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**Report of the Chief Planning Officer**

**CITY PLANS PANEL**

**Date: 25 October 2018**

**Subject: PREAPP/17/00700- Preapplication presentation for a new masterplan for the Leeds General Infirmary with the demolition of the former nurse's home and other buildings and creation of a new adult and children's services health facility building, a multi storey car parking, new access and egress points into the hospital grounds and a landscape scheme, at Great George Street, Leeds, LS1 3EX**

**Developer- Leeds Teaching Hospitals NHS Trust**

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**Electoral Wards Affected:**

**Little London & Woodhouse**

Yes

Ward Members consulted  
(referred to in report)

**Specific Implications For:**

Equality and Diversity

Community Cohesion

Narrowing the Gap

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**RECOMMENDATION: This report is brought to Plans Panel for information. The Developer will present the details of the emerging scheme to allow Members to consider and comment on the proposals at this stage.**

**1.0 INTRODUCTION:**

1.1 This presentation is intended to inform Members at an early stage of the emerging proposals for the demolition of the former nurse's home and other buildings and creation of a new adult and children's services health facility building, a multi storey car park, new access and egress points into the hospital grounds and a landscape scheme, which form part of a comprehensive redevelopment and regeneration of the Leeds General Infirmary's (LGI) estate. The LGI forms part of the NHS Trust's Building the Leeds Way Investment Programme which seeks to enhance health services in Leeds to assist the Trust to continue to provide the best in terms of integrated and specialist health care. The NHS Trust has been engaged in significant positive engagement with Officers and the proposals are now brought to

City Plans Panel as the development involves major investment in Leeds General Infirmary, which is an important provider of health care within Leeds.

- 1.2 The LGI hospital campus is positioned within the emerging Leeds Innovation District. This concept represents the strategic aims of the City Council, the Teaching Hospital, and the Universities to use their joint and shared knowledge, civic and land assets to catalyse and accelerate innovation and economic growth throughout the city. The overarching intent is to create a world-class hub for research, innovation and entrepreneurialism in priority sectors that delivers transformational economic growth for Leeds and the City Region.
- 1.3 The Trust have provide a supporting statement which is attached to this report as an Appendix. This statement provides an overview of the Trust's proposals and their various clinical health purposes, information on the functions of the Leeds Hospitals in question, an overview of the Trust's investment programme, information on how the other parts of the estate will be developed, the Trust's role within the Innovation District and how the site can engage with this concept, the current position of the Trust in respect of their proposals and the programme for development.

## **2.0 SITE AND SURROUNDINGS:**

- 2.1 The site is the estate of the Leeds General Infirmary which is located within the defined City Centre. The estate is made up from a broad mixture of buildings of different form and architectural era and the Infirmary grounds are set within the City Centre Conservation Area. The Grade I Listed Gilbert Scott designed Infirmary building and Grade II\* School of Medicine and the Grade II boundary wall and railings to the Infirmary and the Algernon Firth Institute of Pathology are set within the demise of the hospital's estate. In addition the Grade II\* Civic Hall and the Grade II Church of St George, Burley House, 12A Clarendon Road, 14 Clarendon Road, 16 Clarendon Road and Woodhouse Hall are close to, but outside of, the boundary of the hospital grounds.
- 2.2 The Corson's Outpatients' Department which sits within the campus of the hospital has recently been added to the Listed Buildings register and has been determined to be a Grade II Listed Building.

## **3.0 PROPOSAL:**

- 3.1 The proposed development seeks to demolish a number of buildings within the hospital grounds, decommission others thus freeing them for alternative uses, and to build a new centralised 'state of the art' adult and children's services building providing some 78,000 sq metres of focused healthcare space. This would result in the consolidation and centralisation of inpatient and outpatient services for children in a new and more accessible world-class children's hospital.
- 3.2 In addition the changes will allow the centralisation of a number of adult services (to include outpatients and therapies; day case surgery and endoscopy) that will permit services to be co-located and centralised improving the patient experience and facilitating a significant release of currently under used estate buildings. It is also projected that this will result in an increase and release in operating theatre and critical care capacity to meet increasing demand for neurosurgery and cardiac surgery.
- 3.3 Further to this the scheme will allow the consolidation of maternity services, currently provided over two separate sites, into a single Maternity Unit. The proposals will also

support improvements to Emergency Care and, in particular, plans to develop new Primary Care diagnostics and treatment services as part of a newly established Urgent Treatment Centre

- 3.4 A new multi storey car park, to accommodate in the region of 450 spaces is proposed. These would be in addition to the existing multi storey car park to the north of the hospital grounds (which has 709 spaces). Existing surface car parking at the number of locations will be rationalised, with some removals, resulting in an overall provision of approximately 1500 car parking spaces across the LGI estate. As a result there would be a net increase in car parking numbers of some 410 additional visitor car parking spaces. To the front of the new healthcare building and the multi storey car park an area providing 41 drop off spaces is proposed.
- 3.5 In addition to improve accessibility and legibility across the estate new principal vehicle and pedestrian access and egress points would be created alongside the new drop off area. The principal vehicle access would be from Calverley Street with vehicles exiting the hospital campus via Portland Street. New and enhanced pedestrian and cycling routes both north - south and east - west would be created including the breaking through of the Brotherton Wing building to create a broad pedestrian only route into the site from Calverley Street.
- 3.6 Across the hospital campus it is proposed to define a series of spaces and pedestrian routes as part of a hard and soft landscape scheme. These proposals are at an emerging stage but could include a public open space in front of the new healthcare building, a pocket park, private and semi-private amenity spaces, and roof terrace/gardens, greened, enhanced pedestrian only routes into and around the site. Opportunities to create meaningful, usable spaces as well as tree planting and the placement of public art are being explored.
- 3.7 The Jubilee wing would be subject to internal reconfigurations to improve patient flow within the Emergency Department/Major Trauma Centre and the new adult and children's services building would attach to it to create a combined day and critical care facility for all.
- 3.8 It is proposed to submit the scheme as an Outline Planning Application for the proposed demolition of buildings, the construction of the new healthcare facilities and the construction of a new multi storey car park and associated access and layout proposals. Detailed design would then be subject to a Reserved Matters application and any appropriate Planning Conditions.
- 3.9 The wider LGI site area (which would fall outside the scope of the Outline Planning Application) will form the basis of a separate planning application(s). The NHS Trust have advised that they would expect such applications to be brought forwards by a development partner with the principles of development being based upon the vision for improved site access and permeability and also indicative development clusters across the site.
- 3.10 Whilst not part of this current presentation it should be noted that the NHS Trust's Building the Leeds Way programme also proposes alterations to some parts of the St James University Hospital (SJUH) campus. Currently, these proposals will principally include:
  - The reconfiguration of Pathology services through the creation of a new centralised Pathology building at the SJUH consolidating Biochemistry, Haematology, Immunology, Microbiology and Cytology (it is currently proposed that this will be a new building following the demolition of existing facilities);

- The creation of a new Multi Speciality Assessment Area to support the Emergency Department at SJUH and provide enhanced assessment facilities and new Primary Care diagnostics and treatment services as part of a newly established Urgent Treatment Centre (predominantly deemed to be internal building reconfiguration); and

- The phased centralisation/ reorganisation of Ophthalmology Services (predominantly deemed to be internal reconfiguration)

Whilst the proposals for the SJUH site are largely independent of the Leeds General Infirmary redevelopment plans, there are strategic links between the plans for both hospitals. For example, the establishment of new Urgent Treatment Centre hubs. In addition, the Trust's ability to centralise the LGI and SJUH Pathology Services may impact the future master planning of the LGI site and ultimately the creation of a new mixed use development focused around a series of Innovation hubs. However the SJUH proposals are not detailed at this time and as such do not form part of this presentation to Plans Panel, but will be brought before Members at a future date.

#### **4.0 RELEVANT PLANNING HISTORY:**

4.1 None

#### **5.0 HISTORY OF NEGOTIATIONS:**

5.1 The proposals have been the subject of significant positive pre-application discussions between the NHS Trust, their Architects, and Local Authority Officers since November 2017. These discussions have focused on the new positions of the buildings, the change of use of existing buildings, demolitions, heritage matters, scale, massing and design, connectivity and routes, car parking and transport links, and landscape features.

5.2 City Plans Panel Members were briefed on the emerging plans and taken on a visit of the LGI site on 16 October 2018.

5.3 Ward Members were consulted on 22 December 2017 and re-consulted on 3 October 2018.

#### **6.0 RELEVANT PLANNING POLICIES:**

6.1 National Planning Policy Framework (NPPF)

6.2 The National Planning Policy Framework (NPPF) was revised and adopted in July 2018 and sets out Government's planning policies for England and how these should be applied. It provides a framework within which locally-prepared plans for housing and other development can be produced.

6.3 Paragraph 39 of the NPPF states that early engagement has significant potential to improve the efficiency and effectiveness of the planning application system for all parties. Good quality pre-application discussion enables better coordination between public and private resources and improved outcomes for the community

6.4 Paragraph 124 of the NPPF states that the creation of high quality buildings and places is fundamental to what the planning and development process should achieve. Good design is a key aspect of sustainable development, creates better places in which to live and work and helps make development acceptable to communities. Being clear about design expectations, and how these will be tested,

is essential for achieving this. So too is effective engagement between applicants, communities, local planning authorities and other interests throughout the process

- 6.5 Paragraph 193 of the NPPF states that when considering the impact of a proposed development on the significance of a designated heritage asset, great weight should be given to the asset's conservation (and the more important the asset, the greater the weight should be). This is irrespective of whether any potential harm amounts to substantial harm, total loss or less than substantial harm to its significance.
- 6.6 Paragraph 194 of the NPPF states that any harm to, or loss of, the significance of a designated heritage (from its alteration or destruction, or from development within its setting), should require clear and convincing justification.
- 6.7 Paragraph 195 of the NPPF states that where a proposed development will lead to substantial harm to (or total loss of significance of) a designated heritage asset, local planning authorities should refuse consent, unless it can be demonstrated that the substantial harm or total loss is necessary to achieve substantial public benefits that outweigh that harm or loss, or all of the following apply:
- a) the nature of the heritage asset prevents all reasonable uses of the site; and
  - b) no viable use of the heritage asset itself can be found in the medium term through appropriate marketing that will enable its conservation; and
  - c) conservation by grant-funding or some form of not for profit, charitable or public ownership is demonstrably not possible; and
  - d) the harm or loss is outweighed by the benefit of bringing the site back into use.
- 6.8 Paragraph 196 of the NPPF states that where a development proposal will lead to less than substantial harm to the significance of a designated heritage asset, this harm should be weighed against the public benefits of the proposal including, where appropriate, securing its optimum viable use.
- 6.9 The Development Plan for Leeds currently comprises the following documents:
- 6.10 The Development Plan for Leeds currently comprises the following documents:
- 1. The Leeds Core Strategy (Adopted November 2014)
  - 2. Saved Leeds Unitary Development Plan Policies (Reviewed 2006), included as Appendix 1 of the Core Strategy
  - 3. The Natural Resources & Waste Local Plan (NRWLP, Adopted January 2013) including revised policies Minerals 13 and 14 (Adopted September 2015).
  - 4. Aire Valley Leeds Area Action Plan (Adopted November 2017)
  - 5. Any Neighbourhood Plan, once made.
- 6.11 Core Strategy
- 6.12 The Core Strategy sets out strategic level policies and vision to guide the delivery of development investment decisions and the overall future of the district.
- 6.13 Spatial Policy 1: Location of Development states that;
- (i) The majority of new development should be concentrated within urban areas taking advantage of existing services, high levels of accessibility and priorities for urban regeneration and an appropriate balance of brownfield and greenfield land
- 6.14 Policy CC1: City Centre Development:  
The City Centre will be planned to accommodate at least the following:
- iv) Supporting services and open spaces and improvements to the public realm.

This will be achieved through implementation of outstanding permissions, decision making on planning applications, master-planning, and identification of appropriate sites and mixed use allocations through LDF Allocations Documents, according to the following criteria:

c) Hospital, university, college, and cultural facilities to be retained in the City Centre

6.15 Policy P10: Design states that:

New development for buildings and spaces, and alterations to existing, should be based on a thorough contextual analysis to provide good design appropriate to its scale and function.

New development will be expected to deliver high quality innovative design that has evolved, where appropriate, through community consultation and which respects and enhances the variety of existing landscapes, streets, spaces and buildings according to the particular local distinctiveness and wider setting of the place, contributing positively towards place making and quality of life and be accessible to all.

6.16 Policy P11: Conservation states that development proposals will be expected to demonstrate a full understanding of historic assets affected. Heritage statements assessing the significance of assets, the impact of proposals and mitigation measures will be required to be submitted by developers to accompany development proposals.

6.17 Policy T2: Accessibility Requirements and New Development states that new development should be located in accessible locations that are adequately served by existing or programmed highways, by public transport and with safe and secure access for pedestrians, cyclists and people with impaired mobility:  
(i) In locations where development is otherwise considered acceptable new infrastructure may be required on/off site to ensure that there is adequate provision for access from the highway network, by public transport and for cyclists, pedestrians and people with impaired mobility, which will not create or materially add to problems of safety, environment or efficiency on the highway network.

6.18 Leeds Unitary Development Plan Review Retained Policies

Policy BD6 (All alterations)

Policy BD5 (All new buildings and amenity)

Policy GP5 (All planning considerations)

Policy N16 (Extensions to listed buildings)

Policy N17 (All listed buildings)

Policy N19 (New buildings and extensions within or adjacent to a conservation area)

6.19 Leeds Natural Resources and Waste DPD 2013

6.20 The Natural Resources and Waste Local Plan was adopted by Leeds City Council on 16th January 2013. The Natural Resources and Waste Development Plan Document (Local Plan) is part of the Local Development Framework. The plan sets out where land is needed to enable the City to manage resources, like trees, minerals, energy, waste and water over the next 15 years, and identifies specific actions which will help use natural resources in a more efficient way.

6.21 Supplementary Planning Documents

6.22 Parking Supplementary Planning Document adopted January 2016.

6.23 Supplementary Planning Document 'Travel Plans' (February 2015)

## 7.0 KEY ISSUES

### 7.1 Principle of the proposed uses

7.2 The proposal is to create a new specialised clinic accommodation building to house both adult and children's services, as well as a new purpose built multi storey car park to service the needs of the hospital. Core Strategy Policy CC1 states that hospital facilities should be retained within the city centre and Core Strategy paragraph 5.1.16 states that the Leeds General Infirmary contributes greatly to the vitality and economy of the City Centre. The buildings and the uses therein would all be sited fully within the Leeds General Infirmary grounds and would complement, support and enhance existing health care services. As such the proposals are compliant with planning policy.

7.3 It should be noted that the wider masterplan for the proposals also suggests possible future uses, including the potential for innovation uses, office, residential and retail for the decommissioned buildings. These are indicative only at this stage and would require interest from other developers, either working in partnership with the trust or independently, at a future date.

### 7.4 Proposed demolitions and the scale, massing and design of the proposals

7.5 The proposals involve the creation of a new 'state of the art' adult and children's services building upon the site of the former nurse's home buildings and a new multi storey car park, public space and drop off area in the location of other later buildings behind the Brotherton Wing, which faces Calverley Street. This therefore requires the demolition of the former nurse's home and the mix of 20<sup>th</sup> century buildings that currently sit behind the Brotherton Wing, as well as the breaking through of the Brotherton Wing to create a new access point into the hospital grounds.

7.6 The former nurse's home, Brotherton Wing, King Edward Memorial Wing and the associated buildings behind Brotherton are not formally Listed Buildings in their own right. However the extent of the defined Listings of other buildings on the hospital campus has been clarified by the Developer with Historic England and as a result the Corson's Outpatients Department building has been added to the register of Listed Building and is now defined as a Grade II Listed Building.

7.7 It is the case that some of the buildings to be demolished do have some level of architectural and historic merit that is considered to contribute to the character and visual amenity of the City Centre Conservation Area, which is a designated heritage asset in its own right. As such the buildings to be demolished are considered to be non-designated heritage assets. The character of this part of the conservation area is predominantly Victorian, with a number of historic buildings still being evident within and adjacent to the hospital grounds. However it is the case that the buildings to be demolished do not have sufficient significant to be considered worth of listing. There are also a number of other existing hospital building adjacent to these non-designated heritage assets, which are of different eras and architectural styles and the character of buildings and streets in the wider city centre starts to shift significantly in respect of architectural era and layout around the campus.

7.8 Therefore Officers consider that the level of demolitions would be likely to lead to less than substantial harm to the significance of these non-designated heritage

assets and the City Centre Conservation Area and that the advice in paragraph 196 rather than paragraph 195 of the revised NPPF is applicable for this proposal. This advises that the harm to the heritage asset should be weighed against the public benefits of the proposal.

- 7.9 The public benefits to the scheme including:
1. The reconfiguration of hospital services creating a more legible campus
  2. The creation of dedicated adult and children's services wings to allow for enhanced patient services
  3. The creation of additional on site car parking to assist the ease of patients and visitors trips to the hospital
  4. The freeing up of underused important listed buildings in the hospital ground to allow them to be put back into a new sustainable use.
  5. The ability to support the most advanced technologies, equipment and treatments.
  6. The ability to improve on providing mobile, flexible care tailored to the needs of patients.
  7. The creation of modern, comfortable surroundings designed to welcome and reassure patients.
  8. The ability to support innovation and pioneering research.
- 7.10 In addition, the proposal would realise high quality new buildings, enhanced pedestrian connections and new public spaces. The above noted public benefits are considered to be material in the assessment of the proposals in this presentation. Provided the detailed scheme that comes forward from these emerging design concepts is sensitively detailed and of a sufficiently high quality then Officers considered they will be able to accept that the benefits outweigh the harm in this instance and accord with policy tests when assessing the plans together.
- 7.11 The scheme is at an emerging stage in respect of the design details of the proposed buildings and the Trust intends to submit the proposals as an Outline planning application upon which maximum and minimum parameters for building height and footprints will be set, alongside a Design and Access Statement and Travel Plans/Transport Assessment. It is expected that this information, and any consent, will be used to inform a design brief and future design competition for the detailed design of both buildings.
- 7.12 These key principles will be grounded in the establishment of buildings that whilst contemporary in design, will have a connection to and a relationship with the historic and more contemporary buildings that are retained on the hospital campus. The adult and children's services building is required to be provide a specific level of floor space to allow it to fulfil all of its functions and this would produce a building of some 13 and 14 storeys in height. As such there would need to be a step change in height between the new building and the adjacent Brotherton Wing building. Therefore Members will be presented with a series of key views indicating how the new building would sit adjacent to the Brotherton Wing, and other nearby buildings including the Civic Hall and taller University buildings to the north.
- 7.13 The main Brotherton building fronting on to Calverley Street, whilst not a Listed Building, has historic and architectural merit. However the buildings to its rear are of a lower quality and a variety of eras, and will as stated above, be demolished. As such it is proposed to create a cut in the retained frontage of Brotherton Wing at its lower levels to create a generous pedestrian focused route into the campus. Behind this building would sit the proposed multi storey car park.

- 7.14 The dimensions of the new multi storey car park would be dictated by the number of spaces required as well as the type of internal car parking layout chosen. The latter is still be considered and as such this building will also be subject to maximum and minimum parameters to address its potential scale. Despite this it is evident that the multi storey car park would need to be taller than the Brotherton Wing. However it is likely that due to the positions of the two buildings, there would be limited views of the new multi storey car park from the street and Millennium Square. This will be demonstrated in the key views to be presented to Members at Plans Panel.
- 7.15 Within the design and access statement the focus will be on promoting a design ethos and a palette of materials that reflect the heritage rich setting, whilst creating high quality contemporary buildings. This approach should then inform the design brief for the architectural competition for the detailed design of the new buildings.
- 7.16 The new building is likely to connect in to the reconfigured Jubilee Wing and would present a new face to the hospital campus to the northern Calverley Street entrance. The creation of this new building will also allow the existing Jubilee entrance to the hospital ground to become solely dedicated to the Accident and Emergency Department allowing this important hospital department to improve its functionality and patient flow.
- 7.17 Do Members support the principle of the demolitions?**
- 7.18 Do Members have any comments regarding the emerging scale, massing and design of the proposals?**
- 7.19 Transportation and Accessibility
- 7.20 To accommodate and serve the changes proposed to hospital services the creation of a significant number of new parking spaces, as well as the consolidation of existing parking, including the removal of some hard to reach spaces, across the hospital estate, is proposed. To create new additional spaces there is a proposal to build a new multi storey car park to be sited behind the Brotherton Wing which will house 450 space. This would result in a total of some 1500 car parking spaces across the hospital grounds and a net increase in parking across the hospital campus of some 410 spaces. In addition an area to the front of the multi storey car park, close to the main entrance to the new adult and children service's building will be set out with 41 drop off spaces.
- 7.21 The adopted Parking Supplementary Planning Document identifies the hospital campus parking areas as core and fringe parking zones. For both types of zone the parking guidelines allow a maximum of 3 car parking spaces for every 2 hospital bed spaces. In addition there is a requirement to provide 6% of the car parking spaces for disabled users and a further 4% of spaces as more accessible bays.
- 7.22 To facilitate the new car park behind the Brotherton Wing a new vehicle access and new main pedestrian routes from Calverley Street are to be created. Vehicle egress from the site would be via Portland Street. The positioning of this new multi storey car park will need to take account of any servicing, bin store access and delivery requirements of the retained Brotherton Wing, of which the use is yet to be defined, with this building being released for future development.
- 7.23 The Trust will need to submit a Transport Assessment to demonstrate the potential impact on the highway network.

7.24 Landscape and Connectivity

- 7.25 The proposed reconfiguration of services and building demolitions would allow the creation of a new public square at the heart of the hospital grounds, as well as a potential pocket park to the western side of the campus, private and semi-private amenity spaces and roof top terraces/gardens. This landscape scheme is an emerging concept and as such details of how these spaces would be laid out are still under discussion. The possibilities of creating significant soft/green landscape features as well as tree planting are being considered as part of this discussion.
- 7.26 In addition, the opportunities to create new, legible routes across the hospital estates both north-south and east-west, within the grounds and through some buildings, are currently being explored. For the east-west route this would lead through the hospital grounds from Calverley Street to the Clarendon Wing area and to the bridge over the Inner Ring Road. The routes north-south would lead from Portland Street and Great George Street through the campus, including through the new healthcare building and out to Calverley Street. The possibility of removing the surface car parking to the south of the campus, outside the Grade I Listed Gilbert Scott designed Infirmary building, allowing this area to be landscaped and further greened could assist in the attractiveness of marketing the adjacent listed building to future developers.
- 7.27 Do Members support the emerging landscape scheme and approach to connectivity?**

**9.0 CONCLUSION**

- 9.1 The key questions asked in the report above are as following:
- 7.17 Do Members support the principle of the demolitions?**
- 7.18 Do Members have any comments regarding the emerging scale, massing and design of the proposals?**
- 7.27 Do Members support the emerging landscape scheme and approach to connectivity?**

**Background Papers: PREAPP/17/00353**

## **PREAPP/17/00700 Appendix - Supporting Information**

### **Purpose**

This briefing note provides a summary of the redevelopment proposals being prepared by the Leeds Teaching Hospitals NHS Trust (“LTHT”) and, in particular:

- the challenges faced by the Trust in response to rapidly changing healthcare demands and new innovative treatments;
- details of the proposed outline planning application which is planned to be submitted by the Trust in December 2018;
- the wider economic and regeneration opportunities for Leeds; and
- the indicative timescales for realising the proposed opportunities.

### **Overview of the Trust’s Proposals**

There has been a hospital in Leeds since 1767 and for around 250 years, hospitals in Leeds have led the way in offering patients the very best treatment and care. Now, the Trust has established a vision for the next generation of hospital services for patients from Leeds and beyond.

The Trust is embarking on an exciting journey that will enable it to meet the rapidly changing nature of healthcare and embrace new and emerging advances in clinical services and medical technologies within world-class buildings. Through its *Hospitals of the Future Programme*, the Trust, which already delivers internationally recognised clinical services, is seeking to develop new state-of-the-art healthcare facilities that will better support individual and personalised care, innovation, technology and research. The Trust’s *Building the Leeds Way Investment Programme* will deliver a new hospital development at the Leeds General Infirmary which shall include a new state of the art hospital building for adult services and a new dedicated purpose-built hospital for children and young people.

### **Leeds Teaching Hospitals NHS Trust**

The Leeds Teaching Hospitals NHS Trust is the single acute healthcare provider for the City of Leeds and is a major employer and an integral part of the City of Leeds, wider Yorkshire and national healthcare community. The Trust employs 17,000 staff and each year provides care for more than 130,000 inpatients across 2,000 beds. Coupled with this the Trust sees more than 100,000 day case patients each year and annually delivers over 1.15m outpatient appointments. Across the Trust’s two A&E Departments, there are over 200,000 ambulance attendances and over 200 air ambulance visits in addition to those who self-present at A&E.

The Trust’s clinical services are delivered at hospitals, across five sites within Leeds and provide the full range of specialist and general clinical services with the exception of heart transplant surgery. The Trust is one of the leading NHS providers of specialist clinical services and is recognised for its expertise in cancer, cardiac care, major

trauma, specialist transplantation and children's services among many others. It has an international reputation for innovation and research, pioneering new treatments and procedures to offer patients some of the most advanced healthcare in the world. However, the condition and inflexibility of the Trust's healthcare estate is a significant challenge in meeting the needs of 21<sup>st</sup> Century healthcare. The estate ranges widely in its age and condition, from modern buildings (for example the Bexley Wing at the Trust's St James University Hospital Site), to the Victorian listed buildings at both the Leeds General Infirmary and St. James University Hospital sites, some dating as far back as 1846.

Over the past few years, driven by a clear clinical strategy, the Trust has begun to reconfigure its estate and the use of facilities such that all clinical inpatient services within each specialty (with the exception of Maternity) are now provided from a single hospital site. This has seen a move away from both of the large acute sites duplicating services to one where each site has a unique, efficient identity with co-located specialties. The Trust's clinical strategy has a number of implications for the current estate, namely:

- increased and remodelled day case capacity is required;
- increased theatre, critical care and complex diagnostics capacity is required to meet the growth in specialist services;
- completion of the consolidation of Leeds Children's Hospital;
- centralisation of maternity/neo-natal services and the creation of a midwife-led unit;
- re-modelling and modernisation of the outpatient model; and
- the renewal of infrastructure to ensure safe services, maintain business continuity and support clinical and technological developments.

Challenges facing the Trust at the Leeds General Infirmary site include:

- some of our oldest buildings do not meet standards for modern healthcare and cannot be used, wasting space and resources;
- addressing backlog maintenance and repairs is estimated to cost in the region of £100 million;
- poor layouts and a lack of flexible spaces mean we can't meet growing demand for specialist clinical services;
- there are insufficient operating theatres to meet increases in the demand for day-case procedures that will significantly improve the care pathway for patients and, where clinically appropriate, enable patients to recover at home rather than in hospital;
- outpatient services are scattered around the site and often in cramped ward areas, contributing to long waiting times;

- the site layout and configuration of clinical services is poor with poor accessibility and clinical services not in defined areas - patients tell us that it is difficult to access the site as well as to find their way around the hospital with potentially long travel distances; and
- the current Children's Hospital in Clarendon Wing and Martin Wing is difficult to find, not in a single location and shares space with adult services, which is not ideal for children and young people or for our teams to work together effectively.

## **Overview of the Investment Programme**

The Trust Board approved an estates strategy in June 2018 which proposes a significant development at the Leeds General Infirmary site as well as smaller investments at the St James University Hospital site.

At the Leeds General Infirmary site, the Trust is proposing to build a new state of the art hospital for adult services and a new dedicated purpose-built hospital for children and young people. These buildings will support:

- the most advanced technologies, equipment and treatments;
- mobile, flexible care tailored to the needs of our patients;
- modern, comfortable surroundings designed to welcome and reassure; and
- innovation and pioneering research.

The new hospital development at the Leeds General Infirmary comprising a new state-of-the-art adult hospital and Children's Hospital will:

- consolidate and centralise inpatient and outpatient services for children in a new and more accessible world-class children's hospital;
- centralise a number of adult services (to include outpatients and therapies; day case surgery; endoscopy) that will permit services to be co-located and centralised improving the patient experience and facilitating a significant release of estate;
- increase and release operating theatre and critical care capacity to meet increasing demand for neurosurgery and cardiac surgery;
- bring together maternity services, currently provided over two separate sites, into a single Maternity Unit where consultant-led services will be directly co-located with midwifery-led services that will include a new midwife led unit (note the Trust's Maternity proposals will remain subject to a formal separate public consultation process); and
- support improvements to Emergency Care and, in particular, plans to develop new Primary Care diagnostics and treatment services as part of a newly established Urgent Treatment Centre.

The development proposals will seek to improve access for patients, staff and visitors as well as supporting the redevelopment of a large City Centre site that will open up communities currently disconnected due to a lack of permeability across the site created by the existing buildings and landscape. The proposals will also see the consolidation of parking at the Leeds General Infirmary site and the creation of a new multi storey car park which will provide for an increase in the number of car parking spaces but within the maximum permitted by the Local Authority's standards.

The Trust's investment plans, which have been prioritised in the West Yorkshire & Harrogate ("WY&H") Health & Care Partnership Estates Strategy, will enable the Trust to operate more efficiently and to meet the anticipated demand from Leeds and West Yorkshire whilst also placing the Trust in the best position to support the region in the development of certain specialist services. The planned investment will:

- remove service duplication through the centralisation of Children's, Maternity and Neonatal Services and support the creation of a mid-wife led unit in Leeds alongside the obstetric services (note the Trust's Maternity proposals remain subject to formal consultation);
- bring together the majority of children's outpatient's services with inpatient services currently and enable the creation of a new Children's surgical day case unit and day case theatre suite.
- centralise Pathology Services to reduce backlog maintenance, service duplication and the overall service footprint whilst being scalable to meet future demand
- support the Trust to comply with national policies, local strategies, Commissioner Mandates, and deliver improved clinical governance through the separation of adult and children's services;
- increase adult and children day case procedures to support the reduction in Length of Stay at hospital;
- provide operating theatre and critical care capacity to meet increasing demand for neurosurgery and cardiac surgery that will ensure that patients within these specialties will be operated on in a timely manner;
- centralise adult ambulatory services on the LGI site;
- increase adult and children day case procedures to support a reduction in the length of stay;
- create modern fit-for-purpose facilities for the delivery of clinical services;
- support clinical and technological advancement;
- release c. 5ha of land for economic regeneration and mixed use developments in Leeds City Centre which could include residential units within the newly emerging Innovation District;

- release over 100,000m<sup>2</sup> of poor quality estate reducing backlog maintenance by c. £100m+ (gross); and
- support the analysis of options for a cost effective solution for the Woodhouse Tunnel and Leeds Inner Ring Road (LIRR) assessed as having user benefits in the region of £2bn.

### **Other Estate Developments**

Whilst the Trust's proposals focus heavily upon the Leeds General Infirmary site, the Trust has also identified planned investments at the St James University Hospital site that shall be brought forwards separate to the proposed Leeds General Infirmary planning application. These redevelopment proposals will include:

- the re-configuration of Pathology Services through the establishment of a newly centralised Pathology facility that will consolidate biochemistry, haematology, immunology, microbiology and cytology services provide STP alignment and flexibility for the future;
- the creation of a new Multi-Specialty Assessment Area ("MSAA") to support the Emergency Department;
- supporting the creation of new enhanced assessment facilities and new primary care diagnostics and treatment services as part of a newly established Urgent Treatment Centre; and
- the phased centralisation/reorganisation of Ophthalmology Services.

Whilst the proposals for the St James University Hospital site are independent of the Leeds General Infirmary redevelopment plans, there are strategic links relating between the plans that, for example, relate to the establishment of new Urgent Treatment Centre hubs. In addition, the Trust's ability to centralise the Leeds General Infirmary and St James University Hospital Pathology Services may impact the future master planning of the Leeds General Infirmary site and ultimately the creation of a new mixed use development focused around a series of Innovation hubs.

### **The Innovation District**

The Trust's new hospital development proposals at the Leeds General Infirmary are part of a much bigger redevelopment and economic regeneration opportunity for Leeds. The Trust's proposals are expected to make available land that will be surplus to future healthcare requirements. Whilst a sustainable development strategy will be established that will see the surplus site as a mixed use development opportunity, it is intended that the land be redefined to have a focus on health and life related sciences/innovations that will connect with the Universities' and City's wider innovation agenda and science partnerships and benefit from being co-located with world-class clinical services.

The Leeds Innovation District represents the strategic intent of the Leeds Teaching Hospital NHS Trust, the University of Leeds, Beckett University and Leeds City Council

to use their knowledge, assets and partnerships as a catalyst to accelerate innovation and economic growth throughout the city. It represents a once in a generation opportunity to develop the northern district of the city centre through a unique masterplan, connecting significant developments by the City's universities, civic improvements by Leeds City Council and the redevelopment of the Leeds General Infirmary.

The Trust, in partnership with the University of Leeds, Leeds Beckett University and the City Council have established a collaborative partnership and a strategic board to lead the development and realisation of the vision for an Innovation District. The vision, established by the strategic board is to create a "*World-class hub for research, innovation and entrepreneurialism in priority sectors that delivers transformational economic growth for Leeds and the City Region.*" The vision is supported by four key strategic goals which can be defined as:

#### Deliver economic growth and social value for Leeds

- Grow our priority sectors, particularly through a focus on health and life sciences, creative and digital, data, engineering, advanced infrastructure and urban services, including new opportunities where different sectors come together
- Demonstrate the social value of applied innovation in health, public realm, and wider public services
- Foster a skills pipeline that connects the people of Leeds to high quality employment opportunities, in line with the Leeds Inclusive Growth Strategy

#### Support the growth of world class institutions

- Drive research and innovation activity and expertise through greater collaboration between industry, researchers, clinicians and public sector leaders to position Leeds as a leading national and international centre for innovation
- Maximise the attractiveness of Leeds to potential students and employees
- Enhance our ability to commercialise knowledge produced by our universities, health system and entrepreneurs

#### Create a vibrant place to live and work

- Improve public realm to create the spaces for collaboration and embed the Innovation District as part of an accessible and connected city that is designed to foster innovation and cross sector working
- Ensure the availability and quality of incubation spaces for innovative start-up/spin out businesses and grow on space for scale up companies to be retained in the city, both within the Innovation District and across Leeds

- Embed smart cities and environmentally sustainable infrastructure to future proof the Innovation District

Demonstrate Leeds capability on a world stage

- Act as a beacon for the wide range of innovation activity across Leeds
- Attract inward investment based on Leeds key capabilities
- Foster international collaborations that support the aims of the Innovation District and those of the organisational partners

### **The Leeds General Infirmary Outline Planning Application**

The Trust's development proposals for the Leeds General Infirmary are currently at a pre-application briefing and engagement stage. Following a period of engagement and communication surrounding the proposals, the Trust is proposing to submit an Outline Planning Application (all matters reserved) based upon a set of Parameter Plans, Design and Access Statement, Travel Plans and Transport Assessment. It is expected that this information, and any consent, will be used to inform a design brief and future design competition; a process that will provide the Trust and the City Council with the best outcomes possible. The Outline Planning Application will provide for a red line boundary that will cover the:

- proposed demolition of buildings;
- construction of the new healthcare facilities; and
- construction of a new multi storey car park and associated access and layout proposals.

### **Wider Area**

The proposals for the wider Leeds General Infirmary site area (which falls outside the scope of the Outline Planning Application) to be repurposed as part of the wider City Plans to establish an Innovation District will form the basis of a separate planning application(s). It is expected that such applications shall be brought forwards by a development partner with the principles of development being based upon the vision for improved site access and permeability and also indicative development clusters across the site.

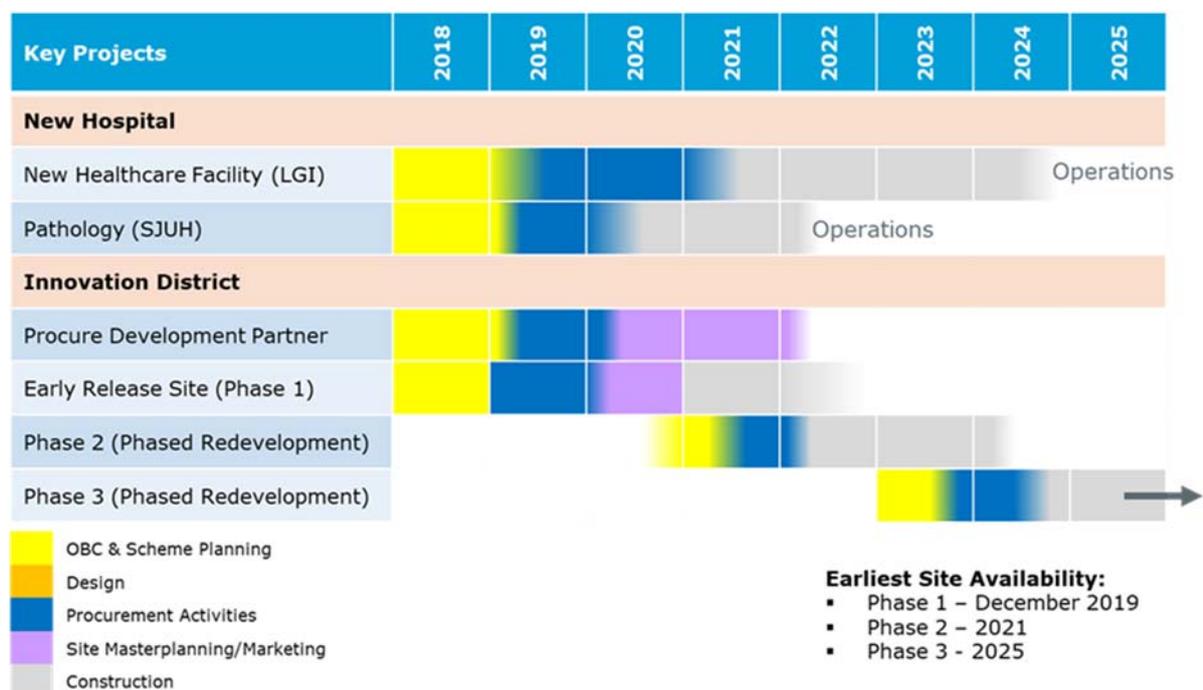
### **Where Are We Now?**

Whilst the Trust's vision is beginning to take shape, there remains a long way to go with critical milestones being the submission of an Outline Business Case in 2019 and achieving a successful resolution to the Trust's Outline Planning Application which is proposed for submission to Leeds City Council's Local Planning Authority in December 2018. The Trust is required to secure Outline Planning Consent prior to its proposals being considered by health regulators.

### **The Programme Ahead**

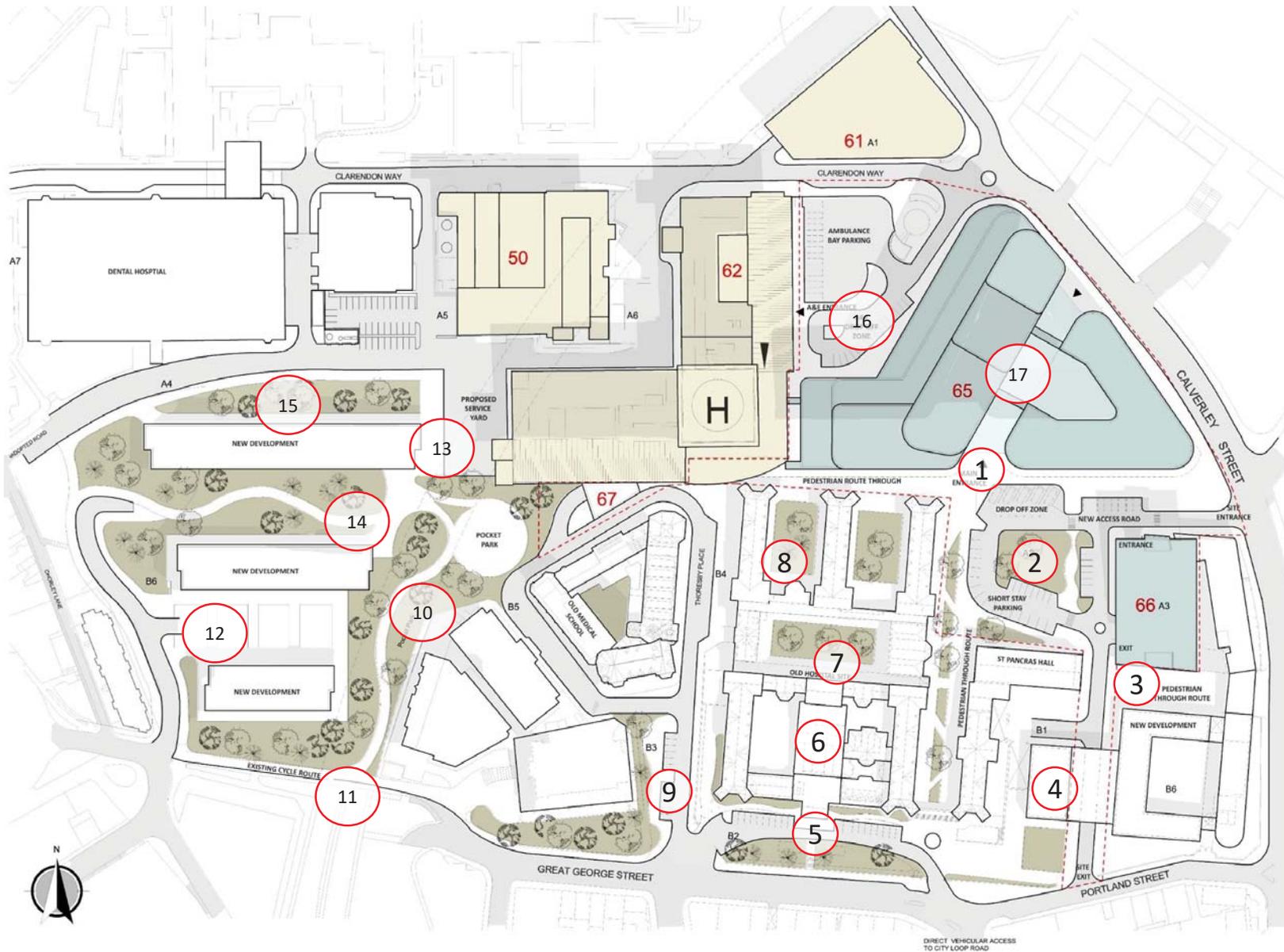
Subject to the Trust securing Outline Planning Consent and approval of its Outline Business Case, the Trust will seek to hold some form of design and build competition for the Leeds General Infirmary redevelopment proposals the detail for which remains the subject of further definition.

Whilst the Trust is continuing to develop its delivery plans, it has prepared an indicative development programme for delivering the two principle investments which will be the new hospital development at the Leeds General Infirmary (the new adult services building and the new world-class children’s hospital) and the new Pathology hub to be located at the St James University Hospital site. The programme also outlines the Trust’s vision and timescales for the redevelopment of the wider Leeds General Infirmary site which is to be repurposed as part of the City’s plans to establish an Innovation District where site areas could, subject to the timing of opportunities to deliver the planned healthcare investments, be brought forwards for redevelopment in phases.

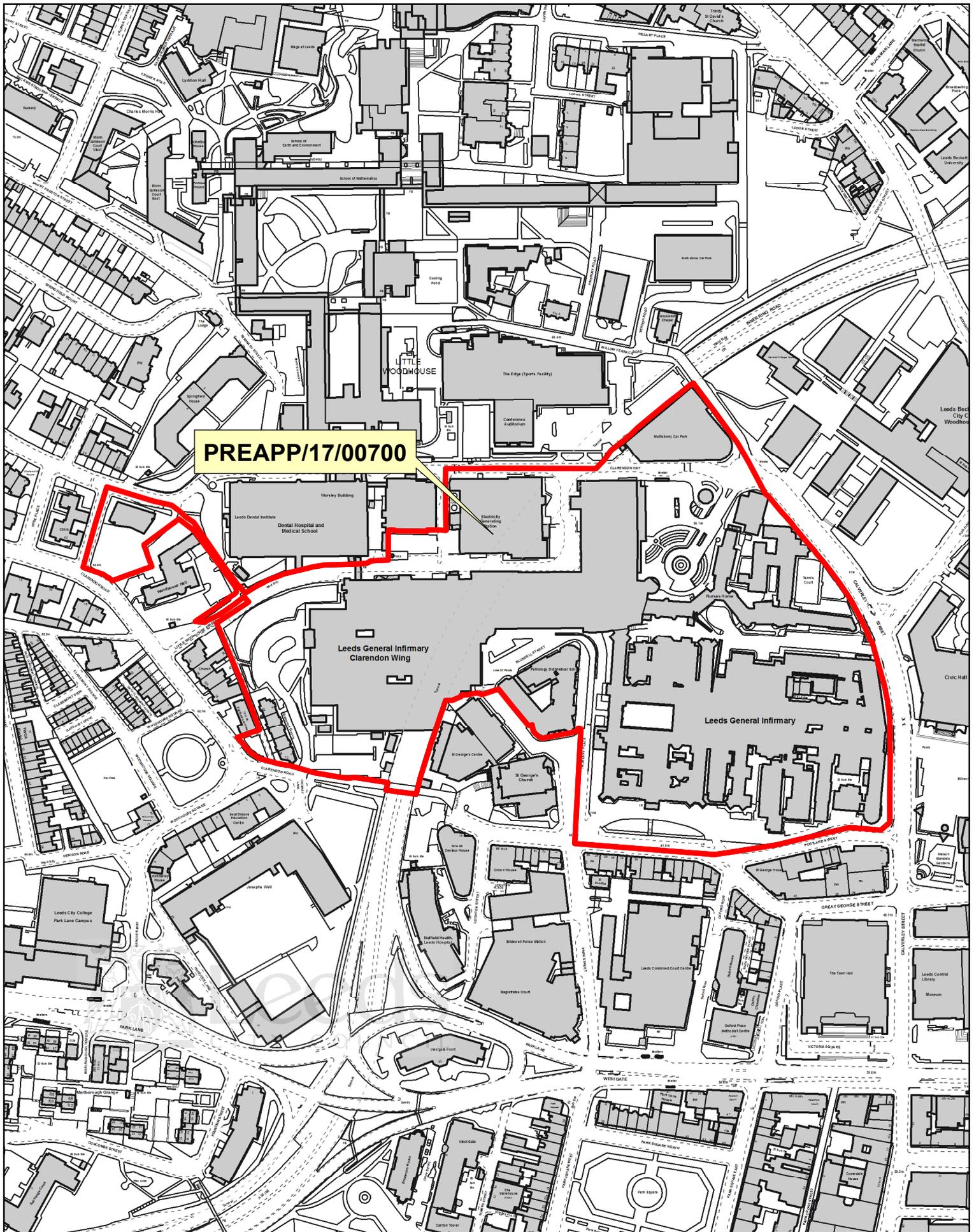


# 3. Proposed Site Layout

## General Site-wide Proposals



1. Entrance into new healthcare building to have varied & interesting hard landscaped frontage, which incorporates casual seating & mingling space.
2. Vehicular drop off area to front to be incorporated into the main landscaping proposals with opportunity to create space to promote public art
3. Newly formed pedestrian opening through the Brotherton Wing creating public access routes through from Millennium Square
4. Incorporating roof terrace / gardens within the new development opportunities
5. Frontage to the existing old hospital site to be renewed to create an entrance space more in keeping with the grade 1 listed building
6. Existing Hospital building to be re-developed space between existing ward wings to provide private / semi private amenity space
7. Secure private amenity space for use by local occupants
8. Semi private amenity space
9. Routes along Thoresby Place to be landscaped & amount of road side parking reduced to create more green open space
10. Area directly above underpass to be designated as an open green space / pocket park. Reinforcing routes through the site
11. Existing cycle path to be opened out & incorporated into the overall landscaping scheme
12. Parking for proposed development to be a mixture of surface level & sub-terrain / Basement parking
13. Future space to extend FM / service provision & space for emergency egress from Jubilee wing
14. Routes through the site to promote links to the East / west axis – connecting the innovation district through to the Universities Worsley building
15. Environmental buffer zone between existing hospital buildings & proposed development site
16. Existing drop off area to be designated as Ambulance / A&E drop off only
17. Proposed Atrium link to have retail / café spaces incorporated into route through



**PREAPP/17/00700**

# CITY PLANS PANEL

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SCALE : 1/3500

