



## Minutes

# Royal Brompton and Harefield NHS Foundation Trust Community Liaison Group

## Meeting 3

Date: 25<sup>th</sup> May, 2016, 6.30pm – 8pm  
Location: Seminar Room 2, Hospital Reception,  
Sydney Street, London SW3 6NP

Chair: Steve McAdam

Gillespie	Robertson	GR	Dovehouse Street Residents' Association
Damian	Greenish	DG	Chelsea Society
Richard	Burgess	RB	King's Road Association of Chelsea Residents
Helen	Morgan-Edwards	HM-E	Astell Street Residents' Association
Carys	Walsh	CW	St Luke's Church
Andrew	McAlpine	AM	Guthrie Street
Richard	Alexander	RA	Sydney Street Residents' Association

Apologies:	Brian	Leathard	BL	St Luke's Church
	Kim	Taylor-Smith	KT-S	RBKC Councillor for Stanley Ward
	Paul	Warrick	PW	RBKC Councillor for Stanley Ward
	Susan	Spiller	SS	Sydney Street Residents' Association

RBH team:	Jo	Thomas	JTh	RBHT
	Richard	Paterson	RP	RBHT
	Jeremy	Titchen	JT	RBHT Property Advisor
	Pedro	Roos	PR	PDP London
	Hannah	Willcock	HW	DP9
	Steve	McAdam	SM	Soundings
	Lizzie	Bird	LB	Soundings
	Kate	Honey	KH	Soundings

## Agenda:

6.30	Introductions / Apologies
6.40	Review minutes
6.50	Design Update - PDP/ Arcadis
7.20	Q&A session
8.00	AOB
8.30	Close

## 1.0 Welcome and Introductions

- 1.1 SM conducted introductions and reviewed the agenda for the evening. SM outlined that the Stage 2 exhibition on the draft design proposals was currently underway. He encouraged CLG members to give their feedback and help raise awareness about the exhibition amongst their networks.

SM outlined Stage 3 post planning consultation aims to support the statutory Royal Borough of Kensington and Chelsea's (RBKC) consultation and RBKC will determine the date. SM outlined that the May newsletter was distributed to an extended circulation/ consultation boundary and provided a summary of key issues discussed at the previous CLG meeting.

## 2.0 Review of CLG 02 Minutes

- 2.1 Minutes had been circulated to CLG members electronically prior to the meeting and in hard copy at the CLG.

## 3.0 Design Update - PDP/ Arcadis

- 3.1 PR provided a design update focussing on issues previously raised by the group. PR set out the draft designs for the Sydney wing extension:
- an entrance with a 5 drop-offs for cars is proposed on Sydney Street. The wing extension will connect through to the existing buildings and consolidated imaging centre. No pedestrian access is proposed from Dovehouse Street
  - A two level basement with the first level to provide access for large goods vehicles and ambulances. The second level would re-provide basement car parking for over half of the existing car parking spaces. A reduction in staff car parking spaces is proposed
  - PR talked through the sketch views/ impressions of the extension to the Sydney Street wing and Chelsea Farmers Market
  - The scale and mass proposed is necessary in order to provide the maximum amount of patient beds
  - PDP took inspiration for the façade of the extension from the Georgian architecture and distilled into a contemporary design. Proposals include re-cladding the existing stairway of the current wing to blend better with the proposed extension.
  - PDP have been working on how to reduce the impact of the required plant on the roof. The proposals are to set the plant back with a screen/ sculptural element, reducing the visual impact
  - Proposals for the Imaging Centre include removing the entrance from Dovehouse Street and planting a new row of trees between the street and the wall. The proposed height of the building is not much higher than the existing buildings. Some issues exist around the electrical substations and PDP are exploring options with the mechanical and electrical engineers and understand resident's concerns.

*Q. Will there be a garden as part of the plans for the extension of the wing and how will this be maintained?*

PD outlined proposals on Britten Street include screening from the street, with railings and planting/ hedge to reflect surrounding boundary treatments.

*Q. Is there a better design solution to screening the plant than the metal sheets proposed?*

PR clarified they won't be shiny metal. PR identified was that the other option is to add louvres but the design team are trying to avoid this more industrial feel.

*Q. Is the proposed extension higher than the existing building (including the proposed plant on the top of the building)?*

PR clarified that the proposals are no higher than the height of the existing hospital building. Part of the present plant is higher than the roof. PR identified that they are working with the mechanical engineers to ensure that there will be no noise as a result of the plant.

*Q: The roof of the hospital will be seen from afar - would it be possible to make it look 'less lumpy'. Could detail be added to the corners?*

PR explained that there is a danger in trying to compete with the design of the extension rather than trying to detract from the plant. PR clarified the plant for the plant screen will not be shiny metal. PDP have been in discussions with RBKC heritage, townscape, planning officers who so far are in agreement with the approach proposed.

*Q. In terms of architectural style, RB raised that there was a lack of faith/ confidence in planning*

*officers to make the right decision and that he felt residents would like to see something that preserves and enhances the character and quality of the conservation area - particularly the views, context and setting of the grade 1 listed church.*  
PR set out that issues with the local planning authority would need to go to RBKC.

### 3.2 Daylight/ Sunlight

PR shared the existing and proposed still images and time-lapse videos for the winter and summer solstice and March equinox. PR explained that:

- The biggest impact at the March equinox is on light from 3pm-4pm when the sun would be behind the proposed building. HM-E suggested trees at St Luke's Gardens should be cut back as currently it is very shady
- At the winter solstice there is minimal sun and the main encroachment is to the south east corner
- The time-lapse for the summer solstice shows currently there is no shadow at 5pm but the proposed extension would bring a shadow across the bottom of St Luke's Garden's from 4pm/5pm
- CLG raised the point that the shadow study information does not go beyond 5pm in the summer, so does not show the impact on evening sun.

### Traffic

3.3 JT set out the following changes to the proposed traffic movement:

- Ramp will be altered so it will go down all the way into the basement.
- Lower basement will provide just under half the existing car parking. This will not effect patient/visitor parking but will reduce the amount of staff parking

### Questions & Answers

3.4 *Q: Have monitoring/ traffic studies been completed of the existing traffic in the area i.e. the numbers of vehicle journeys and the impact of the proposals?*

SM set out that the traffic consultants WSP have completed surveys and modelling. The exhibition boards have more information on the 1-hour peak period (8am - 9am). It is anticipated that there will be an increase in larger vehicles but the key change would be that the majority of vehicles move from Sydney Street to the Cale Street entrance (including ambulances).

*Q: Has there been any contact with RBKC about the proposals for two-way cycling on Cale Street? It seems that RBKC have now dropped this plan?*

JT outlined that the Trust is unaware of the plans.

*Q. How will larger vehicles make the turn onto the ramp? There was general agreement by the group that the proposed vehicular access from Cale Street was an improvement on the existing arrangement.*

JT confirmed that plans to widen the bell-mouth on Cale Street would enable large good vehicles to turn left when exiting in one manoeuvre.

*Q. Will the hospital continue to use a central gas cylinder to provide gas for the hospital and how will the gas be delivered the hospital?*

JT confirmed that the main cylinder will stay in the current position and has a loading facility from Cale Street. RBH has two tanks, which are shared with Royal Marsden. It was investigated previously whether the gas tanks could go underground but that is not possible.

*Q. How will the hospital ensure that ambulances coming to the extended wing use the ramp and do not continue to park on Dovehouse Street?*

PR set out that this would be a management issue for the hospital and RBKC. The space is being provided for ambulances as part of the design. This will allow ambulances to park and alleviate the problems on Dovehouse Street.

### Chelsea Farmers Market site

3.5 PR outlined design proposal for the Chelsea Farmer's market site. PR set out that:

- The layout is based on the old workhouse/ perimeter block development, which used to be on the site. The heights of proposed buildings are stepped up towards the Kings Road.
- A retail square linked to Dovehouse Green is proposed. A public garden square (with no gates or railings) is proposed on Sydney Street
- The proposal includes basement car parking

*Q. Will the retail space be on the base of the buildings?*

PR confirmed that the proposals are looking to have retail on ground floor of the Sister Block and to have a

single storey retail with a retail pavilion that wraps around 151 Sydney Street.

*Q. Have you resolved the access through to Dovehouse Green with the St Luke's Church?*

PR outlined that it is still being explored with St Luke's however the current plans can work with or without access.

*Q. If a Crossrail station goes ahead how will the access be arranged/ what will be the impact on Dovehouse Green?*

PR outlined this would need to be discussed with St Luke's Church.

*Q. Would patients or hospital staff be able to use the proposed basement parking on the Chelsea Farmers Market site?*

PR outlined that it is not the intention that the hospital staff or patients would use the underground bays - these spaces would be for residents and those using the retail.

*Q. Are plans for the Chelsea Farmers Market site theoretical if the Trust is planning to sell the Chelsea Farmers Market? Will the new owners seek to change plans for the site?*

PR acknowledged that it is likely once sold these plans would go through another iteration. JT outlined that currently the Trust are looking to get consent for this scheme, to then sell the site to raise the funds to build the extension. This will mean that RBKC will not require affordable housing to be provided however if a new owner looks to change the consented scheme it will trigger a affordable housing requirement

*Q. Is RBKC in agreement about providing no affordable housing as part Chelsea Farmers Market proposals?*

JT clarified that schools, affordable housing and hospitals fall under the concept of public benefit. JT emphasised that there will be a strong commercial disincentive for a new owner to change the design as they will trigger the need to provide affordable housing.

*Q. After difficult process of the SPD and the selling of the Thamesbrook site (with no evidence of how the money goes back into the community) it was suggested that it is not so clear-cut that there should be no affordable housing.*

JT outlined that RBKC will be very robust with the Trust and without selling the Chelsea Farmers site the Trust can't afford the proposed improvements to the hospital.

*Q. While accepting there is some justification for proposing no affordable housing, concerns were raised about the designs for the Chelsea Farmers Market site. RB felt that:*

- the architecture isn't striking or strong enough and without enough character and it is 'going to end up as foreign owned ghetto'
- There is an opportunity for a 'big wow factor' dramatic piece of architecture
- The design of the building can work to bring more life to the centre part of the Kings Road, to encourage tourists.
- Suggested that people love classical buildings and suggested Quinlan & Francis Terry Richmond Riverside
- Important for the viability and vibrancy to consider the Chelsea Farmers Market site in the context of the surrounding sites (such as the fire station)
- Suggested a design completion to see what ideas could be generated

JT set out the Trust feels it is important that the building fits into the context with recognising that style is subjective but Chelsea is not a dense part of London and these designs try to respond to the area.

SM outlined there is some confusion between quality and style and it's not fair to accuse PDP of not producing quality architecture however obviously there are disagreements about the style.

PR outlined the site plan for the Princes Trust 1994 scheme, identifying that the buildings proposed are higher than the current proposals. PDP's approach is about designing buildings that speak of its time, to look to the surrounding buildings and try to integrate the building. The Trust feel this is not the location for a foreground buildings - St Luke's is a foreground building.

JT outlined that the Trust has appointed PDP as very successful architects, who have worked on many local projects. SM set out that PDP has been looking to balance the buzz of Kings Road with a calmer atmosphere behind the King's Road, respecting that it's a more residential area so it makes sense for it to be more relaxed.

*Q. Are the Prince's Trust Plans included in the most recent exhibition material?*

PR confirmed they're not but that drawing from that scheme is available publically.

## Questions and Answers

### 3.6

*Q. Have the hospital got enough accommodation for staff/ nurses?*

RP outlined that there is accommodation including South Parade, however the Trust is not proposing to construct new nurses accommodation

*Q. Can traffic modelling be completed for Cale Street, Dovehouse Street and the junction with the Fulham Road?*

PR outlined that work is underway by traffic consultants WSP. JT outlined that when the studies had been finalised the analysis would be shared

*Q. Will traffic increase to the west? Overall it seems as though the proposed access from Cale Street will be an improvement on the current situation however a reduction in staff parking could cause problems.*

JT outlined that the Trust have sought to reduce the amount of car parking in agreement with RBKC.

*Q. Can there be separate planning applications for the hospital and Chelsea Farmers Market?*

JT confirmed that the Trust plan to submit 3 separate planning applications for the Sydney Street extension, Chelsea Farmers Market and the Sydney Street listed properties

*Q. Concerns were raised about the architectural design and heights/ mass of buildings proposed on the Chelsea Farmers Market site. What can be done to ensure that this is a successful community in the future, where people live and enjoy?*

JT identified that the Trust will also be a neighbour to the Chelsea Farmers Market site so the legacy is important to the Trust. However there will be a limited amount the Trust can do to control this once the site is sold.

*Q. How much does the Trust need to complete this development?*

RB set out around £140 million. £80 million for the extension plus the imaging centre, capital, fees, and equipment.

*DG acknowledged the Trust needs to raise funds but that the Chelsea Society and residents may take a different approach. DG thanked the hospital for holding the Community Liaison Group meetings and providing the opportunity for the group to voice their opinions.*

### 5.0

#### Closing comments and next meeting

#### 5.1

SM brought the meeting to a close, and thanked all for their attendance.

SM also reminded CLG members about the dates of the upcoming stage 2 exhibitions. SM confirmed that as yet there is no fixed date for the next CLG and this would be circulated once agreed upon.

