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**Representation form for the Bedford Borough Local Plan 2040: Plan for Submission (Regulation 19 publication stage)**

**Please refer to the** [**guidance notes**](https://edrms.bedford.gov.uk/OpenDocument.aspx?id=tqfcv8PIi9gZ9ouyx%2bOWlw%3d%3d&name=Guidance%20notes%204.pdf) **available before completing this form.**

**Please return to Bedford Borough Council by 5pm on 29th July 2022.**

This form has two parts –

Part A – Personal details: need only be completed once.

Part B – Your representation(s). Please fill in a separate sheet for each representation you wish to make.

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| **Part A** | | | | | | |
| 1. Personal details\* |  |  |  |  |  | 2. Agent’s details (if applicable) |
| \**If an agent is appointed, please complete only the Title, Name and Organisation (if applicable) boxes below but complete the full contact details of the agent in 2.* | | | | | | |
| Title |  | | |  | |  |
|  | | | | | |  |
| First name |  | | |  | |  |
|  | | | | | |  |
| Last name |  | | |  | |  |
|  | | | | | |  |
| Job title | Head of Business Relationships | | |  | |  |
| (where relevant) | | | | | |  |
| Organisation | East of England Ambulance Service NHS Trust | | |  | |  |
| (where relevant) | | | | | |  |
| Address line 1 | Hammond Road | | |  | |  |
|  | | | | | |  |
| Line 2 | Bedford | | |  | |  |
|  | | | | | |  |
| Line 3 |  | | |  | |  |
|  | | | | | |  |
| Line 4 |  | | |  | |  |
|  | | | | | |  |
| Postcode | MK41 ORG | | |  | |  |
|  | | | | | |  |
| Telephone number | 07874643007 | | |  | |  |
|  | | | | | |  |
| E-mail address | planning.notifications@eastamb.nhs.uk | | |  | |  |
| (where relevant) | | | | | |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Part B – Please use a separate sheet for each representation** | | | | | | | | | | | | | |
| Name or organisation: | | | | | | | | | | | | | |
| 3. To which part of the Local Plan does this representation relate? | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| Paragraph | | Sec 6 Infrastructure Assessment: Social Infrastructure | Policy | | Infrastructure Delivery Plan | | Policies Map | | | |  | | |
| 4. Do you consider the Local Plan is : | | | | | | | | | | | | | |
| 4.(1) Legally compliant  4.(2) Sound | | | | Yes  Yes | | x | | |  | | | No  No |  |
|  | | |  |
|  | | | x |
| 4 (3) Complies with the  Duty to co-operate Yes No  x | | | | | | | | | | | | | |
| Please tick as appropriate | | | | | | | | | | | | | |
| 5. Please give details of why you consider the Local Plan is not legally compliant or is unsound or fails to comply with the duty to co-operate. Please be as precise as possible.  If you wish to support the legal compliance or soundness of the Local Plan or its compliance with the duty to co-operate, please also use this box to set out your comments. | | | | | | | | | | | | | |
| The Infrastructure Delivery Plan (IDP) is considered to be unsound as an evidence base to the local plan as it is not ‘justified’ - insofar as the current approach does not reflect the most appropriate strategy taking into account the reasonable alternatives, and based on proportionate evidence.  The omission to include reference to the ambulance services and facilities provided by The East of England Ambulance Service NHS Trust (EEAST) and its funding requirements to mitigate planned growth as an essential social infrastructure provider, is unwarranted and the IDP therefore ought to be updated.  Continue on a separate sheet /expand box if necessary) | | | | | | | | | | | | | |
| 6. Please set out the modification(s) you consider necessary to make the Local Plan legally compliant and sound, in respect of any legal compliance or soundness matters you have identified at 5 above. (Please note that non-compliance with the duty to co-operate is incapable of modification at examination). You will need to say why each modification will make the Local Plan legally compliant or sound. It will be helpful if you are able to put forward your suggested revised wording of any policy or text. Please be as precise as possible. | | | | | | | | | | | | | |
| Insert a section for EEAST after Sec 6.9 Emergency Services: Fire as follows;   * “6.10 Emergency Services: Ambulance”   *New text to read as follows*;  **Introduction**  **6.10.1** East of England Ambulance Service NHS Trust (EEAST) provides accident and emergency services and non-emergency patient transport services across the East of England, including within the Bedford BC area, and is required to meet and maintain nationally set response times.  **6.10.2** The Trust Headquarters is in Melbourn, Cambridgeshire and there are Ambulance Operations Centres (AOC) at each of the three locality offices in Bedford, Chelmsford and Norwich who receive over 1 million emergency calls from across the region each year, as well as 800,000+ calls for patients booking non-emergency transport.  **6.10.3** The 999 service is part of the wider NHS system providing integrated patient care. Provision of 999 services is aligned closely with national and regional initiatives driven by:     * Sustainability and Transformational Partnerships * Integrated Care System * Integrated Urgent Care systems, i.e. NHS 111, Clinical Assessment Services, Urgent Treatment Centres, GP Out of Hours Services.   **6.10.4** Additionally, regional Ambulance Trusts may collaborate closely with other ambulance services, the wider emergency services or wider system providers to deliver appropriate patient care.  **6.10.5** To support the service transformation agenda, the key requirements are:   * To deliver the core response and clinical outcome standards as defined by the Ambulance Response Programme * To fulfil statutory duties relating to emergency preparedness, resilience and response (EPRR) * Optimisation of call handling and appropriate responses through virtual alignment of NHS 111/999 and call/CAD transfer between ambulance services * Increase the percentage of lower acuity calls managed through “hear and treat” and “see and treat” options * Utilise a virtual delivery model to support wider workforce integration for paramedics, call handlers and specialist staff with local urgent care delivery models * Facilitate cross boundary working and the flexible use of ambulance service resources to support the development of regional Sustainability and Transformational Plans and Integrated Care Systems.   **6.10.6** The 999 service is free for the public to call and is available 24 hours a day, 7 days a week, 365 days a year, to respond to the population with a personalised contact service when patients:   * Require rapid transportation with life threatening illness/injury or emergencies - category 1 and 2 * Present with lower acuity urgent and less urgent conditions - category 3 and 4 requiring clinical interventions * Patients may be passed to 999 via other NHS health care systems, including NHS 111 * EEAST receives over 1 million emergency (999) calls per year and 800,000 calls for patients booking non-emergency transport.   **6.10.7** EEAST also provides urgent and emergency responses to Healthcare Professionals requiring ambulance assistance, and inter-facility transfers between hospitals and other healthcare settings, where patients require treatment at alternative sites to their current setting.  **6.10.8** Non-Emergency Patient Transport Services (NEPTS) provide an essential lifeline for people unable to use public or other transport due to their medical condition. These much-needed journeys support patients who are:   * Attending hospital outpatient clinics or other healthcare location * Being admitted to or discharged from hospital wards * Needing life-saving treatments such as radiotherapy, chemotherapy, renal dialysis or DVT treatment.   **Baseline**  **6.10.9** EEAST’s Estates Strategy (2020-25) aims to provide cost effective and efficient premises of the right size, location and condition to support the delivery of clinical care to the community served by the Trust.  **6.10.10** EEAST is currently implementing national initiatives to improve performance and sustainability within the NHS across the wider urgent and emergency system. The Trust is developing a future operating model to assist transformation of support services, based on a ‘Make Ready Hub’ and ‘Spoke’ network.  **6.10.11** EEAST is therefore rolling out a Hub and Spoke network with up to 18 hubs to provide regional premises for delivery of operational responses to calls, flow of ambulance preparation via the Make Ready function (cleaning and restocking of ambulances) and despatch of ambulances to local spokes (reporting posts/response posts/standby locations). Support services such as workshop facilities, clinical engineering (medical equipment store and workshop), consumable product stores and support office accommodation are also provided from Hubs.  **6.10.12** EEAST’s estate comprises of the following types of premises;   * Ambulance Station Central Reporting Post - A 24/7 - Permanent reporting base for staff and primary response location for one or more vehicles. Provision of staff facilities. * Ambulance Station Response Post - A primary response location, which includes staff facilities but is not a reporting base for staff. * Standby Location - Strategic locations where crews are placed to reach patients quickly. Facilities used by staff are provided on an informal basis only by agreement with the relevant landowner.   **6.10.13** EEAST’s estate in the Bedford BC area comprises an ambulance hub at Kempston, with plans for refurbishment or redevelopment, as appropriate, to meet the Trusts’s Integrated Transformation Plan.  Map  Description automatically generated  **East of England Ambulance Stations in Bedfordshire & Luton**  **6.10.14** EEAST’s service assets (personnel)and vehicle fleet operating alongside its Estate are outlined below;  **EEAST clinicians:**   * Emergency Care Support Workers * Emergency Medical Technicians * Paramedics * Specialist Paramedics * Critical Care Paramedics.   **Types and models of response:**   * Community First Responder (CFR) * Patient Transport Service (PTS) * Clinical See and Treat * Clinical Hear and Treat (telephone triage) * Early Intervention Team (EIT) * Rapid Response Vehicle (RRV) * Double Staff Ambulance (DSA) * Hazardous Area Response Team (HART) * Specialist Operations Response Team (SORT) * Helicopter Emergency Medical Service (HEMS) - EEAST utilise 5 aircraft across 3 charities within the region * Magpas – 1 x aircraft from RAF Wyton * East Anglian Air Ambulance – 2 x aircraft form Cambridge and Norwich Airport * Essex and Herts Air Ambulance – 2 x aircraft form North Weald and Earls Colne   **Ambulance Operations Centre (AOC) staff:**   * 999 Call Handlers * Emergency Medical Dispatchers * Tactical Operations Staff * EEAST support services staff cover all other corporate and administrative functions across the region.   **Vehicle Fleet:**   * Front line ambulances * Rapid response vehicles * Non-emergency ambulances (PTS and HCRTs vehicles) * HART/major incident/resilience vehicles located at 2 x Hazardous Area Response Team (HART) bases with a number of specialist vehicle resources.   **Specialisms:**  **6.10.15** EEAST works collaboratively across its blue light partners and have joint working groups with Police and Fire Services across the region, working in partnership managing responses to incidents and undertaking joint exercises with our dedicated resources to prepare for specialist rescue, major incidents and mass casualty incidents.  **6.10.16** EEAST is a Category 1 Responder under the Civil Contingencies Act, 2004, playing a key role in developing multi-agency plans against the county and national risk registers. EEAST also works closely with the Military, US Air Force, Royal Protection Service, Stansted Airport and the Port of Felixstowe Police, Fire and Ambulance services.  **6.10.17** EEAST’s Emergency Preparedness Resilience Response (EPRR) team lead on the Joint Emergency Services Interoperability Principles (JESIP) working in close partnership with all blue light agencies, the Coastguard and Local Authorities. Specialist resources work with the Police in counter terrorism and developing response plans in the event of a major incident.  **6.10.18** EEAST are an integral part of the locality’s resilience response sitting on a number of safety advisory groups, east coast flood working groups and hospital emergency planning groups.  **Co-working Relationship with other Blue – Light & Healthcare Partners**  **6.10.19** EEAST is an integral part of the wider healthcare system working closely with the Bedford Luton & Milton Keynes Integrated Care System (ICS) and Clinical Commissioning Groups (CCGs) to deliver emergency and urgent care and are key stakeholders in supporting wider healthcare initiatives.  **6.10.20** Within the Bedford BC area EEAST work with the CCGs in delivering additional care pathways focussing on hospital admission avoidance, this is a partnership with the local acute providers and local authorities. EEAST operate Early Intervention Response vehicles and a Rapid Intervention Vehicle. These resources work collaboratively within the system to offer holistic care to patients whilst reducing pressure on Emergency Departments.  **6.10.21** This is EEAST’s response to the requirements of the NHS Long Term Plan, with the clear narrative that in order to bring the NHS into financial balance all NHS providers must find mechanisms to treat patients in the community and out of the most expensive care setting, which are acute hospitals. This not only saves the NHS critical funding, but it also improves patient outcomes.  **6.10.22** EPRR and Specialist Operations teams routinely train with other blue light agencies in preparedness for major incidents such as terrorist attacks and major incidents with statutory training obligations to respond to local and national incidents.    **6.10.23** In continuing to respond to the COVID-19 Pandemic, EEAST is working collaboratively with Private Ambulance providers, the Military, volunteer Ambulance Services (such as St John Ambulance and British Red Cross) and local Fire and Rescue Services, to increase its capacity and maintain service delivery to meet the additional demand.  **EEAST Service Targets**  **6.10.24** All NHS organisations are required to report against a set of Core Quality Indicators (CQIs) relevant to their type of organisation. For ambulance trusts, both performance and clinical indicators are set as well as indicators relating to patient safety and experience.  **6.10.25** NHS organisations are also required to demonstrate their performance against these indicators to both their commissioners and Regulators (NHS England/Improvement).  **6.10.26** It is important to note that EEAST is also measured on how quickly a patient is transported to an appropriate location for definitive care, often in time critical circumstances.  **6.10.27** Failure to deliver against these indicators will result in a Contract Performance Notice and could result in payment being withheld, as prescribed in NHS Standard Contract 20/21 General Conditions (Full Length) GC9 9.15.  **EEAST Operational Standards & Thresholds**  **Ambulance Service Response Times**   | Operational Standards | Threshold | Consequence of Breach | | --- | --- | --- | | Category 1 (life-threatening) calls – proportion of calls resulting in a response arriving within 15 minutes | Operating standard that 90th centile is no greater than 15 minutes | Issue of a Contract Performance Notice and subsequent process in accordance with GC9. For each second by which the Provider’s actual 90th centile performance exceeds 15 minutes, £2.50 per 1,000 Category 1 calls received in the Quarter | | Category 1 (life-threatening) calls – mean time taken for a response to arrive | Mean is no greater than 7 minutes | Issue of a Contract Performance Notice and subsequent process in accordance with GC9 | | Category 2 (emergency) calls – proportion of calls resulting in an appropriate response arriving within 40 minutes | Operating standard that 90th centile is no greater than 40 minutes | Issue of a Contract Performance Notice and subsequent process in accordance with GC9. For each second by which the Provider’s actual 90th centile performance exceeds 40 minutes, £2.50 per 1,000 Category 2 calls received in the Quarter | | Category 2 (emergency) calls – mean time taken for an appropriate response to arrive | Mean is no greater than 18 minutes | Issue of a Contract Performance Notice and subsequent process in accordance with GC9 | | Category 3 (urgent) calls – proportion of calls resulting in an appropriate response arriving within 120 minutes | Operating standard that 90th centile is no greater than 120 minutes | Issue of a Contract Performance Notice and subsequent in process accordance with GC9. For each second by which the Provider’s actual 90th centile performance exceeds 120 minutes, £2.50 per 1,000 Category 3 calls received in the Quarter | | Category 4 (less non-urgent “assess, treat, transport” calls only) – proportion of calls resulting in an appropriate response arriving within 180 minutes | Operating standard that 90th centile is no greater than 180 minutes | Issue of a Contract Performance Notice and subsequent process in accordance with GC9. For each second by which the Provider’s actual 90th centile performance exceeds 180 minutes, £2.50 per 1,000 Category 4 calls received in the Quarter |   For All Indicators:   |  |  | | --- | --- | | Method of Measurement: | See AQI System Indicator Specification at:  <https://www.england.nhs.uk/statistics/statistical-work-areas/ambulance-quality-indicators/>  Review of Service Quality Performance Reports | | Timing of Application of Consequence | Quarterly for all indicators | | Application | AM |   **Forward Look**  **6.10.28** EEAST is operating at capacityand the forecast population increase(29,462 persons) associated with the planned housing growth within the Bedford BC area (12,276 dwellings - to be allocated) will have a significant impact on its service capacity and resources, requiring developer funding to mitigate the effects.  **6.10.29** In addition, deprivation, age and the increasing number of people living for longer with more complex long-term conditions, all impact on the level of ambulance service demand, in respect of both emergency and non-emergency patient transport services.  **6.10.30** The age profile is also a key factor, as people at both ends of the age spectrum consume a disproportionately large quantity of healthcare services and resource. Those aged over 75 years are most likely to have multiple long-term conditions and complex care needs.  **6.10.31** Analysis of EEAST activity from 2019/20 indicates residents aged 65 years and over account for over 1/3 (35%) of Category 1 ambulance activity and 52% of all activity. Those aged 2-18 years account for 15% of Category 1 activity and 8% of all activity.  **Costs, Funding and Delivery**  **Costs & Funding**  **6.10.32** In order to accommodate the additional planned housing and population growth within the Borough to 2040, and maintain nationally set response times, EEAST will require developer funding to mitigate and manage the impacts arising on its service capacity and resources.  **6.10.33** An estimated cost of **£3,830,112** based on a standard charge of **£312/dwelling** is identified to fund the following ambulance service infrastructure and facilities;   * An increase in the number & type of ambulances; * Provision of additional medical, pharmacy & IT equipment/digital software to manage the increased number of incidents from the new population; * The recruitment, training, equipping & tasking of Community Responders based within the locality of development sites & their environs; * Redevelopment or relocation of existing ambulance stations to a more suitable location, as appropriate, to meet the increased local demand arising from housing developments;   **6.10.34** Developer funding and financial contributions via the Community Infrastructure Levy (CIL) and planning obligations, respectively, would form the principal funding sources to increase EEAST’s operational capacity and resources.  **Delivery**  **6.10.35** EEAST is contracted by BLMK CCG to deliver accident and emergency services and non-emergency patient transport services within the Bedford BC area, and therefore requires sufficient provision to be made for developer funding in order to meet and maintain nationally set response times.  **Summary**  **6.10.36** East of England Ambulance Service NHS Trust (EEAST) provides accident and emergency services and non-emergency patient transport services across the East of England, including within the Bedford BC area, and is required to meet and maintain nationally set response times.  **6.10.37** EEAST’s Estates Strategy (2020-25) aims to provide cost effective and efficient premises of the right size, location and condition to support the delivery of clinical care to the community served by the Trust.  **6.10.38** EEAST is currently implementing national initiatives to improve performance and sustainability within the NHS across the wider urgent and emergency system. The Trust is therefore developing a future operating model to assist transformation of support services, based on a ‘Make Ready Hub’ and ‘Spoke’ network.  **6.10.39** EEAST’s existing estate in the Bedford BC area comprises an ambulance hub at Kempston, with plans for refurbishment or redevelopment, as appropriate, to meet the Trusts’s Integrated Transformation Plan.  **6.10.40** In order to accommodate the additional planned housing and population growth within the Borough to 2040, and maintain nationally set response times, EEAST will require developer funding to mitigate and manage the impacts arising on its service capacity. An estimated cost of £3,830,112 is identified to fund the following ambulance infrastructure and facilities;   * An increase in the number & type of ambulances; * Provision of additional medical, pharmacy & IT equipment/digital software to manage the increased number of incidents from the new population; * The recruitment, training, equipping & tasking of Community Responders based within the locality of development sites & their environs; * Redevelopment or relocation of existing ambulance stations to a more suitable location, as appropriate, to meet the increased local demand arising from housing developments;   **6.10.41** Developer funding and financial contributions via the Community Infrastructure Levy (CIL) and planning obligations, respectively, would form the principal funding sources to increase EEAST’s operational capacity and resources.  \**Section 7 (Headline Findings & Delivery) to be updated in light of the above with a funding gap of £3,830,112*  \*\* Note that this form is representation 5 of 7 related to changes requested to the IDP  (Continue on a separate sheet /expand box if necessary) | | | | | | | | | | | | | |
| ***Please note.*** *In your representation you should provide succinctly all the evidence and supporting information necessary to support your representation and your suggested modification(s). You should not assume that you will have a further opportunity to make submissions.*  ***After this stage, further submissions may only be made if invited by the Inspector, based on the matters and issues he or she identifies for examination.*** | | | | | | | | | | | | | |
| 7. If your representation is seeking a modification to the plan, do you consider it necessary to participate in examination hearing session(s)? | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
|  |  | **No**, I do not wish to  participate in  hearing session(s) | | | | | | x | | **Yes**, I wish to participate in hearing session(s) | | | |
| Please note that while this will provide an initial indication of your wish to participate in hearing session(s), you may be asked at a later point to confirm your request to participate. | | | | | | | | | | | | | |
| 8. If you wish to participate in the hearing session(s), please outline why you consider this to be necessary: | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| The East of England Ambulance Service NHS Trust (EEAST) is an essential social infrastructure provider, who confirm that there will be an increased requirement for ambulance services/ facilities necessitated by the planned housing growth and population arising, requiring appropriate IDP recognition and developer funding - in order to mitigate the impact on EEAST’s operational capacity/ resources and maintain nationally set response times. | | | | | | | | | | | | | |
| ***Please note*** *the Inspector will determine the most appropriate procedure to hear those who have indicated that they wish to participate in hearing session(s). You may be asked to confirm your wish to participate when the Inspector has identified the matters and issues for examination.* | | | | | | | | | | | | | |