

THE CASE FOR A NEW HOSPITAL IN KING'S LYNN

Why do we need a new hospital in King's Lynn?

The Queen Elizabeth Hospital was opened in 1980. It had been built, along with the James Paget in Gorleston and West Suffolk in Bury, as a "best by" hospital. It was meant to last 30 years but has now been standing for 40. Both the James Paget and West Suffolk have been awarded funding for a new hospital. But ours has not. WHY?

The hospital's risk register, which was reviewed by its governing board on March 2, states: "There is a direct risk to life and safety of patients, visitors and staff due to the potential of catastrophic failure of the roof structure due to structural deficiencies."

A trust employee who remained anonymous, claimed that the situation there was like a "Grenfell" waiting to happen.

WHAT YOU CAN DO

Sign the EDP petition
<https://www.change.org/p/matthew-hancock-mp-build-a-new-hospital-for-king-s-lynn>

CONTACT YOUR MP

Send an email or a letter demanding that they lobby the government for a fully funded maintenance programme and a new build hospital.

North West Norfolk: James Wild -
james.wild.mp@parliament.uk

South West Norfolk: Liz Truss -
elizabeth.truss.mp@parliament.uk

North East Cambs: Steve Barclay -
stephen.barclay.mp@parliament.uk

South Holland and the Deepings: Sir John Hayes -
davieshm@parliament.uk

CONTACT YOUR LOCAL TRADES COUNCIL

Ask us if you need help emailing or sending a letter, or to find out more about this campaign.

kingslynnanddistricttradescouncil@hotmail.co.uk

MPs must be held accountable for their failure to get the funding we need for a new hospital and funding to maintain the current one.



SAVE THE QEH

The QEH is a 515 bed general hospital in King's Lynn. It provides healthcare services to West and North Norfolk, parts of Breckland, North

Cambridgeshire and South Lincolnshire. It covers approx. 1500 km². The local population of this area is approximately 331,000, but is set to expand dramatically. Many of the residents are older; however, new housing developments have seen a population growth in young families. We desperately need to retain a fully functioning general hospital here.

When the QEH was built, Reinforced Autoclaved Aerated Concrete (RAAC) planks were used. These are much weaker than traditional concrete and crack, leak, cannot bear weight and have a life span of just 30 years

The hospital management has had to move patients and close wards. The Critical Care Unit was closed with just 30 minutes notice. Patients who weigh over 40 stone can't be cared for on some wards and their visitors have to visit 1 at a time due to concerns over the weakness of the concrete. Hospitals get paid money each time they do a planned operation. If they can't do the operations, then they won't get the amount of funding they need. So our hospital is at risk of losing funding if it can't do the necessary number of procedures.

If doctors can't do the same number of operations then they risk losing their clinical expertise, basically it means they'll lose their skills. Trained health professionals spend a lot of time becoming good at their job, they can't risk losing their skills, so to avoid that happening, they'll simply leave the QEH and go and work elsewhere. The hospital will then find it harder to offer the same services - operations, as they do at the moment if they can't get the staff to do the work. With a building that's falling down, wards closed and staff leaving it'll become harder and harder to get staff to work at our local hospital. Then the hospital will find it harder and harder to get the funding that it needs. It becomes a vicious circle, shrinking because of one reason and then because of another.



Our hospital must be fully funded to repair the damage that has already happened, and it must be fully funded for a new hospital. We must not be faced with a dilemma of choosing one or the other, we need both.

It will take up to 10 years to build a new hospital, including the planning. Meanwhile staff must work in the old hospital, and patients continue to be treated there EVEN THOUGH IT IS NOT SAFE.

In February 2020 the QEH developed a proposal for a £250 million capital investment that incorporated a mix of new build, refurbishment and redevelopment of existing accommodation. But the Government refused. Previously the QEH was given a loan for repair work - a loan that has to be repaid. Conservative austerity has led to our hospital falling down.

The roof of the hospital is unsafe because the RAAC planks that were used to build it have cracked, are weak and cannot bear weight. In several wards acroprops are already being used. It is increasingly likely that collapse of part of the roof might occur, causing a huge disruption at best but possibly loss of life.

