to commit to this work early, to create a clear framework (with appropriate flexibility) within which individual applications can be brought forward.
27. a.	A comprehensive campus-wide <u>Framework Masterplan</u> which addresses key requirements, such as access and movement, land uses, green and blue infrastructure, scale and massing and densities;	In line with our comments above at para 27, we support the need for a campus-wide Framework Masterplan. Whilst this necessitates an amount of joint working between all parties, we will need to reach agreement on a framework masterplan (with appropriate flexibility) to guide individual applications for major development as they come forward.
27. b.	Evidence to demonstrate an understanding of the cumulative needs of people working, visiting and living on the campus, and the infrastructure, services and facilities necessary to deliver a world leading campus, and how these needs will be met, including proposed phasing and funding approach;	CUH feels that this can be satisfied in preparation of a Framework Masterplan.
27. c.	Full <u>Framework Phasing Plan(s)</u> , including any further planned development or redevelopment in early phases of the Campus <u>and</u>	We agree with other LCG members that the word 'full' implies a level of detail and granularity that will goes beyond what is possible or even appropriate for an outline planning application.

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	<u>measures for the phasing plan to be updated from time to time in agreement with the local planning authority;</u>	We would be more comfortable with the term “Framework Phasing Plan(s)” as these are necessarily indicative, and are a baseline against which proposed changes can be assessed and considered.
27. d.	A business case for a phased approach to achieving opportunities for long-term and wider collaboration for delivering freight and logistics across the campus and through an off-site micro-consolidation and logistics hub;	The requirement to consider ways to consolidate logistics and servicing trips associated with the Campus is already covered by part 20(e) and the need to adhere to a trip budget. It therefore does not need to be repeated here.
27. e.	An Infrastructure Delivery Strategy, identifying required site-specific and strategic infrastructure requirements to help achieve the vision for the Campus as well as wider Campus enhancements set out in the Spatial Framework <u>Framework Masterplan</u> , and demonstrating how this can be successfully funded and delivered through enforceable mechanisms for the coordinated and phased development of the Campus. It must identify appropriate triggers to ensure the timely provision of infrastructure to align with development phasing;	The Spatial Framework in the GCLP (Figure 63) shows one way in which the Campus could be effectively regenerated and expanded. It is described in paragraph 3.2.19 as being “indicative high-level”. It should not be mistaken for a definitive blueprint, and therefore reference to the “Campus enhancements set out in the Spatial Framework” should instead refer to the same as set out in the Framework Masterplan. That is the much more appropriate reference point for what should be delivered. CUH is particularly concerned to ensure that there is clarity on the content of the Infrastructure Delivery Strategy prior to publication of the Regulation 19 Submission Draft Plan. As it stands, there is a working draft in place between the parties, but it is incomplete, and has no formal status. CUH wishes to invite GCSP and the Cambridge Growth Company to facilitate further detailed discussions about the Infrastructure Delivery Strategy, to reach as much common ground as possible.

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
		Whilst we accept and support the need for flexibility for the scheme to evolve over time (we share this objective as we firm up our own requirements for the hospital), we support the need for clarity over what is expected from the expansion land (and indeed our own estate, and others on campus) as development is brought forward. Further work is required to reach agreement on what infrastructure is required when, who will deliver and fund it, and to establish the mechanism for securing this. We anticipate that this may be a mixture of CIL, S106 and negotiated (binding) agreements between the landowners. We feel that this framework needs further work in order that GCSP can be confident of delivering on our collective ambitions. We will all advocate the need for some flexibility so work is required to establish how such flexibility can be built in, whilst ensuring the overall objectives can be satisfied.
27. f.	Clear and enforceable strategies for delivery, management and stewardship of shared facilities and public realm <u>in the proposed application area;</u>	The proposed amendment clarifies that future strategies should apply to the area covered by the application. While coordination across the wider campus is encouraged where possible, it is unlikely that existing management strategies can be revised.
27. g.	A Community Engagement Strategy, maintained and submitted alongside future planning applications to meaningfully enable local people and stakeholders to inform site wide and phase/neighbourhood specific proposals;	CUH is supportive of this position

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
27. h.	Where appropriate, a Meanwhile Strategy, identifying opportunities for the meanwhile use of buildings, facilities and other spaces to make efficient use of land while it is awaiting longer-term development.	CUH is supportive of this position
28.	Applications for full planning permission and/or reserved matters applications must be supported by <u>evidence of how the proposals accord with the relevant framework controls and details of how they will contribute to the delivery of a high quality Campus overall.</u> subsequent parameter plans, phase or plot specific masterplans and design codes, to ensure different phases of development integrate seamlessly and contribute positively to the overall design quality. In part, this should be informed by a Landscape Visual Impact Appraisal and Heritage Impact Assessment	The wording here is not clear and needs to be revised. Reserved matters applications are required to be made in accordance with the outline permission to which they are pursuant and should not themselves require parameters or design codes (instead they should demonstrate how they comply with such as set by the 'parent' outline permission). The same goes for full planning applications which do not need parameters and design codes because they are made in detail. The requirement for applications to be submitted with a LVIA and a Heritage Impact Assessment is unnecessary; applications will need to be made in accordance with the local planning authority's validation requirements.
Supporting information		
3.2.19	The spatial framework for the Cambridge Biomedical Campus sets out an indicative high-level illustration of the policy requirements and the key interventions required to deliver a world leading life science Campus.	CUH acknowledges GCSP's desire to include a spatial framework (figure 63) but is concerned that it may appear more prescriptive/precise than the stage of the process we are at. This creates an unnecessary risk that inevitable changes to the framework (as may be agreed by the collective parties and GCSP) will be seen as being in conflict with this diagram. Its status therefore needs to be clear and more emphasis given to

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		the indicative, high level and early stage indication of how development may come forward.
3.2.20	Cambridge Biomedical Campus is a location of national and international importance for life sciences, biomedical and healthcare research and development. It plays a critical role in providing and innovating medical care and services across local, regional and national contexts. The site brings together NHS services, world-leading academic research, medical innovation, and commercial life sciences in a single, integrated environment. As such, it represents a vital economic and social asset not only for Greater Cambridge, but for the country as a whole.	

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
	Figure 63: Spatial Framework for Cambridge Biomedical Campus (including Addenbrooke's Hospital)  Cambridge High Street A1307 Worts Causeway Babraham Road Legend: - Site Allocation - Residential Led Development - Healthcare Related R&D, Education, Labs And Offices - Healthcare Core - Hospital Related Uses - Energy Centre And Hospital Facilities Management Hub - Strategic Enhancement Area - Green Edge - Landscape Improvement Area - Flood Mitigation - Local Nature Reserve - Public Amenity Area (Indicative) - Areas Of Activity - SSSI - Scheduled Ancient Monument - Proposed Cambridge South Station - Railway - Southern Access Road - Footpath - Park And Ride - Active Travel And Bus Access Only - East West Link - Strategic North South Green Link - Main Vehicle Access - Ecological Corridor	As noted elsewhere in our representations, CUH (and wider LCG representatives) have made the case for flexibility. By including an apparently “fixed” proposal, we are concerned that subsequent changes may be resisted due to non compliance with such a diagram. We would ask that particular attention is given to framing the role and status of the plan, with a clear acknowledgement that it is likely (and expected) to change. Specific comments on the Spatial Framework are as follows: - The key appears to indicate there is a SSSI between the expansion land and Knightly Avenue. This is not the case. The closest SSSI is Cherry Hinton Chalk Pits; there should be no SSSI shown within or adjacent to the Campus. - The colours used for the Green Edge and Local Nature Reserve are too similar and easily mistaken for one another. - There is no need to show the flood mitigation on the Spatial Framework. They will be the result of flood risk modelling and will in any case be dry most of the time. - Hospital Street (which would connect Robinson Way to Francis Crick Avenue) is shown as a connected link. Further work is required on the masterplan to establish if this is ultimately the most appropriate design solution.

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		- CUH considers greater clarity is required on the purpose and definition of Strategic Enhancement area and Landscape Improvement Area. - There are no existing footpaths in the locations shown in the Strategic Enhancement Area directly south of Phase 3. Whilst new footpaths could be created in those areas, the same is true of the SEA areas to the south of Phase 4 and surrounding Babraham Park and Ride and indeed the entirety of the Campus. It may be misleading therefore to only show footpaths in the land south of Phase 3. The preference would be to remove them entirely. - The hatched areas surrounding the flood mitigation areas do not appear in the key. - The word '(indicative)' should be removed from the Public Amenity Area. As is noted throughout the draft policy, the Spatial Framework is a high-level indication of how the Campus could be regenerated and expanded. Marking only one element of it as indicative risks the other elements seeming more fixed than they are presumably intended to be. - The word 'Proposed' can be removed before 'Cambridge South Station'. The station is due to be operational before the adoption of the GCLP. - The main vehicle access shown on Addenbrooke's Road should be bidirectional like it is at the Hills Road entrance.

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
		- The southern access road should be shown as a main vehicle access point. - The 'Active Travel and Bus Access Only' labels should be removed. The need for these to be modal filters is not yet clear nor justified. - The High Street/ East West Link remains a long term ambition (rather than a deliverable short term priority). We feel that the diagram or key should be clear about this to manage wider expectations about its delivery.
3.2.21	This policy is required to enable the continued evolution of the site whilst ensuring and ensure that high quality, sustainable and well-designed development is delivered across the campus. It sets out clear expectations for placemaking, design quality, sustainability and coordination, recognising the opportunity to deliver an exemplar development that reflects the strategic significance of the Campus. The policy supports the continued evolution of the site into a world-class environment for healthcare and innovation, where collaborative working between institutions, businesses and clinicians can thrive, and where patients, staff, researchers, students, campus residents and visitors can benefit from a functional, inclusive and vibrant setting. It also establishes a positive approach for additional campus worker and patient related housing on the Campus, noting the significant number of employees across the site and the wider housing pressures in the area.	This supporting text does not add anything that is not already clearly set out in parts 1-7 of the draft policy and so can be removed.
3.2.22	The Campus has developed in phases, with Phase 2 (south of Dame Mary Archer Way) currently under construction. A third phase, south of the	

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
	phase 2 land, was allocated through the South Cambridgeshire Local Plan 2018, but planning permission has yet to be granted for development. A Cambridge Biomedical Campus Supplementary Planning Document was prepared to supplement the adopted Local Plan policies, in April 2025, to guide proposals for development coming forward in the short term. However, there remain several challenges that must be addressed as part of future growth. The existing Campus layout, legibility and green space must be improved, and there is limited range of amenities to support the day-to-day needs of visitors. Future masterplans need to address these shortcomings if the site is to deliver a world leading Campus.	
3.2.23	Many of the older buildings on the Campus are now in need of renewal or improvement. The progressive renewal and updating of the NHS buildings on the estate is supported, in order to meet growing healthcare requirements, enhance patient care, and create a better environment for patients, staff and visitors in the heart of the campus. This includes not only clinical buildings but also the ancillary infrastructure necessary to support the safe and efficient operation of hospitals and other facilities on the campus.	CUH is in strong support of this statement which needs to be retained in the Regulation 19 Draft.
3.2.24	The draft Local Plan identifies release of an area of around 22 hectares of land from the Green Belt to meet future needs of the campus and to enable improvement of the existing campus. This land adjoins Babraham Road and is north of a realigned Granham's Road. The realignment of the road will allow improved access into the campus, and	

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
	development of a comprehensive landscape response to the edge of the city alongside the developments happening at <u>t</u> Worts Causeway.	
3.2.25	Given the importance of the Campus <u>to</u> both the local and national economy, and in its role in meeting the health needs of the region, it is considered that there are exceptional circumstances for this Green Belt release. However, development of this land is dependent on demonstration of how it will be part of <u>requires</u> a single coordinated masterplan for the whole site, that it will help deliver the infrastructure the campus needs to serve visitors and staff and that it will enable improvement of the wider campus to deliver a world class hub of innovation and healthcare.	The proposed amendment is more concise and would ensure the terms of allocation are consistent with other parts of the policy.
3.2.26	A key purpose of the policy is to enable a coordinated approach to the completion <u>regeneration</u> of the existing campus and support its further expansion. The approach prioritises integration between new development and existing facilities, ensuring that growth is not piecemeal, but strategically planned and delivered. New development must incorporate the operational needs of institutions on site while also enhancing the overall quality, accessibility and functionality on Campus.	
3.2.27	The Campus' location on the edge of Cambridge presents both opportunities and responsibilities. Development must respect the urban-rural transition, ensuring that the Campus integrates positively with surrounding residential areas, the wider countryside, and key environmental assets such as Nine Wells Local Nature Reserve, the Gog Magog Hills and Beechwoods Nature Reserve. The southern part of the allocation includes Green Belt land that will be used to deliver high-	

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
	quality green infrastructure and biodiversity enhancements <u>for the benefit of all campus users.</u> These measures will improve the setting of the Campus, support ecological networks, and provide new opportunities for recreation and wellbeing, while helping to mitigate the environmental impacts of growth. The enhancement of agricultural, grassland and woodland habitats, the creation of ecological corridors, and the restoration of farmland species are essential components of this strategy.	
3.2.28	Development must deliver a network of inclusive, well-landscaped and connected public spaces, including courtyards, paths and amenity areas that encourage social interaction, support mental and physical wellbeing, and reflect the distinctive character of Cambridge. Particular attention will be required at the edges of the Campus, where carefully designed transitions must ensure the built environment integrates sensitively with neighbouring communities and natural features. The setting of Nine Wells will be protected and enhanced through appropriate setbacks, landscape buffers and biodiversity improvements.	
3.2.29	The policy introduces a monitored and enforceable trip budget to ensure that movements are limited and that a genuine shift toward sustainable transport modes is delivered. The future success of the Campus is dependent on improving access for all users while reducing traffic impacts on surrounding roads and communities. Walking, cycling, and public transport will be the primary modes of access, supported by a coherent and legible network of routes within the site. Key movement corridors such as Francis Crick Avenue and Dame Mary Archer Way will	

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
	be upgraded, while new infrastructure including an east-west 'high street' and mobility hubs will support multi-modal access. Enhanced connectivity with Cambridge South Station and integration of the proposed CSET scheme will help reduce car dependency, and micro-consolidation hubs will support efficient, low-impact logistics for last-mile deliveries.	
3.2.30	Given the complexity of the Campus and the scale of infrastructure required to support growth, development will need to be phased and delivered in a coordinated manner. This must be supported by an Infrastructure Delivery Plan identifying the strategic infrastructure and enhancements required to support the Campus' evolution and how and when they will be delivered. Recognising the importance of implementation, the policy is contingent on the identification and agreement of a delivery body capable of managing the delivery of infrastructure and securing the long term stewardship of shared facilities and public spaces. Figure 64: Site Plan of Cambridge Biomedical Campus (including Addenbrooke's Hospital)	The policy is not contingent on identifying a single delivery body, nor should it be interpreted as such. CUH encourage a focus on establishing the approach to Infrastructure Delivery to ensure the ambitions for the campus, and the expectations of each landowner / area of the masterplan are clearly defined.
3.2.31	<u>Stand-alone</u> applications for small-scale development or those already granted consent will not be required to comply with the full Spatial Framework <u>be considered on their own merits</u> but must still demonstrate consistency with the Campus-wide criteria set out in the policy. Early delivery of key infrastructure, including green space, transport links and utilities, will be critical to avoiding pressure on existing services and ensuring that new development supports the long-term functionality and resilience of the Campus.	As above, proposals may need to come forward on an expedited timeframe. The draft policy should not prejudice this happening, but be flexible enough to accommodate them in an appropriate way that does not prejudice the rest of the masterplan being built out in accordance with its terms. Those proposals may include major development (e.g., a new hospital building or a new headquarters building, or essential supporting infrastructure) and so should not be limited to 'small scale' development. If the Council is minded to include a threshold, then CUH considers this requires further

Para / ref	Suggested amendments to wording (red text)	Comment / Explanation
		conversation. We note the wording in the adopted SPD is supportive of giving absolute priority to clinical needs (at times over other planning objectives) and wonder whether similar wording might be considered for inclusion. See para 4.3 of the adopted SPD for the Campus: <i>“urgent responses to public health instances may take priority over wider planning objectives.”</i> For example, we may have urgent clinical requirements prior to agreement to the suite of documents indicated a limb 27 of the policy, and such projects may need to come forward urgently in the interests of public health. A good example of this is the COVID related response which lead to construction of the Regional Surge Centre adjacent to the CCRH development plot, and the Surgical Movement Hub (which was originally constructed as wards for the COVID response). It is not possible to foresee what tomorrow’s challenge may be.