2020 Vision at Addenbrooke’s
In 1999 Addenbrooke’s NHS Trust first set out its vision for the future of the Addenbrooke’s Hospital site – a vision for the transformation of the site into the Cambridge Biomedical Campus.

The University of Cambridge and the Medical Research Council, our most important partners on the campus, joined us in developing these proposals. Our vision was ambitious and looked to a future in which the campus became an international centre of excellence. We described how this would support the growth of scientific understanding; the discovery of new medical techniques; the education of healthcare staff; economic growth and improved access to modernised NHS services.

In June 2001 we published an update, reflecting a more detailed understanding of the likely scale and phasing of developments. At this stage we also re-stated the strategic case for our vision, setting out the need for expansion, the opportunities for the campus and the scope for sustainable development.
Now it is time to publish a further update to our proposals. The strategic case for the 2020 Vision has become widely accepted and is supported by the Cambridgeshire and Peterborough Structure Plan. In this update we shift the emphasis from **strategy** to **implementation**. We also place our proposals in the wider context of developments on the southern fringe of Cambridge, where the 2020 Vision is only part of a bigger picture of integrated planning for sustainable development.

We are publishing this update at the current time because we wish to ensure that those involved in finalising local plans continue to be fully informed about our strategic vision, progress to date and plans for implementation. This is also an important time for the hospital as we establish ourselves as a new organisation, **Cambridge University Hospitals NHS Foundation Trust**. The greater freedoms available to NHS Foundation Trusts will help us make The 2020 Vision a reality. Our new identity reflects our commitment to the ultimate goal of the vision: outstanding excellence in health care, education and research – for public benefit.

**Dr Mary Archer**  
Chairman

**Malcolm Stamp**  
Chief Executive
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A unique partnership

Cambridge University Hospitals NHS Foundation Trust

The new Cambridge University Hospitals NHS Foundation Trust will be one of the UK's top academic clinical centres, with an income approaching £300 million per annum, 1,100 beds and 6,000 staff. Services are provided from Addenbrooke's Hospital, the Rosie Hospital and through outreach to community and neighbouring hospitals.

The purposes of the Trust are to provide:

• accessible high quality healthcare for local people
• specialist services for the people of the East of England and beyond
• support for the education and training of clinical professionals and a workplace where all staff have access to learning and personal development
• support for research and development generating new knowledge leading to improvements in population health and in healthcare delivery; and
• a contribution to economic growth, sustainable communities and a good quality of life for those we serve.

These purposes are reflected in the vision statement for the Trust:

Cambridge University Hospitals NHS Foundation Trust will be an academic clinical centre of international stature; contributing to the health and wellbeing of the communities we serve through the provision of care; the generation of new knowledge; and the education of healthcare staff.

Addenbrooke's Hospital has consistently achieved high performance ratings, a fact now reflected in its status as a first-wave NHS Foundation Trust. We aim to use the greater freedoms that go with this to strengthen local partnerships and further improve the quality of services for patients.

The University of Cambridge

The University of Cambridge is one of the world's premier universities and is top-ranked in the UK for research. The School of Clinical Medicine is located on the Addenbrooke's campus, and is responsible for the clinical stages of undergraduate medical education with a target intake of 130 students annually. The scale of the Clinical School's research programme has also grown dramatically over the past decade and funding now amounts to over £40m each year. Top ratings were awarded in all units of assessment in the 2001 Research Assessment Exercise. The School is also responsible for a number of other research institutions located on the campus.

The Medical Research Council

The Medical Research Council (MRC) is a national organisation that encourages and supports research into all areas of medical science with aims of improving the health and quality of life of the UK public and contributing to the wealth of the nation. At Addenbrooke's, this involves direct support to five MRC units on the campus including the world-famous Laboratory of Molecular Biology (LMB). It also involves grant support to researchers in the hospital and university. The Addenbrooke's campus is the most highly funded of MRC-supported research sites, receiving 18% of all MRC funds awarded through competition. In July 2003 the MRC confirmed its proposals to build a new LMB on the extended Addenbrooke's campus, replacing the current outmoded facilities, which date from the 1960s. Together with other planned investment on the campus in the new MRC Epidemiology Unit, these proposals are of national importance.
The strategic case

The strategic case for the Cambridge Biomedical Campus was set out in detail in our 2001 update and has now been widely accepted. Here we repeat the arguments in summary form.

**Need**

Addenbrooke’s is both the local hospital for Cambridge and the surrounding area and a provider of specialised services to the Eastern Region and beyond. The hospital needs to grow to meet increasing demand for both local and regional services.

- **A growing population.** The structure plan confirms that there will be major housing growth in the Cambridge sub-region – 47,500 extra households or over 100,000 extra people over the period to 2016.
- **An ageing population.** With the proportion of the population over 45 years of age increasing, placing more demand upon hospital services.
- **Reducing waiting lists.** By 2008, it is promised that nobody will have to wait more than three months for an operation. The NHS is on track to meet these targets.
- **Higher expectations.** Patients rightly expect hospital buildings to be of a higher standard than in the past. Many of the buildings on the existing hospital campus are now over 40 years old and will need to be refurbished, adapted and extended in the near future. Modernisation of wards, clinics and operating theatres will often require further expansion of the hospital to meet current standards.
- **Centralisation of specialised services.** These include services for patients with rare diseases and those requiring special expertise. Examples include rare cancers, neurosurgery, medical genetics and transplantation surgery. Guidance on quality and safety has led to a centralisation of many of these services at specialist centres.
- **Cardiothoracic services.** Papworth Hospital provides specialist heart and lung services to a population of approximately three million people in the East of England. For certain sub-specialties and for heart and lung transplantation Papworth receives referrals from throughout the UK. Although Papworth currently provides excellent services, it is considered that in the long-term interest of patient care, research and education in its specialist areas of medicine the preferred strategy for the Trust is a move to the Cambridge Biomedical Campus.

Progress in developing additional hospital facilities to meet these demands must be timely if healthcare provision is not to lag behind other aspects of growth. The hospital will look to the local development planning process to facilitate this progress.
Opportunity

The Addenbrooke’s Hills Road site presents an exceptional opportunity to develop a centre of excellence in clinical treatment, education and research that would be unmatched in the UK.

- Addenbrooke’s Hospital provides a **centre of research excellence** together with a complete **clinical infrastructure**. The scale of hospital-related medical research has grown dramatically over the past decade and there has been significant research investment in the recent past.

- High quality **clinical service provision** covering both general and specialist services.

- **Cambridge** is the UK’s leading biotechnology centre and the Cambridge brand has international reach.

- The Hills Road campus is **not physically constrained**, with open farmland on two sides. It is also capable of supporting improved transport links and, in particular, improved access by public transport.

- The campus is a **magnet for research investment** from private, public and charitable sectors, seeking a presence in Cambridge and the **benefits of co-location** with the hospital and the existing research establishments on the campus. The level of investment in recent years has generated a **critical mass** that will add to the reputation, of the campus, drawing in new investment.
Sustainability

Healthcare facilities are part of social infrastructure and their provision is necessary for sustainable development. Current capacity shortfalls in the local NHS are part of a wider infrastructure deficit in the Cambridge sub-region. At the same time, the Addenbrooke’s campus places significant demands upon local infrastructure and must be developed in a sustainable way.

Access and travel

- Achievements in managing traffic generation have been recognised nationally and the hospital has received an award for successful implementation of its Travel Plan. Over the past decade the proportion of staff travelling to work as the sole occupant of a car has fallen from 74% to 34%.

- The Trust promotes bus travel in partnership with the county council and has recently converted a car park to a new bus station, served by nearly sixty buses an hour at peak periods.

- Car parking is tightly managed using a smart card system. In this way the Trust can allocate parking space to those staff who need to use their cars to travel to work and limit the number of spaces available to staff who have alternative travel modes available to them.

- Car sharing is promoted by the Trust, with a dedicated car park for car sharers.

- Cycling and walking have been supported by the Trust in a number of ways. Around 1,500 staff now cycle to work.

- Travel bureau – In 1991 the Trust established the Access to Addenbrooke’s Travel Bureau. This department with four full-time staff, manages the on-site car parks and provides advice to staff and patient/visitors concerning travel options.

- Further public transport improvements are planned, including a link to the Cambridge Guided Bus System. The Trust has plans to re-arrange the main entrance area of the hospital to allow the guided buses to drive through the centre of the campus to improve access. Other proposals include increasing the frequency of regular service buses as well as developing improved service links to existing and future Park and Ride sites.

- As the campus develops, it is planned that the existing restaurant/retail facilities provided will also be expanded to meet the needs of the additional staff and visitors. This will reduce the need for travel off the campus to make purchases from neighbouring shops for day-to-day requirements.

- Where it is more convenient for patients, clinically safe and cost-effective, the Trust is committed to moving activities away from the Addenbrooke’s campus. This can be achieved by a variety of means including development of satellite facilities and clinics in other hospitals, encouraging family doctors to take on more specialist roles and developing alternatives to hospital care for some groups of patients.
Major research institutes in and around the Addenbrooke's campus

1. **The Wolfson Brain Imaging Centre** incorporates state-of-the-art medical imaging within the Neurosciences Critical Care Unit, enabling seriously patients with serious brain injury or disease to benefit from the most advanced imaging techniques available.

2. **The MRC Laboratory of Molecular Biology** is one of the world’s leading biomedical laboratories, with strengths in structural biology, cell biology and neurobiology, and strong groups in immunology, cancer biology and biotechnology.

3. **The Wellcome Trust/MRC Building** houses the **Cambridge Institute for Medical Research (CIMR)** and the **MRC Dunn Human Nutrition Unit** which together employ over 400 laboratory researchers. The Cambridge Institute for Medical Research has core funding from the Wellcome Trust and has a major interest in molecular mechanisms of disease.

4. **The MRC Centre for Protein Engineering** is working on protein structure and folding, including molecules related to cancer.

5. **The Regional Blood Transfusion Centre**, which includes a facility for large-scale production of DNA plasmids and proteins to standards for therapeutic use in clinical trials.

6. **The Addenbrooke’s Centre for Clinical Investigation** (opened in June 1999 as a result of investment by Glaxo SmithKline plc), which provides dedicated facilities for outpatient and short-term inpatient clinical investigation. There are particular interests in metabolic, endocrine and cardiovascular studies and the building houses new academic **Clinical Pharmacology** and **Cardiovascular Units**.
Clinical Research Centre (ACRC) incorporating the Wellcome Trust Clinical Research Facility and the Clinical Investigation Ward provides both inpatient and outpatient clinical research facilities available to all clinical investigators based at Addenbrooke’s Hospital.

(Not shown on the photograph) The new Centre for Genetic Epidemiology at the Strangeways Laboratory, 300 yards from the Addenbrooke’s campus, which is focused on the use of molecular genetics to examine gene-environment interactions in cancer, with the eventual aim of prevention. This is closely integrated with the Institute of Public Health, which accommodates the MRC Biostatistics Unit and the University Department of Public Health and Primary Care. Together with the regionally based structures of the Oncology Department and the high quality Eastern Cancer Registration and Information Centre (ECRIC), this provides an arguably unique resource for population-based cancer research.

The Hutchison/MRC Research Centre houses the MRC Cancer Cell Unit and staff of the Cancer Research UK Department of Oncology. Research themes include DNA replication, DNA repair and stem cell biology. There is a strong emphasis on translational research, including applied research in molecular characterisation of tumours, supported by high-throughput genomic expression analyses and the use of novel DNA replication markers for cancer screening and prognosis.

The Cambridge/Hutchison/Cancer Research UK Centre (under construction and planned to open in 2005) will house some 300-450 scientists, the majority funded by Cancer Research UK. The major research objective will be the linking of basic cancer biology to clinical practice and cancer prevention.
Strategies to provide alternative and more local locations to the Addenbrooke's Hills Road site for the delivery of care

Re-location of activities at other sites
• Redirection of planned surgery to diagnostic and treatment centres at Hinchingbrooke Hospital and West Suffolk Hospital where this is consistent with patient choice and supported by GPs.
• Increased utilisation of day surgery facilities at Princess of Wales Hospital, Ely.
• Long-stay medical beds at Princess of Wales and Ida Darwin Hospitals.
• Satellite dialysis facility at King's Lynn and Bury St Edmunds.
• Relocation of cytology services to Newmarket in partnership with West Suffolk Hospitals Trust.

Clinical networks
• In this model, Addenbrooke's provides various specialist services, with local hospitals referring less common conditions to a specialist – giving better outcomes. Patients are referred back to their local hospital as soon as possible to complete their recovery. Hospitals also collaborate through shared staffing, information and protocols. This model is well developed in a number of services, including cancer and diabetes.

Outreach clinics
• Addenbrooke's consultants hold clinics in local hospitals. These are held in a total of 14 different locations across the region.

Joint appointments
• Over 100 of Addenbrooke's consultant medical staff hold some form of joint appointment with a dozen neighbouring hospitals. In some specialties clinical departments are integrated between Addenbrooke's and other hospitals, with patients managed across locations to a common protocol.

Transferring work to GP surgeries
• Use of ‘GPs with a Specialist Interest’ to allow more specialist consultations within GP surgeries: this model has been adopted in a growing number of specialties, including dermatology, ENT and gynaecology, successfully diverting work away from a hospital setting.

Process changes to reduce activity at Addenbrooke's Hills Road site
• Re-design of clinic processes can lead to reductions in the number of return visits required. This approach has been successfully adopted in a number of service areas.
• Installation of a Picture Archiving and Communication system (PACS) which allows for digital X ray and CT images to be transmitted between hospitals. This means that patients do not have to be transferred to Addenbrooke’s for urgent diagnosis and treatments.
The environment
• The Trust is anxious to enhance the environmental quality of the existing hospital campus and has a strategy for improving the quality of the existing environment and landscaping. This has been developed in the context of the whole-campus masterplan and the wider Southern Fringe.
• The Trust also recognises its wider impact on the environment through its waste, water and energy management policies and is working to improve its practices in these areas.

Staff housing
• The Trust has over 800 residential units on the campus for student nurses and for staff who need to live very close to the hospital for operational reasons. We are planning the construction of further on-site housing to meet new standards and additional demand as the clinical workforce grows in the future.
• The Trust is engaged in a variety of initiatives that support staff in finding suitable and affordable housing off-site. The scope of these initiatives will grow in the future and the Trust will look to secure allocations of key worker housing in residential developments on the south of Cambridge.

Impact on the sub-regional economy
• The Trust has a major impact on the sub-regional economy through its employment of staff, its training and educational activities and its procurement of goods and services. As a newly established Public Benefit Corporation, we wish to develop a greater understanding of our impact in these areas and how we can become a better ‘corporate citizen’.
• The Trust and the University also want to see innovations in health care and new discoveries from research taken forward for commercial development where this is possible. A new organisation, Cambridge Enterprise at Addenbrooke’s, has recently been established to provide expert advice in this area. The Trust has also been a key partner in a successful bid to establish a HealthCare Enterprise Hub in the eastern region, to be known as Health Enterprise East. This will provide further resources for technology transfer, and improve links between the NHS and local companies.
The planning framework

The Cambridgeshire and Peterborough Joint Structure Plan
Finalised in October 2003, the joint structure plan includes policies supporting the 2020 Vision and recommending that land in the south of the City be released from the Green Belt and brought forward for early development. This development is to include the 2020 Vision proposals, additional housing allocations, community facilities and the provision of adequate transport and social infrastructure. The plan promotes the Addenbrooke’s campus as a strategic employment location and gives a commitment to invest in the success of world-class biotechnology clusters, such as the Addenbrooke’s campus.

‘Cambridge is a compact and dynamic city which will grow in importance as a regional centre for a range of services, including healthcare, and continue to develop as a centre of excellence and world leader in research and education.’
Draft Cambridge City Local Plan
The first deposit draft of the city local plan was published in June 2003. The Plan’s vision for Cambridge is of a compact and dynamic city which will grow in importance as a regional centre for a range of services, including healthcare, and continue to develop as a centre of excellence and world leader in research and education.

The Plan includes a commitment to support and facilitate the implementation of the 2020 Vision, subject to certain conditions related to sustainable implementation and the need to prepare an integrated plan for the southern fringe of Cambridge. As part of these plans a new access road and rapid transit system links are proposed for the Addenbrooke’s campus.

The Trust is encouraged by the level of support expressed by the local authorities and members of the public for the 2020 Vision proposals as part of the local plan consultation process.
The Southern Fringe Masterplan

As well as supporting the 2020 Vision proposals, the structure and local plans promote other developments in the southern fringe of Cambridge city. These include additional housing to be provided at Clay Farm, adjacent to the campus and with other housing developments in the area, in total between 3–3,500 new homes are planned in this part of the city. The planning for these developments is being carefully co-ordinated by the local authorities.

The Trust is working in partnership with Cambridge City Council, Cambridgeshire County Council, South Cambridgeshire District Council and other interested developers to prepare a supplementary planning document for the southern fringe of the city. This document will set out the details of land use, planning and design criteria etc for the area. The goal is to create a distinctive mixed-use urban extension to Cambridge that will realise the potential of the Addenbrooke’s campus in terms of healthcare and associated teaching and research. A key objective is to promote social integration between the new employment and housing development for the benefit of existing and future communities in Cambridge and South Cambridgeshire.

This plan (reproduced by kind permission of Cambridge City Council) shows the key developments planned for the Southern Fringe. The extended Addenbrooke’s campus is identified, together with the proposed housing developments.

The route of the new access road from Hauxton road to the Addenbrooke’s campus is not shown in its entirety in this version of the plan, as the final route between Shelford Road and the Addenbrooke’s campus has not yet been agreed (June 04).

The route of the Guided Bus System is also shown on the map. As these buses are planned to run in non-guided mode on the Addenbrooke’s campus (east of the railway line), the route is not identified either on the existing hospital campus or on the extension land.
The challenge of implementation

The scale of the task
In broad terms the strategy for the Cambridge sub-region requires that over the period to 2016, homes for some 100,000 extra people be provided, together with provision for 56,000 accompanying jobs. A full complement of facilities for community, health and education services and affordable housing is required together with road improvements and greatly enhanced public transport provision. This development needs to be co-ordinated across eight local authorities. It has been observed that what has to be achieved in the sub-region over the next 15 years is broadly equivalent to what was achieved in Milton Keynes over 25 years. There is also a need for some early development to meet the strategic targets. The Cambridge Southern Fringe is one area where significant progress is already being made and which could also start to deliver some significant gains in housing and employment.

The Addenbrooke’s contribution
Addenbrooke’s is playing its part in meeting this challenge in two ways. Firstly, we are engaged in the health forum of the infrastructure partnership. This is a forum that has been set up to ensure that population health and healthcare delivery are taken into account when planning the infrastructure investment required across the Cambridge sub-region. Secondly, we are moving ahead with implementation of the first phases of the 2020 Vision.

The Addenbrooke’s Elective Care Centre will be the first phase of long-term development and will open in the winter of 2006/07. The building will contain units for day and short stay surgery, allowing planned surgery to be scheduled without risk of disruption from the hospital’s growing emergency workload. Patients will be able to book the date and time for their treatment. Temporary facilities are being provided to maintain progress towards achieving patient care targets in the period up to 2006.
In the same building development we will be providing, in partnership with the University of Cambridge and the Medical Research Council, a new diabetes centre, new research facilities for the MRC Epidemiology Unit, and a new centre for medical genetics. The diabetes centre will bring together new outpatient facilities for outpatients with advanced clinical research in endocrinology and metabolic disease. Similarly, the medical genetics centre will bring together hospital and university departments and locate in one place laboratory and consulting facilities. This will give the regional population a service fit for the future in this fast-growing area of medicine.

Since 2001, the University and Trust have also commenced development of the former Downing College Playing Field site. This includes the development of the new research centre for Cancer Research UK and a supporting multi-storey car park, which will also be used by hospital staff and visitors. The Trust has also begun planning for a second multi-storey car park, which will be needed within the next few years.

The masterplan includes some 20 acres for future hospital expansion. This will be needed for future clinical developments to meet the needs of the population we serve. The most important of these will be the development of New Papworth Hospital, re-locating heart and lung services from Papworth Everard to the Cambridge Biomedical Campus. This will enable better integration of clinical services between the two hospitals and greater investment in research in this field of medicine.
The vision for the New Papworth Hospital is a purpose built, state-of-the-art cardiothoracic hospital and research institute co-located with Addenbrooke’s Hospital and Cambridge University School of Clinical Medicine on the Cambridge Biomedical Campus. Central to the vision is the concept of partnership working between current institutions, whilst maintaining their individual identities, specialties and strengths, and the delivery of better integrated, improved services for patients. The co-location of specialist and general cardiac and respiratory services and proximity to Addenbrooke’s Hospital’s services will benefit patients from the local area, and those travelling from across the region and country.

The New Papworth Hospital, which will continue as an independent NHS organisation, will provide clinical and academic leadership in cardiothoracic services locally, regionally, nationally and internationally. Such a centre of excellence will be of benefit to patients, staff, students, clinicians in training and researchers, and will be able to adapt to a rapidly changing health service and wider environment.

The development of the New Papworth Hospital will integrate basic research, clinical research and education in cardiovascular and respiratory diseases on one site. The unification of all of these skills and capabilities, and co-location with Cambridge University, research funding bodies and commercial enterprises, will create powerful research and education synergies. This will further strengthen Cambridge’s position as one of the leading international clinical academic centres and will improve the recruitment and retention of exceptional staff.

We also anticipate the need for new developments or extensive re-development of existing facilities in a number of other clinical areas: children’s services, cancer, neurosciences, perinatal care, organ failure and pathology. It is likely that some of these developments will need to occur on the development land to be acquired as part of The 2020 Vision.

Also included in our proposals is the re-provision of the MRC Laboratory of Molecular Biology on a new site to the west of the current campus. The current laboratory building is now over forty years old and its outmoded nature is increasingly a hindrance to the work of the unit. It is important to the MRC that the proposed replacement building be available for use as soon as possible, ideally by 2008. It may be necessary to bring forward this development in advance of the other 2020 Vision proposals to meet this deadline. These plans reflect the value that the MRC places upon its presence on the site, and the opportunities that this provides for interaction with the hospital and with other researchers.

‘The masterplan includes some 20 acres for future hospital expansion.’
The 2020 Vision includes an area for **research and development accommodation** to the southwest. The focus of this part of the campus will be specialist research and occupants will be limited to those whose activities can benefit from interaction with the clinical and research communities on the campus. The work undertaken today by Glaxo SmithKline plc on the campus is an example of this sort of interaction.

**Benefits of co-location**

**Shared research infrastructure** – modern scientific research increasingly requires access to expensive equipment and other resources. Examples include cyclotrons, mass spectrometers, genetic sequencing equipment, tissue banks, imaging equipment and IT resources.

**Opportunities for interaction and collaboration** – between company staff, researchers and clinicians regarding clinical trials, applications of new treatments, developments of new devices, diagnostic tools and therapies.

**The opportunity to share knowledge** – through participation in seminars and other events at which current research and clinical issues are discussed.

**Savings on time** – which is often the rarest of all resources for the skilled individuals involved in biomedical research, who may also have clinical or educational commitments. This simple consideration is of vital importance. Not only does distance reduce the propensity to attend formal events like seminars but it also reduces the scope for more informal interaction between key individuals.

**Scope to create new career paths and an attractive employment environment** – with collaboration between different partners to pursue innovative models for attracting and retaining scarce human resources, for which competition is often international.

**Ready access to other support services** – for example support with technology transfer and intellectual property rights.
The current facilities in the food court

The structure plan supports the development of a new access road from Hauxton Road to Clay Farm and Addenbrooke’s and the development of a Guided Bus System, which will include a spur to the Addenbrooke’s campus. The Government has approved £65m of funding towards this project which is expected to be operational by 2007. These developments would significantly reduce pressure on the existing vehicle access points to the campus and encourage further modal shifts away from the car.

For a number of years there has been a proposal to create a rail halt/station on the western edge of the 2020 Vision development land at Addenbrooke’s. Recently Network Rail and the Strategic Rail Authority have indicated that they are not able to support this proposal. This makes the provision of a railway station at Addenbrooke’s look unlikely in the foreseeable future.

The masterplan also includes provision of a new campus hub, including retail, food and meeting facilities to provide a focus for the people who will work on the campus.

The current facilities in the food court

The hospital's bus station
Land allocation plan

This plan illustrates the proposed land allocation of the campus that will be extended by a total of 70 acres. The Trust expects that the land to the south of the campus will be safeguarded to allow development in the longer term (after 2016). The land allocation is likely to be as set out in the table below.

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<td>MRC building</td>
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</tr>
<tr>
<td>Infrastructure/incidental open space</td>
<td>Blue</td>
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Campus masterplan

The masterplan shows a layout for the proposed development together with an illustrative arrangement of buildings and the preferred orientation of the buildings within the extension land. This layout assumes that the new link road enters the campus in the SW corner of the extended campus. The final route may not be agreed until the end of 2004.

This plan also illustrates that some additional developments will be required within the current hospital campus as parts of the hospital buildings are refurbished and redeveloped.

It is expected that the buildings around the periphery of the extended campus will be of four storeys rising to five storeys towards centre of the campus and the existing hospital buildings. This will mitigate the impact of the development in views from the surrounding area.

Plans are also being drawing up showing details of the façade treatment and a palette of materials that will be used for the new buildings within the biomedical research park. This will ensure that all these buildings will be viewed as a ‘family’ of buildings of equally high standard. The building in the SW corner of the campus adjacent to the proposed entry point of the new link road, will be a landmark building and is shown for illustrative purposes in a circular form to indicate its status.

The masterplan illustrates that the developments on the extension land will be much less dense than on the existing hospital campus and will be fully landscaped to reflect the landscape strategy adopted for the Southern Fringe of the City.
Transport links

This plan illustrates the transport links that will be created as the campus develops. Particular importance will be placed on safe and convenient pedestrian and cycling routes, together with improved public transport access to the campus.
Proposal for a central ‘hub’

This visualisation shows an elevated view of the development from the south west.

The Trust and its partners are considering creating a central ‘hub’ on the campus. This will provide facilities for seminars, increased restaurant/food outlets and limited retail space for staff and visitors, promoting the benefits of co-location on the campus. An option being considered is to ‘roof over’ the existing external courtyard adjacent to the main hospital entrance. This would provide space for the proposed hub and also allow for a through route to be created for the Guided Bus System.

This route would provide a link from the city centre/Clay Farm/Trumpton area directly through the centre of the campus and linking to the existing Addenbrooke’s bus station at the Hills Road entrance to the campus.

The illustration is a section through the proposed hub, showing from the left, the existing hospital chimney, central boiler services/goods in, guided busway, restaurant/retail facility and to the right the existing main entrance on the ground floor with operating theatres above.
Local Plan Review

Both Cambridge City Council and South Cambs Council are now involved in the process of reviewing their local plans. These plans (or Local Development Frameworks) will shape the future development of Cambridge City and the surrounding area. Addenbrooke's NHS Trust, the University of Cambridge, the Medical Research Council and the development partners would like to see the vision of a Cambridge Biomedical Campus reflected in the local plans and supported by appropriate land allocations, revised Green Belt boundaries, environmental and landscape designations and firm proposals for improved infrastructure.

Equally important will be policies for co-location of new research facilities, to support the effectiveness of the overall 2020 Vision and to encourage the continued development of an important Cluster.

Specific policies for the Local Plans should ideally include:

- infrastructure policies that recognise that hospital services are part of the community's infrastructure
- infrastructure proposals, such as the guided bus system, that will ensure that public facilities will be provided to serve the Addenbrooke's campus
- community facility policies that recognise the need for hospital expansion to meet the health needs of a growing and ageing population and the concentration of specialised medical research, including cardiothoracic facilities, on the campus
- Research and development (R&D) policies that support the continued expansion of appropriate research facilities at the Addenbrooke's campus
- educational policies that reflect the importance of the teaching and research role; that further expansion will be encouraged
- housing policies that recognise the significant need for affordable and key worker housing near the Addenbrooke's campus and elsewhere within the city area
- environmental policies that seek enhancements to the Addenbrooke's campus and the 2020 Vision land as well as securing appropriate landscape designations
- Green Belt policies that show a revised boundary to the south of the 2020 land so as to safeguard the future.

The provision of key worker housing and the means by which implementation is to be co-ordinated are important objectives of the Trust.

The 2020 Vision can make a very valuable contribution to the wider infrastructure needs of Cambridge though funding mechanisms. However, clinical development should remain exempt from such contributions, given that such facilities are part of the sub-region's community infrastructure.
For more information contact:
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Also available:
Addenbrooke’s: The 2020 Vision (September 1999)
Addenbrooke’s: The next five years (May 2000)
Addenbrooke’s: The 2020 Vision Update (June 2001)
Your Hospital – Your Chance to be Involved
NHS Foundation Trust Application Consultation Document
Cambridge Science at Addenbrooke’s

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