

# **A Planning Statement in Support of the Development of the New Norfolk Hospice, Tapping House at Hillington, Norfolk**

## **1 Introduction**

This document sets out the case for the development of a new hospice at Hillington for The Norfolk Hospice, Tapping House. It includes:

- A summary of the background of the Hospice.
- Options considered in addressing the need to expand the Hospice services.
- Details of the full-service purpose-built Hospice.
- Site requirements.
- Material planning considerations.
- Selection and evaluation of alternative sites
- The merits of the chosen site at Hillington
- Village consultation actions and plans.

It is recognised nationally, regionally and locally that the community of West Norfolk as a whole is underprovided for in terms of hospice services. There are no hospice beds in the county outside Norwich. Regional and local research, and the national charity Help the Hospices, recognise that West Norfolk and the surrounding area is one of only two locations in the country that does not have a full-service hospice. The Norfolk Hospice, Tapping House, a registered charity, is identified as the organisation with the experience, capacity and ability to lead the development of this vital service.

## **2. The Community Need for the new Norfolk Hospice, Tapping House.**

### **2.1 Caring for the Dying : Living Life to the Full**

The one certainty in life is that it does not last forever; we are all going to die. The uncertainties are how, when and in what manner.

- Will we live life fully until the very end of our days, or will we wait for death to come?
- Will we be alone or surrounded by people whom we care for and love?
- Will death be peaceful, free of pain and dignified?
- Will we have the emotional strength to face it?

These are profound questions to which we will simply never know the answers until the time comes to face them.

At The Norfolk Hospice, Tapping House, we help people with all of these questions every day.

Caring for those living with life-limiting illness and the dying is our main purpose. It is what makes our Hospice such a special place.

Everything we do for our patients, together with those who are close to them, is to ensure that they can live life to the full for whatever time is left and to provide peace, respect and dignity to the very end of life.

## **2.2 History**

The Norfolk Hospice, Tapping House (registered charity as Tapping House Hospice) was originally set up in 1984 by a local GP, Dr Hugh Ford. It initially provided support, by trained volunteers, at home, for people with terminal illness. It has grown to offer a range of professionally led day and home care services. In 1999 it moved to the current premises at Common Road (West), Snettisham from where it provides day-care, outpatients, hospice home-care, bereavement support, carer and family support and an information service on a five-day per week basis. It has continued to develop services so that in 2007 it is a small but growing member of the modern hospice movement, helping patients with terminal illness and other life-limiting conditions to live life to the full. The current executive team includes personnel with regionally and nationally recognised expertise in hospice and palliative care. The Board of Trustees is comprised of residents from across the locale with appropriate skills and experience and a high level of commitment to developing the Hospice for the future.

## **2.2 Definitions**

**Palliative care** (hospice care) is defined as active total care when disease is not responsive to curative treatment. It neither hastens nor postpones death. It provides relief from pain and other distressing symptoms. It integrates the physical, social, psychological and spiritual aspects of care and offers a support system to help the family and those close to the patient during the illness and in bereavement. The palliative care approach aims to promote physical, psycho-social and spiritual well-being.

The **Vision** of The Norfolk Hospice, Tapping House is that together we can create a community where everyone living with life-limiting illness, or facing death is enabled to do so with dignity and free from unnecessary pain and fear; can live life to the full, with friends and families in accordance with their wishes and participate as fully as they are able to, in all decisions relating to their care and comfort.

The **Mission** of the Hospice is to provide and promote skilled and compassionate hospice care of the highest quality and, as a centre of excellence, to meet the palliative care needs of the community by:

- Providing a range of specialist palliative care services at the Hospice and, in collaboration with others, in the community and in people's homes (including nursing homes).
- Involving the participation of patients and those close to them in service provision, development and evaluation.
- Educating the public and professionals in all aspects of palliative care, dying and bereavement.
- Influencing the local, regional and national health and palliative care agenda.
- Working in partnership with statutory and other voluntary agencies.
- Researching and developing innovative practice.
- Generating the necessary resources to sustain and develop the services offered.

## **2.3 Background**

West Norfolk and neighbouring areas do not have a purpose-built hospice with beds. The present Norfolk Hospice, Tapping House, provides day-care, outpatient care and a small hospice at home service for the population of West Norfolk and is also accessed by people from North Norfolk, North East Cambridgeshire and South Lincolnshire. Most patients cared for at the Hospice have advanced cancer. Other patients have progressive chronic conditions like heart failure, chronic respiratory illness and incurable neurological illnesses including MND (motor neurone disease), Parkinson's disease and MS (Multiple Sclerosis). Whilst the Hospice is much more than a building – it is a way of caring – it has never before had the opportunity to design and build a facility which could meet the evolving needs of patients and their families both today and in the future.

## **2.4 The need for new premises**

The environment and facilities provided at the existing Hospice are no longer adequate to meet the demands placed on the services for the following reasons:

- The constant increase in the number of referrals for all the Hospice's services.
- Unmet need beyond the original local villages' catchment area.
- The existing building has evolved from a residential bungalow with piecemeal extensions and additions over a long period of time. The result is that much of the accommodation is cramped and inefficient and is not therefore commensurate with the ideals and aspirations of a growing hospice facility.
- Due to the limitations of the building many of the support staff are housed in a portacabin or off-site. This seriously inhibits the benefits of having all aspects of the Hospice housed under one roof, creating a sense of unity and belonging for all involved in providing the service.
- The evident need for specialist and respite in-patient care in a large and under-resourced area with fragmented services (the nearest hospice being

- 45 miles distant in any direction). Every month The Norfolk Hospice, Tapping House is involved with patients who need such a facility for the control of distressing symptoms, palliative therapies and respite – when what can be achieved, through day therapy and community care, has been exhausted.
- In Norfolk there are no hospice beds outside the City of Norwich.
- A developing range of services, each requiring particular space and facilities e.g. complementary therapies, physiotherapy, lymphoedema management and privacy for one-to-one sessions.
- The needs expressed by patients and their families for more privacy and choice.
- An increasing population requiring hospice care, including the isolated, elderly and people living alone.
- The lack of specialist hospice care in the area identified in studies undertaken by the West Anglia Cancer Network, West Norfolk PCT and the Norfolk Health Overview and Scrutiny Committee
- The current building does not have space in which to develop the increasingly needed homecare, palliative care domiciliary and clinical outpatient's services.
- The main day-care room is a thoroughfare to other parts of the building.
- The activities room, a converted garage, is limited and also a thoroughfare.
- There is no dedicated staff/volunteer area to study or to recover from the demands of what at times can be distressing situations.

The strategic need for additional hospice and palliative care services in West Norfolk has been investigated for several years by a local multi-professional group drawn from the major stake-holders in palliative care in health and social services and from the statutory and voluntary sector. The need for a full service hospice with beds has long been identified as:

- The number of existing beds is insufficient.
- There are no specialist beds outside Norwich.
- The focus of existing palliative care beds at the QEH is for people requiring acute medical intervention for physical problems and admission is restricted to people with diagnosis of cancer. The environment is inappropriate for people who need respite palliative care or terminal care.

The demographic profile of West Norfolk (2001 Census) shows higher than national average of the:

- Population aged over 75.
- Widowed.
- People who have had a long term illness (50% of which are economically inactive).
- Retired.
- Pensioners living alone.
- All other pensioners.

All the indications are that the demand for all hospice and palliative care services will continue to increase as will the need for hospice beds.

West Norfolk is recognised nationally as underprovided for with hospice services and is considered to be a one of only two 'black-spots' in the UK by the national charity Help the Hospices. Help the Hospices fully supports the proposal to correct that situation by our plans to develop a full service hospice.

## **2.5 Future options to meet the need to expand the Hospice and its services**

We aim to extend the services of the Norfolk Hospice, Tapping House, initially by relocating and extending our existing services and providing ten beds (with the future capacity to increase to 16 beds) plus a range of specialist palliative care community based services, for a population of up to 300,000.

Other options considered were:

- **Expand the existing hospice at the current location.** Studies show that this location is not central enough to secure the level of community support needed in the long term and the size of the site is too small to accommodate the facilities required. The possibility of developing satellite sites has also been investigated.
- **Establish a purpose-built hospice with beds on present site.** The size of the present site is unlikely to be able to accommodate a viable bedded unit in which case a split site or relocation would still be required. Current services would have to be relocated or closed whilst any building or alterations were made.
- **Build a full service purpose-built hospice.** On a more central site closer to the hospital and other facilities. This is the only option which provides a viable and realistic future solution. It also allows for the release of the existing Hospice site for residential development to support the housing demand for this locality.

## **2.6 A new, full service purpose-built Norfolk Hospice, Tapping House at Hillington**

The new purpose-built hospice will offer a comprehensive range of specialist palliative care services for adults (over 18 years) with life-limiting illness whether or not they are imminently dying.

The development is brought forward with the support of local Primary Care Trusts, hospitals, social services and other voluntary organisations. The new service will strengthen these partnerships and will provide more effective and integrated palliative care services.

### **2.6.1 The objectives of the scheme are:**

- To provide a purpose-built facility as a base for the charity's services.
- To provide 10 in-patient beds and family accommodation.
- To expand the choice of care available to patients and to the professional teams caring for them.

- To provide a local and appropriate environment for palliative care before patients return to their own home as far as is possible or desirable.
- To offer respite care and a therapeutic environment to patients so providing relief to family carers.
- To offer patients high quality care tailored to individual need, during the last period of their lives.
- To provide bereavement care for family members of all ages.
- To offer adequate facilities and a base for the Hospice home-care service to develop to respond to unmet need.

**2.6.2** The **development** will include:

- Therapeutic day-care facilities to enable a more flexible service.
- Outpatient and treatment suite for individual sessions.
- A base for the home care service.
- Meeting room(s) for group discussions, carer and bereavement support and education sessions.
- A drop-in and information area to facilitate informal and initial contact with the Hospice.
- 10 individual fully equipped bedrooms with en-suite facilities for symptom control, respite and end of life care including 2 suitable for young adults. (Provision will be made to extend in future to 16 beds dependent on need).
- Family facilities for children to visit and close family members to stay overnight when needed.
- Special equipped area for our work with children, who are losing a parent or other loved one, during and after the death.
- Individual treatment and therapy rooms.
- Peaceful gardens for relaxation and contemplation.
- A quiet chapel/room.

**2.6.3** The scheme will be designed to meet two key principles of management:

1. Facilities will be of the high standards expected of a contemporary hospice providing specialist palliative care, which are fit for purpose both in the medium and longer term.
2. Implementation of the project will be phased to manage financial risk.

## **2.7 Site Requirements**

The search for the site for the new Norfolk Hospice commenced in earnest in 2004 by identifying the essential, preferable and desirable site requirements (Table 1). The large size of the required site, together with the need to allow for possible future growth in the long term dictated that the search should focus on locations which were suitable in terms of the quality of the local environment and the ability to enhance this to meet the needs of the Hospice through design on the site.

Although not a planning issue, the search had to focus on sites with willing vendors and initially the local estates were contacted concerning available land.

Early contact with the Local Planning Authority widened the search. Whilst the search was conducted over an extensive area around King’s Lynn, relatively few serious options emerged which were suitable in design and location terms.

**Table 1 Essential, Preferable and Desirable Site Requirements**

<b>Essential</b>	<b>Preferable</b>	<b>Desirable</b>
3.8 acres minimum	5 acres with option of additional land for expansion	Room for therapeutic gardens and landscaping
Public transport links	Pleasing location – quiet but not isolated	Close to a large staff pool (within 10 miles)
Vicinity of hospital (less than ten miles)	Local services available for staff and patient/visitor use	
Accessible in the context of the substantial area of Norfolk covered by the Hospice’s service (road infrastructure)	Potential employees and volunteers in the locale	
Utility services available without onerous complication/cost		

## **2.8 Material Planning Considerations**

The relevant planning policies and material considerations which provide the framework for assessing this proposed development require a careful and considered balancing of the relevant policy objectives which underpin them. While no development is unique, the proposal to construct a new Norfolk Hospice at Hillington reflects the particular, special needs for this development – one that will serve the local community, the communities of West Norfolk and communities which are further afield. The proposal has special qualities which need to be taken into account as material planning considerations. These are evidenced and detailed in sections 2.4 – 2.7 above.

### **2.8.1 National Planning Policy**

**PPS1: Delivering Sustainable Development** sets out the government’s objectives for the planning system and national planning policies. In particular, it introduces the government’s modern planning agenda, key themes of which are:

- Planning shapes places where people live and work and the country we live in. Aim for the right development, at the right place, at the right time. (PPS1 paragraph 1)

- Sustainable development is the core principle underlying planning – it encompasses social progress which recognises the needs of everyone, the effective protection of the environment, the prudent use of natural resources and the maintenance of high and stable levels of economic growth and employment. These aims should be pursued in an integrated way. (PPS1 paragraphs 3 and 4).
- Planning should promote and facilitate sustainable development by making suitable land available for development in line with economic, social and environmental objectives to improve people’s quality of life and ensuring that development supports existing communities and contributes to the creation of safe, sustainable, liveable and mixed communities with good access to jobs and key services for all members of the community. (PPS 1 Paragraph 5).
- A spatial planning approach should be at the heart of planning for sustainable development including setting out a clear vision for the future pattern of development with clear objectives for achieving it. Planning should focus on outcomes: setting out the needs of communities in the area and how they interact and relate them to the development and use of land. Planning should seek to integrate a wide range of activities relating to development and regeneration including community development (paragraphs 13 iii and 32 PPS1).
- Good design ensures attractive, usable, durable and adaptable places and is a key element in achieving sustainable development. Good design is indivisible from good planning (PPS1 paragraph 33-39).

**PPS7: Sustainable development in Rural Areas** sets out criteria for locating Community services and facilities and the design and the character of rural settlements.

*Locating Community services and facilities* – (paragraph 6). People who live or work in rural areas should have reasonable access to a range of services and facilities. Local planning authorities should: facilitate and plan for accessible new services and facilities, particularly where settlements, or the population of their rural catchments, are expanding; identify suitable buildings and development sites for community services and facilities to meet the needs of the whole community, including disabled users and support mixed and multi-purpose uses that maintain community vitality.

Planning authorities should adopt a positive approach to planning proposals designed to improve the viability, accessibility or community value of existing services and facilities, e.g. village shops and post offices, rural petrol stations, village and church halls and rural public houses, that play an important role in sustaining village communities (paragraph 7).

*Design and the character of rural settlements* (paragraphs 12 and 13). Many country towns and villages are of considerable historic and architectural value, or make an important contribution to local countryside character.

Planning authorities should ensure that development respects and, where possible, enhances these particular qualities. It should also contribute to a sense of local identity and regional diversity and be of an appropriate design and scale for its location, having regard to the policies on design contained in PPS1 and supported in *By Design*. Planning authorities should take a positive approach to innovative, high-quality contemporary designs that are sensitive to their immediate setting and help to make country towns and villages better places for people to live and work.

Local planning authorities should prepare policies and guidance that encourage good quality design throughout their rural areas, in accordance with Annex C to PPS1, and utilising tools such as Landscape Character Assessments and Village or Town Design Statements, and the design elements of Village or Parish Plans prepared by local communities.

**PPS6: Planning for Town Centres** covers town centres and the main town centre uses as set out in paragraph 1.8 and defined in Table 1 of Annexe A. This does not include a hospice or a major regional health facility. The main significance of PPS6 is that it advocates a sequential approach to site selection (paragraphs 2.44-2.47) however, this would only apply to development which the government considers appropriate to town centres. Table 3 of Annexe A concerns the need to focus on local service centres – i.e. market towns and large villages where new development can bring support to these vital local facilities. Hillington, as a village with an impressive range of facilities and services, could be regarded as a local centre in terms of PPS6. One facility, St Mary's Church, is likely to receive more support and use as a result of the development of the Hospice in the village. The cluster of villages to which Hillington belongs will like-wise benefit.

**PPS13: Transport** seeks a sustainable transport system which is energy efficient and reduces car-use. It recognises the role of rural centres and considers the special case of rural areas (paragraphs 40-44). The development proposal for the new Norfolk Hospice at Hillington is supported by a Transport Assessment (paragraph 25) and by the framework for a Travel Plan (paragraphs 87-91) – see the accompanying Transport Assessment produced by consultants WSP.

### **2.8.2 The Regional Spatial Strategy**

This is now expected to be finalised by early 2008. At present, the East of England Plan designates King's Lynn as a key centre for development and change and has no specific policy guidance relating to locating a hospice. The Borough Council of King's Lynn and West Norfolk has aspirations to promote King's Lynn as a regional service centre and has developed an Urban Development Plan (based on an Urban Renaissance Strategy) to deliver this. The Council is currently pursuing Growth Point status to secure national investment to enable the new development and the provision of related infrastructure. The new Norfolk Hospice at Hillington sits well with the regional service centre aspirations of the Council. It may not be located in King's Lynn itself but, undoubtedly, the new Hospice will strengthen this role.

The saved policies of the **Norfolk Structure Plan (1999)** and **The King's Lynn and West Norfolk Local Plan (1998)** contain no specific guidance relating to the location of a hospice. Although the new Norfolk Hospice, Tapping House, serves more than the local need of a particular village, or the surrounding rural area, there is no additional guidance in the Local Plan which assists in locating such a facility with its special needs (identified in sections A-D above). The Borough Council has indicated that it relies on national planning policy (see above) when determining planning applications until the new Local Development Framework is adopted. This points to the need to consider the development proposal on its merits – paying particular regard to the community need for the facility and the special locational requirements for the Hospice.

## **2.9 Selection and Evaluation of Alternative Sites**

In total 12 sites were considered as locations for the new Norfolk Hospice (2 in North Wootton, 1 in South Wootton, 1 at Knights Hill, 3 in Bawsey/Leziate, 4 in the village of Gayton and 1 in Hillington). Two of the sites in North and South Wootton were discarded as being isolated and for the potential impact on the Norfolk Coast Area of Outstanding Natural Beauty (AONB). The site at Knights Hill was also in the AONB. The remaining 9 sites were visited and assessed independently by five professionals with differing skills base from the Project Team using the following criteria:

- Site location/environment/views.
- Accessibility of site from existing roads.
- Access to public transport/other communication links.
- Proximity to medical support services/Queen Elizabeth Hospital.
- Proximity to volunteer and staff pool.
- Site position/profile.
- Availability of affordable land.
- Topography.
- Ground conditions.
- Mains Services Provision.

A site assessment summary in the form of a scoring sheet was produced for each site. Based on the site assessment reports and scores four sites were selected and proceeded with including sites at Bawsey, North Wootton and two at Gayton. A full site analysis and evaluation of these sites was carried out by Mathews Serjeant Architects. This considered:

- The summer and winter traverse of the sun across the site.
- Important views in and out of the site.
- Detailed local topography.
- Drainage, utility and infrastructure issues.
- The importance and impact of local landscape features.
- The potential to gain access to the site.
- The ability to satisfactorily accommodate the notional 'building footprint' on the site.
- The potential effects of local climate (e.g. exposure to adverse winds).
- Site security.
- Impact on and proximity of neighbouring development.

The analysis of the results revealed a preference for a site at Gayton although it proved impossible to proceed with the Hospice development here. A further search identified the current site at Hillington, which has been subject to the same evaluation.

## **2.10 The site at Hillington**

The site at Hillington is the most suitable of all the sites investigated. Whilst each site had its own strengths and weakness, Hillington is extremely well located and has good access from all directions. A Hospice would add to the good balance of facilities and services in the village (particularly the restaurant/motel and village shop/post office) making them less reliant on passing trade. In fact, all the alternative sites fell out of the running owing to various combinations of the criteria listed above and also cost and availability.

The Hillington site itself has sufficient space, a good environment, clean and sound ground conditions, proximity to utility services and easy access. It is well integrated into the form of the village and the new Hospice will complement the traditional village character. The Hospice has the advantage of Hillington's existing strong service base. It has St Mary's Church, a Post Office/general store and pub/restaurant/motel with a social club. The village has good transport connections by bus and road to the Queen Elizabeth Hospital and to Kings Lynn. The Hospice will contribute employment opportunities and add to the sense of community.

Initial village consultation has begun through liaison with the Parish Council, village and local representatives. A series of presentations will be given by the hospice to ensure all residents are kept informed and that their views and feedback is taken into account.

The location of Hillington (and cluster of surrounding villages) is central to the area the Hospice serves in terms of its patients, employees, volunteers and donors. It is close enough to Kings Lynn to benefit from the good transport links and yet sufficiently rural to be able to provide a calm and tranquil setting for the patients.

Last but by no means least this site is deliverable.

## **2.12 Conclusions**

The New Norfolk Hospice, Tapping House at Hillington:

- Is the right development, in the right place, at the right time. The scheme fulfils an identified and quantified community need and will shape the locality to provide a development of high quality design which will respect and enhance the traditional form and character of the village and contribute towards the sense of local identity.
- Will be a sustainable development. In particular it will meet the sustainable community needs and aspirations of West Norfolk and beyond.

Great care will be taken to protect the local environment and the new use will bring vital support to local village services together with the possibility of additional local employment.

- The Hospice at Hillington will adopt green low carbon index design measures including rainwater harvesting and possible solar power options and will engage and employ the local workforce in the construction and running of the facility.
- Will be sustainable improving the quality of life and well-being of the local communities.
- Is being designed using a spatial planning approach including setting out a clear vision for the future pattern of development with clear objectives for achieving it.
- Will be of a high quality of design making an attractive, usable, durable and adaptable place.
- Will provide reasonable access to people who live or work in rural areas thereby maintaining community vitality.
- Should not be subject to a sequential approach to locating the new Hospice as it is not considered by government to be a main town centre use.
- Will support Hillington's role as a local centre.
- Is supported by a full Transport Assessment which includes a framework for a Travel Plan.
- Will strengthen the role of King's Lynn as a key centre for development and change in the emerging regional strategy a regional service centre.
- Does not offend policies in the approved Norfolk Structure Plan or the King's Lynn and West Norfolk Local Plan.
- Should be determined on its own merits.

*"Never doubt that a small group of thoughtful committed citizens can change the world. Indeed it's the only thing that ever does"*

Margaret Mead