

Our Ref: West Norfolk LP – 2024 Modifications

Norfolk and Waveney Integrated Care System
ICS Estates Department

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Dear Sir / Madam

King’s Lynn & West Norfolk Local Plan Modifications - Consultation

Main Modifications Consultation – 7th August – 2nd October 2024

Introduction

Thank you for consulting the Norfolk and Waveney Integrated Care System (ICS) Strategic Estates Workstream on the above modifications to the West Norfolk Local Plan.

In reviewing the context, content and recommendations of the LDP Document and its current phase of progression, the following comments are with regard to the healthcare provision on behalf of Norfolk Community Health and Care (NCHC), Queen Elizabeth Hospital NHS Foundation Trust, Norfolk and Suffolk NHS Foundation Trust, Primary Care Services and the East of England Ambulance Service NHS Trust (EEAST).

Existing Healthcare Position Proximate to the Proposed Development Plan Area

Primary Care

Total Allocations – taking into account all the proposed site allocations in the local plan modifications consultation, which include 10 or more dwellings as it is important that consideration is given to the cumulative effect of allocations across the local planning authority area.

The table below shows that Primary Healthcare in King’s Lynn & West Norfolk currently runs at a deficit of 488.5 square metres of physical infrastructure capacity. With the addition of the floorspace required for the proposed housing allocations in the local plan main modifications document this will rise to a deficit of 1,307.3 square metres, and would be unsustainable.

Area	Current NIA (Sqm)	Floorspace capacity (Sqm)	Proposed housing	Additional Floorspace required (Sqm)	Future floorspace capacity (Sqm)
King’s Lynn & West Norfolk	12,247.9	-488.5	7,514	818.8	-1,307.3

The King's Lynn and West Norfolk area covers 4 different Primary Care Networks (King's Lynn, Coastal, Swaffham & Downham and Fens & Brecks).

To show how the spread of housing allocations proposed adversely affects healthcare infrastructure across the many areas of the borough the below tables breakdown the overall capacity table on the previous page into smaller sections to highlight where healthcare service infrastructure will be mostly affected and where there will still potentially be some capacity.

Area	Current NIA (Sqm)	Floorspace capacity (Sqm)	Proposed housing	Additional Floorspace required (Sqm)	Future floorspace capacity (Sqm)
King's Lynn Urban Area, North & South Wootton and West Lynn	3,362.9	95.5	1,940	212.9	-117.4

Area	Current NIA (Sqm)	Floorspace capacity (Sqm)	Proposed housing	Additional Floorspace required (Sqm)	Future floorspace capacity (Sqm)
Downham Market & Surrounding Villages	955.7	-313.9	773	84.3	-398.2

Area	Current NIA (Sqm)	Floorspace capacity (Sqm)	Proposed housing	Additional Floorspace required (Sqm)	Future floorspace capacity (Sqm)
West Winch	349.0	-207.8	2,040	224.2	-432.0

Area	Current NIA (Sqm)	Floorspace capacity (Sqm)	Proposed housing	Additional Floorspace required (Sqm)	Future floorspace capacity (Sqm)
Wisbech Border Villages	883.9	-429	788	85.6	-514.6

Area	Current NIA (Sqm)	Floorspace capacity (Sqm)	Proposed housing	Additional Floorspace required (Sqm)	Future floorspace capacity (Sqm)
Fens & Brecks North Villages	1,069.0	-110.4	424	45.2	-155.6

Area	Current NIA (Sqm)	Floorspace capacity (Sqm)	Proposed housing	Additional Floorspace required (Sqm)	Future floorspace capacity (Sqm)
Fens & Brecks South Villages	1,084.4	-594.5	513	55.5	-650.0

Area	Current NIA (Sqm)	Floorspace capacity (Sqm)	Proposed housing	Additional Floorspace required (Sqm)	Future floorspace capacity (Sqm)
Coastal South Villages	955.5	77.2	160	17.1	60.2

Area	Current NIA (Sqm)	Floorspace capacity (Sqm)	Proposed housing	Additional Floorspace required (Sqm)	Future floorspace capacity (Sqm)
Coastal Mid Villages	364.8	143.8	74	7.8	136.0

Area	Current NIA (Sqm)	Floorspace capacity (Sqm)	Proposed housing	Additional Floorspace required (Sqm)	Future floorspace capacity (Sqm)
Coastal North Villages	550.0	106.3	65	6.7	99.6

Area	Current NIA (Sqm)	Floorspace capacity (Sqm)	Proposed housing	Additional Floorspace required (Sqm)	Future floorspace capacity (Sqm)
Coastal East Villages	2,181.0	639.2	605	65.5	573.7

When looking at physical infrastructure capacity and floorspace, it is important to acknowledge that this is only measured on GMS (General Medical Services) space requirements and does not include the space requirements for the many additional roles that are hosted at GP practices. Therefore where a GP practice may show as having capacity this may not always be the case in reality and further discussions with the practice would be needed.

An important area of work to consider along with this is the Care Closer to Home agenda and changing models of care, with demand and capacity work due to be completed by the trusts, which will see a requirement (and therefore investment) in community/primary care sites to house additional roles and activities. The recent Darzi report has highlighted the requirement to move services into the community to provide easier access for patients and to help the acute trusts with space at the hospitals.

The NHS welcomes the opportunity to engage with the planning authority about the Kings Lynn & West Norfolk Local Plan. The overall impact, if the Plan were to be fully realised, would require significant investment in, and development of, the health infrastructure in the area to ensure access to services for the growing population. This will require investment alongside any mitigating funding the NHS will request from the housing developments. Buildings which are used for the delivery of NHS services are not all in the ownership of the NHS, so where projects are required for additional capacity, there will often be the need to secure the support and involvement of the building owner/landlord and owner-occupiers. The NHS has a governance process which is mandated where any public funds are being used to support the development of buildings used to deliver NHS services and this includes the requirement for a detailed, supported business case setting out both the capital and revenue impacts to the NHS. Even when sources of capital can be secured to develop the infrastructure, there may be cost pressures from the revenue required to support the ongoing function of the building and services within it. The ICB (Integrated Care Board) has a pipeline of proposed estates schemes which would help to deliver the increased capacity needed as a result of the King's Lynn & West Norfolk Local Plan, but the funding – capital and revenue – to

support these projects has not yet been identified and NHS governance process not yet initiated.

Acute Healthcare

The responsibility for providing acute healthcare to the borough of Kings Lynn & West Norfolk falls to the Queen Elizabeth Hospital, Kings Lynn

Using the HUDU tool to model the potential impacts of housing on healthcare services, the model calculates the proportion of new homes that are likely to be occupied by people new to the area and therefore generates a net demand for local healthcare services. Using this net demand the model can then estimate the number of additional beds and floorspace required at an acute setting. The floorspace standard for an acute bed is derived from the schedule of accommodation in Health Building Note 04-01: Adult in-patient facilities.

Inpatient bed occupancy rates is a metric used to show demand and capacity within an acute setting. A bed occupancy rate of 85% or higher indicates a requirement for additional capacity. Anything above this rate and resilience, safety and efficiency are all at risk. The table below clearly shows a higher bed occupancy rate than 85% along with the modelled additional bed space and floorspace demands.

Trust	Latest Bed Occupancy Rate	Additional Bed Demand	Additional Floorspace Demand
Queen Elizabeth Hospital, King’s Lynn, NHS Foundation Trust (QEH)	95.7%	29.03	1,394.2 Sqm

Norfolk Community Health and Care NHS Trust - NCHC

As the community healthcare provider for King’s Lynn and West Norfolk, Norfolk Community Health and Care NHS Trust (NCHC) have several locations across the local authority area. They provide community clinics to allow improved access to care for local people. There are also a number of intermediate community bed spaces, which helps people to avoid going into hospital or residential care unnecessarily and helps people remain as independent as possible after a stay in hospital.

The location of the main NCHC sites are to the West of the borough, other main sites sit outside the local planning authority border in neighbouring Breckland at sites in Swaffham, Fakenham, Thetford and Dereham.

The St James Clinic at Exton’s Road in King’s Lynn offers a range of healthcare services to the local population. The West Norfolk Community Learning Disability Team are also based in King’s Lynn at the Parkview Resource Centre which provides health care services, health promotion advice, counselling and social care support for adults living with a learning disability.

There would be a greater number of patients requiring these services from the increased population that would occur from the proposed housing allocations around the King’s Lynn area.

With regards to the intermediate bed spaces, the below table shows the current occupancy rate for beds operated by NCHC, and the additional demand required (beds and floorspace) from the proposed housing allocations. As mentioned previously a bed occupancy rate of 85% or higher indicates a requirement for additional capacity.

Trust	Latest Bed Occupancy Rate	Additional Bed Demand	Additional Floorspace Demand
Norfolk Community Health and Care Trust (NCHC)	94.8%	1.56	89.44 Sqm

Norfolk & Suffolk NHS Foundation Trust - NSFT

Norfolk & Suffolk NHS Foundation Trust provide mental health and learning disability care for people across Norfolk and Suffolk. In West Norfolk, NSFT services are based in King’s Lynn. These are North house, Chatterton House and the Fermoy Unit Mental Health Services, all based on Goodwins Road King’s Lynn. Much of the NSFT estate is in need of significant investment to make it suitable, with over half of the trusts estate being over 40 years old in places.

The estate within King’s Lynn and West Norfolk provides a mixture of services predominantly via outpatient care but with some inpatient provision available. Similar to the community healthcare, proposed housing allocations in the local plan and the population increases which go along with this will place additional pressures on already stretched services, especially in King’s Lynn where a large strategic development is being planned on the outskirts of the town at West Winch.

The table below indicates that NSFT is currently running above the safe level for inpatient bed occupancy rates. It also shows the additional number of beds and floorspace required from the proposed housing allocations within the local plan.

Trust	Latest Bed Occupancy Rate	Additional Bed Demand	Additional Floorspace Demand
Norfolk & Suffolk NHS Foundation Trust (NSFT)	86%	19.41	951.0 Sqm

East of England Ambulance Service NHS Trust - EEAST

The East of England Ambulance Service is responsible for providing accident and emergency services for people in need of urgent medical treatment and transport in Norfolk, 24 hours a day, 365 days a year and get more than 3,600 emergency calls every day across the 6 Counties that EEAST cover.

There are many factors that need to be taken into consideration when thinking about potential housing allocations and the emergency services, these can include but are not limited to, the rurality of an area and the ease of access, potential flooding which would cause delays and also add to work load in the event of flooding, care homes/care facilities and the age demographics which may require more frequent call outs of the emergency ambulance service.

The population increase will mean a new expanded Hub will be required close to King’s Lynn hospital and main routes as well as additional ambulance station response posts in strategic locations to ensure continued delivery of Category 1 calls being able to reach the site within an average of 7 minutes. Currently, there are ambulance stations in Hunstanton and Downham Market within the King’s Lynn and West Norfolk area. King’s Lynn is based on the Queen Elizabeth site and needs to be relocated to enable the new Hospital Build programme to commence.

The map from ShapeAtlas below shows the response times in rush hour traffic (i.e. not under blue light conditions) from the current Hub and ambulance stations. Neighbouring ambulance stations that also support the King’s Lynn and West Norfolk locality are show in the righthand map.



Area	No of Dwellings	Population Growth	Developer Contribution Calculated
King's Lynn & West Norfolk	7,514	13,103	£2,021,266

Site	No of Dwellings	Population Growth	Developer Contribution Calculated
King's Lynn Urban Area, North & South Wootton and West Lynn	1,338	3,406	£516,963
Downham Market and Surrounding Villages	773	1,347	£207,937
West Winch	2,040	3,589	£554,880
Wisbech Border	788	1,370	£211,972
Swaffham Border Villages	132	226	£35,508
Fens & Breck North Villages	424	723	£111,936
Fens & Breck South Villages	513	889	£135,432
Coastal Towns & Villages	904	1553	£238,656

Conclusion

- King's Lynn & West Norfolk as a whole will have a Primary Care infrastructure floorspace deficit of circa 1,307.3 sqm if all housing in the local plan is realised without any mitigation mechanisms in place (modelled using estimated breakdown of dwelling sizes).
- 6 of the 10 areas listed above are likely to result in a Primary Care infrastructure floorspace deficit. Along with an overall bed occupancy rate in the community which is considered unsafe. The total capital cost required for Primary and community care to deliver improved access to healthcare infrastructure is circa £7.1m - £10.8m depending on the type of schemes that would be delivered.
- The acute hospital which covers the West Norfolk area has a bed occupancy rate over what is considered safe and efficient before further increases in population. The total capital cost required for the Acute to deliver improved access to healthcare infrastructure is circa £9.0m - £13.8m
- The mental health trust also has a bed occupancy rate which is above what is considered safe and efficient, additional population growth from housing developments will further add to this constraint and the capital costs calculated to provide additional health infrastructure for the mental health provider would range from circa £7.6m - £11.8m.
- The ambulance service has calculated a requirement for £2,021,266 in developer contributions to support their infrastructure in response to housing and population growth.
- The ICS does not have the capital or funding to support large schemes to provide additional capacity as a result of increasing population growth from housing developments.
- As a main town in West Norfolk, King's Lynn is home to Primary care, community care, mental health care facilities and services, and the ambulance service, which as demonstrated are running close to or above capacity, the proposed housing growth in and around King's Lynn will place additional pressure on all of these services and will require appropriate mitigation.

Yours faithfully

NHS Norfolk & Waveney - Strategic Estates