

# Lambeth Draft Revised Local Plan EIP

Main Matter 3: Housing

Main Matter 9: Places and  
Neighbourhoods

Supplementary Statement of Case  
on behalf of Coin Street Community  
Builders (CSCB)

by CarneySweeney

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- 1.1.1 This Supplementary Statement responds to matters raised in Lambeth Council's statement to the Local Plan Examination which was published after the submission of our previous statement.
- 1.1.2 The points made in this statement should be considered in the light of the following context:
- a. CSCB is not a conventional developer of nursing homes. It is a social enterprise whose surpluses must be reinvested for public benefit. More background is in the booklet *Passionate about our Neighbourhood* which was submitted as an appendix to our previous statement. CSCB already owns Gabriel's Wharf, the site for the proposed nursing home, and the adjacent land (Prince's Wharf) which is intended for enabling development. CSCB is therefore in a position to provide the nursing home facility on an affordable basis, whereas many other sites in Lambeth, especially in the north of the borough, are only likely to be viable for private nursing care, funded by high fees (see para 1.1.11 below).
  - b. CSCB is a neighbourhood organisation, delivering facilities and programmes to benefit its immediate catchment area, North Lambeth and North Southwark, although residents and others from outside that area may also use its facilities and services.
  - c. CSCB has already delivered family social housing, and a children's centre and nursery, and also offers many family support and youth services. The aim of the proposed development at Gabriel's Wharf is focussed on older residents of the neighbourhood, who would otherwise be housed in south Lambeth or in other boroughs, away from friends and family.
  - d. CSCB's programmes and services have always been provided on a cross-borough basis. The site of the proposed nursing home is in Lambeth, but only 100m from the borough boundary with Southwark. CSCB's case needs to be considered in a broader context and in the light of the Duty to Cooperate.
  - e. Lambeth Council is well aware of these special considerations relating to CSCB; it has been a key partner with CSCB in many projects and programmes. CSCB is disappointed that the Council's statement does not take account of the matters set out above and in the material we have submitted to the Examination.
- 1.1.3 As part of its evidence to the Examination, CSCB has submitted a report commissioned from Kingsbury Hill Fox which describes the need for a nursing home in the north of the borough, using figures based on ASD (Age Standardised Demand). It should be noted that the facility is unlikely to come into use before 2027-28. CSCB believes it is reasonable to base our assessment of demand on its findings and do not think it is productive to enter into a debate on methodology. Age standardised demand (ASD) is more accurate than most demand projections and has been widely used by Kingsbury Hill Fox for 25 years in many assignments for commissioners and operators, as well as by other consultants and authorities in this field.



1.1.4 The assessment covered, in order of priority, the three wards (one in Lambeth, two in Southwark) which make up CSCB's neighbourhood, the whole of Lambeth and Southwark, and projected demand from across the river. Projected demand by 2027 from the three immediate wards alone would fill the 76 beds proposal and this would meet CSCB's social objectives.

1.1.5 The report also looked at supply, on the basis of available information, and concluded that supply would not meet projected demand. Again, CSCB sees no value in entering a debate on methodology or the conclusions of its report in this respect. It believes that the case for need, in the light of supply and demand is clearly made. It is also further reinforced by a number of additional comments below.

1.1.6 Lambeth's statement on Matter 3 refers to London Plan paragraph 4.13.14 which states:

*Care home accommodation (C2) is an important element of the suite of accommodation options for older Londoners and this should be recognised by boroughs and applicants. To meet the predicted increase in demand for care home beds to 2029, London needs to provide an average of 867 care home beds a year... If the rates of supply and demand remain constant it should be possible to meet potential demand for both care home beds and dementia care home beds.*

In response, CSCB wishes to make the following comments:

- a. This paragraph sets the need for care/nursing home provision in the context of Use Class C2 which covers both care only (residential) homes and nursing homes. What CSCB proposes is a *nursing home*. Most of the comments relating to supply and demand (e.g. role of specialist older peoples' housing in reducing the need for care home spaces, the potential for live-in care, the impact of Covid) apply in greater measure to care-only beds than to nursing homes. The growth in demand for nursing beds will inevitably be stronger. Currently some 48% of beds in care/nursing homes are nursing beds. The factors identified above and in the Council's statements will predominantly reduce demand for the 52% that are in care only homes, not the 48% in nursing homes.
- b. A significant proportion of the growth in care/nursing home bed spaces rated good or outstanding arises from those rated lower being upgraded, not from additional provision. The Evidence document EB111 quoted at para 6(d) below suggests that this accounts for 1/3 of the increase in supply of good or outstanding care/nursing home beds.
- c. The conclusion is subject to the general and very significant caveat 'If the rates of supply and demand remain constant...' In terms of supply, particularly for beds available to those who are Council-funded, this is a matter of considerable doubt, as indicated in paras 1.1.10 - 1.1.12 below.
- d. The 'GLA Older Persons Housing Needs Assessment Report 2017' (EB111), submitted as evidence to the Examination, contains the statement (para 4.4 p13) that:



*There were an additional 9,180 care home beds which were inadequate or required improvement (27% of the stock). **This would suggest that London currently has numerically enough care home beds but there are insufficient good quality beds and this shortage is particularly acute for dementia patients.*** (emphasis from original)

1.1.7 CSCB has the following comments on para 3.7 of Lambeth's Statement to Matter 3:

- a. The first bullet point states that the Kingsbury Fox Hill report '*only makes reference to one ward in Lambeth (Bishops) with the majority of the data relating to two wards in neighbouring Southwark and The City of London and two wards in Westminster*'. This is not accurate. Pages 17-19 of the report assess demand for care home beds in the whole of Lambeth, and this assessment is included in the overall demand assessment.
- b. The second bullet point states that there is no assessment of the impacts of other measures or strategic priorities in the four boroughs covered. This is not the case – see, for example, p21 of the report. However, the advice received by CSCB is that the factors referenced here by the Council apply much less to the demand for nursing beds, than for care only beds.
- c. The third bullet states '*Later in the report there is reference to what is already available in the various boroughs*'. In fact, the report contains an extremely comprehensive list of what is available, noting a particular concentration of care beds in smaller homes in the far south of Lambeth. It may omit one or two facilities which CSCB's consultant was not aware of. However, it does not make any allowance for the likelihood that care home beds will be lost for economic reasons in the plan period, including the time elapsed before CSCB can undertake its Gabriel's Wharf development. (See paragraphs 1.1.10 - 1.1.12 below).

1.1.8 The Council also refers to the Care Home Commissioning Report by the Associate Director, Integrated Commissioning, (LBL and NHS SE London CCG), Document EB112a. This concludes:

*'Lambeth commissioners are confident that it has more than adequate nursing and residential home provision to meet the needs of its population and therefore would not be supportive of any new care home development in the borough'.*

CSCB's comments are as follows:

- a. The figures on which this conclusion is based do not distinguish between care beds and nursing beds, and therefore do not take account of the differential impact of the measures supporting independent living set out at bullet points 1,2 and 3 in the document, or of the impact of Covid, in bullet point 7. CSCB fully accepts that these factors may affect demand for care only beds; it is a matter of doubt whether the pandemic will lessen the demand for full nursing care amongst those who absolutely need this level of care.



- b. The figures do not take account of the high risk of closures - see paras 1.1.10 - 1.1.12 below.
- c. Bullet points 4 and 5 relate to CCG funding considerations, which are accepted to be important and problematic. However, they should not influence consideration of the need for nursing bed places which in Central London will inevitably have some cross-borough role to play, and in CSCB's case reflect a settled policy of operating on a cross-borough basis.
- d. Bullet point 5 refers to Southwark and the priority set by Southwark Council to open two new nursing homes, which remains a commitment in Southwark's Council Plan 2020 Refresh. In a recent meeting with relevant senior Southwark officers it was clarified that the second of these homes is still subject to discussion with the potential provider and that, even including both new homes, Southwark will still have a significant shortfall, especially for working age adults with severe needs and for older persons with dementia, two areas for which CSCB is keen to cater.
- e. Southwark colleagues referred us to a Southwark Cabinet Report (April 2019)

<http://moderngov.southwark.gov.uk/documents/g6089/Public%20reports%20pack%20Tuesday%2030-Apr-2019%2016.00%20Cabinet.pdf?T=10>

This document (pages 81-101 at the link above) relates to the procurement of the new nursing homes in Southwark. We quote passages from the report at some length below because:

- i) they are so relevant to the demand and context for the CSCB proposal
- ii) they reinforce many of the points made in the Kingsbury Hill Fox report

(from the Cabinet Member's Foreword on p81)

*The recent Association of Directors of Adult Social Services (ADASS) Peer Review in Southwark was positive and the opening of two new nursing homes was on the list of things that we were praised for, not least because many other local authorities have seen their local nursing homes close down.*

*Currently 70% of Southwark people requiring nursing beds are placed out of borough. In 2017/18, 80% of people that we placed out of borough would prefer to be in Southwark, but in the absence of high quality local services this was simply not an option. Due to fluctuating quality in the borough, the number of nursing homes in the borough has reduced to two; and one of these homes is blocked booked by the London Borough of Lambeth. (CSCB note: we understand Southwark is now establishing a block contract in the home that the Cabinet Member refers to but the numbers are such that Lambeth remain the majority purchaser).*



*There are currently 212 nursing care beds available in the Borough (i.e. Southwark). Planning permission has been granted to the development of a care home that will include 48 nursing beds. This means that the total...will increase to 260 by 2020. There is a second nursing home that has outline planning permission for 80 nursing care beds and therefore the total could increase to 340 by 2022. (Note: one of these is still under construction and the second is still under discussion with a potential provider).*

Para 11 e)

*The local market has not been able to respond to the requirements of Southwark citizens and has seen the closure of a number of homes (See paragraph 13) generally the demand for affordable nursing beds across central London outstrips supply, with different Councils and CCGs competing for the beds that are available.*

Para 11 g)

*Due to local circumstances, neighbouring boroughs are not able to commit to developing cross-borough joint commissioning arrangements; in part because they too wish to procure beds in borough for their local residents, for the same reasons as the Council.*

Further issues raised in the Report (paras 14-16) relate to

- Reasons cited by providers for the decline in nursing home beds in Inner London are the higher land prices, workforce challenges, a younger population, and relatively few self-funders and lower levels of owner occupation compared to outer London areas. Southwark homes are far more reliant upon state funded placements where the costs have been tightly managed as a result of ongoing austerity measures.
- Fluctuations in the care ratings over recent years between 'Good' and 'Requires improvement'.
- Many of the smaller care-only homes are not large enough to provide nursing facilities on site and would not wish to deliver nursing care.

1.1.9 Neither the Lambeth Statement nor Document EB112a directly refer to the demand for step-down nursing beds from Guy's and St Thomas's NHS Foundation Trust (GSTT). CSCB has closely consulted GSTT over the seven years it has been developing this proposal and recent discussions have served to re-emphasise this source of demand. Although such places may not in all cases be taken up by Lambeth residents, a considerable proportion of GSTT patients are from Lambeth and Southwark. New bed spaces which improve the situation in this critical part of the overall health offer in this part of London are a significant factor.



- 1.1.10 Neither the Lambeth Statement nor Document EB112a address the caveat in the London Plan that assessments of the need for care places are subject to rates of supply and demand remaining constant. The Kingsbury Hill Fox report is very clear about the increase in demand, and that demand for *nursing bed spaces* will be affected much less by policies seeking alternatives to care home accommodation than *care only provision*. On the supply side, there is strong evidence of considerable uncertainty, well expressed in the Third Report of Session 2019–21 of the House of Commons Health and Social Care Committee on Social care: funding and workforce. Published October 2020 and available at:

<https://committees.parliament.uk/publications/3120/documents/29193/default/>

- 1.1.11 The following extracts are particularly relevant:

*Para 28. Social care is delivered by thousands of mainly private companies. Local authorities have been trying to limit how much they pay for services, but providers have been adversely affected by increasing costs, especially for staff as a result of the minimum wage. The result is an increasingly unstable market with growing numbers of providers going out of business or handing back contracts. In addition, some providers are focusing on services for people who fund their own care, and who will pay more. Care providers closing, or closing to local authority residents, has a direct impact on those needing care, reducing choice, and in the most extreme cases forcing service users to move to a different care home. ADASS (Association of Directors of Adult Social Services) describes this impact:*

*We have seen in the last year some 5,000 people affected by hand-backs of contracts to local authorities as a result of providers ceasing to trade. We estimate that currently perhaps a third of all providers are making a loss, and that might rise.*

**Para 32. It is clear from the evidence we have heard that funding shortfalls are having a serious negative impact on the lives of those who use the social care system, as well impacting the pay levels of the workforce and threatening the sustainability of the care market. An immediate funding increase is needed to avoid the risk of market collapse caused by providers withdrawing from offering services to council-funded clients and focusing exclusively on the self-pay market.** (bold in original).

Private sector operators do not currently develop new care/nursing homes exclusively for local authority funded residents – such a home would not be economically viable at the fees councils pay. Voluntary sector operators can do so only if they have the resources to subsidise the care home, which few have, even on less valuable sites than Gabriel's Wharf.

- 1.1.12 These comments raise two further issues, not addressed in any of the responses to CSCB's representations, but a key feature of CSCB's focus, arising from CSCB's ethos and objectives. The first relates to staffing issues. CSCB recognises that there are likely to be continuing





difficulties in this area but its non-profit status, the fact that it owns the land for its proposed nursing home, and is planning enabling development to support capital and revenue, makes it extremely well placed to attract the staff necessary to achieve the quality for which it aims. Further, the threat referenced above, that growth in the nursing home market is likely for economic reasons to be focussed on the self-pay market, may well lead to a polarisation of the market, with an ever widening gap in standards and quality between Council-funded and self-funded places. CSCB, as a social enterprise, already owning the site, with the opportunity for enabling development alongside, has a rare opportunity to bridge this gap.

- 1.1.13 In CSCB's view, the evidence produced by the Council suggesting that there is no demand for the nursing places does not adequately take into account the particular needs that CSCB is highlighting and for which it is seeking to provide.
- 1.1.14 CSCB also wishes to refer to that part of the Council's initial response to the Inspector on Matter 3, but which also affects Matter 9 (LBL-01, dated 6 August 2020) concluding that '*The Council's emerging Site Allocations DPD provides a further opportunity to consider potential for provision of older persons' housing on a site specific basis*'; and the Council's Statement of 9 October 2020, para 3.7:

*The Council has made clear throughout the preparation of the Local Plan review (including in discussions with CSCB) that existing site allocations will be reviewed through the forthcoming Site Allocations DPD (SADPD). In the view of the Council, any consideration of this evidence during the examination of the revised Local Plan should be in the context of policy on older people's housing at a borough-wide level and not in relation to site-specific proposals (which can take place through the examination of the SADPD).*

Since the site of the proposed nursing home and its enabling development are part of existing Site Allocation 9 which forms part of Policy PN1, we must assume it may be the subject of discussion in the Examination under Matter 9. CSCB therefore wishes to register the following additional points:

- a. the Inspector may consider amending the existing Site 9 as a result of the Examination. The splitting of the former ITV Site and CSCB'S Prince's Wharf/Gabriel's Wharf site, which has been proposed by the Council, would only be acceptable to CSCB if:
  - i) all parts of development across the whole of the existing Site 9 will result in a complementary and compatible wider development with placemaking at its heart.
  - ii) any proposals also work to bring forward the public realm improvements in the area of the boundary of the two sites, as set out by CSCB in their representations, especially a generous new route from Upper Ground to the Riverside Walkway.





- iii) the area which is the site of the consented Queen's Walk Gardens scheme continues to be included in any revised allocation. The relationship between the former ITV site and the riverside is an extremely important one, which was particularly highlighted by the GLA as an issue when it considered the previous proposals there.
  - iv) there is positive recognition of the acceptability of a nursing home on the Gabriel's Wharf site and enabling development on the adjacent Princes Wharf site.
  - v) the redevelopment of the former ITV site does not prejudice the future development of CSCB's adjacent land.
- b. CSCB would therefore be concerned if the former ITV element of the allocation were to be dealt with by the Inspector under Matter 9, and the CSCB element deferred to future discussion as part of the Site Allocations DPD process.
- c. In summary, therefore and as set out in our Statement of Case (paras 1.1.2, 2.1.5 and 2.1.6) CSCB's view is that it is essential that:
- i) the future site allocation(s) ensure that all parts of development across the whole of the existing Site 9 will result in a complementary and compatible wider development with placemaking at its heart.
  - ii) Policy H8 acknowledges the local need for nursing and identifies Site 9 to meet that unmet need.

