

# **RE-PLANNING THE ROYAL BROMPTON HOSPITAL'S SITES**

## **PUBLIC CONSULTATION REPORT**

**7 January 2014**

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# RE-PLANNING THE ROYAL BROMPTON HOSPITAL'S SITES

## Public Consultation Report

### A. Introduction

This report summarises the public consultation undertaken in November and December 2013 on the issues and options raised by changes to the area around and including The Royal Brompton Hospital. It will inform a Planning Brief to be prepared by the Council in 2014.

The Royal Brompton Hospital's plans are to consolidate its activities on the main Sydney-Dovehouse Streets campus, and so this process examined the issues and options associated with:

- the principle of consolidating the hospital in this area of the borough
- improving the appearance of key hospital areas
- new land and building uses or changes of use
- retaining buildings, their facades or developing new buildings, and
- the treatment of public routes to Dovehouse Green and through Dudmaston Mews.

### B. The Consultation Process

This initial round of consultation was preceded by The Royal Brompton and Harefield NHS Foundation Trust's own communications in its first Community Newsletter (November 2013), which was distributed some 2-3 weeks earlier to the same area in Chelsea.

The Council's methods of engagement were:

- A preview of the issues raised in the exhibition held on 28<sup>th</sup> October 2013 for the Royal Brompton Hospital Liaison Group to brief local community and residents' group representatives on the forthcoming consultation.
- An A3 folded leaflet outlining the issues from the exhibition and sent to 9,800 households within 400m of the hospital's land, before the exhibition opened (see leaflet in Appendix B1). This allowed residents to respond to the issues raised either using a detachable Freepost questionnaire by return post or in person at the exhibition. It also listed the opening hours for events, the website for an online version of the questionnaire, plus further contact details.
- A public exhibition in Chelsea Library for 15 days, including evenings and weekend opening, with staff in attendance at various times (see exhibition boards in Appendix B2);
- Three weekday public workshops in Chelsea Old Town Hall (two evenings and one morning event);
- An online consultation page on the Council website, featuring the exhibition boards and the issues and options questionnaire; and
- Announcements about the consultation issues and how to respond on the Council's established communications channels, e.g. posters in local libraries and Council notice boards, the Council website's Consultations pages, Twitter, Facebook, the weekly Planning Bulletins, Business Direct Bulletin, City Living Local Life, plus local newspapers - The Chronicle, Kensington and Chelsea Today, and the Evening Standard.

The areas under consideration are a mix of hospital sites for re-use, hospital sites which could be released for other uses, and other land either owned by the Hospital Trust or its Charity. These were

presented as four blocks and the issues relating to the main buildings within these were identified, along with initial options for discussion. The link between the range of options and the Hospital Trust's ability to raise funds for reinvestment in its facilities was also set out.

## **1. Levels of Engagement**

The public exhibition, held from Monday 25 November to 9 December 2013 in Chelsea Library, attracted a small audience who mainly replied using the leaflet. The three workshops allowed a range of people to examine the issues in detail with Council representatives. Attendance at these events was very low, with around 27 participants from the local area, the Royal Marsden Hospital, the Royal Brompton Hospital's staff and its advisory team. Six longer letters were received raising detailed points and the remainder of views were recorded using the leaflet questionnaire.

The level of public engagement in this consultation was low, which may be due to a number of factors:

- The Hospital Trust's own newsletter set out the hospital's need for change in an open and accessible manner, referring to the Council's consultation plus its own consultation plans beginning in the New Year, and framing this as a long term dialogue. This may have reassured residents that their concerns on the details of planning applications will be heard as they unfold, making this issues and options stage less significant to engage with.
- The positive social and community use that the hospital represents, and its admirable work for others, may have deterred those who might have responded differently to developer-led proposals for the area. The more detailed responses received were generally concerned about possible changes, rather than giving support at this stage.
- The private nature of the hospital buildings may mean that there were not strong views about how it reorganises its assets – being seen as relatively self-contained and consolidating rather than growing physically.
- There have been a number of consultation events by local landowners and Crossrail in the last six months which relate more directly to key retail, leisure and residential areas, potentially making hospital-related issues a lower priority.
- Despite planning for a total relocation of the hospital outside the borough, the 2004 draft Planning Brief was referred to as a good basis for decision-making, and had proposed changing land uses earlier, so there were few issues that had not been aired before.

## **2. Consultation Responses**

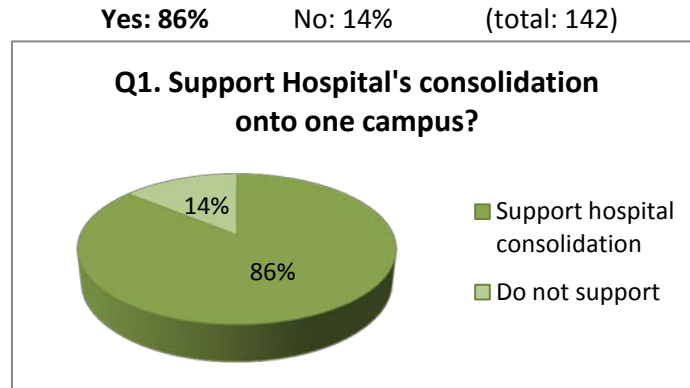
In total 162 responses were received - principally to the leaflet questions – and included 6 longer letters, 2 emails and 6 online responses. This total is 1.6% of the 9,800 leaflets dispatched and another 300 copies available at the exhibition and workshops. As the leaflet asked for residential post codes, it is clear that most of the respondents have come from the area, and are not visitors from other areas of London or beyond.

## **3. Summary of Leaflet Questions**

The responses received by post, online or in person are as follows, and indicate the proportion of votes cast for each question. Not all respondents answered each question, and some questions

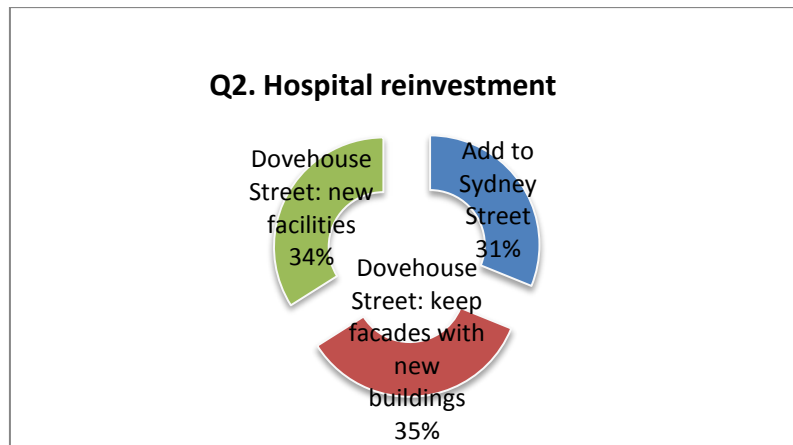
invited multiple answers, and so the totals per question varied (as shown in the table in Appendix A1):

**1. Do you agree with the principle of supporting The Royal Brompton Hospital's consolidation onto one campus?**



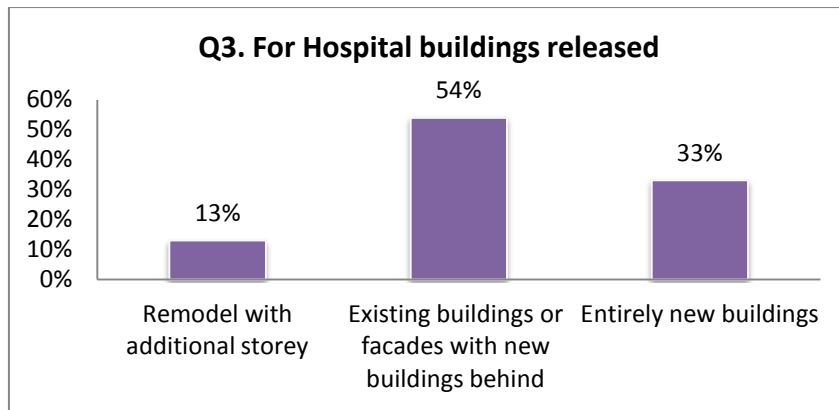
**2. Where the Hospital is seeking to reinvest in its facilities, do you favour:**

- Adding to the Sydney Street building to improve it: 31%
- **Keeping the Dovehouse Street façades with new buildings behind: 35%**
- Developing new high quality purpose-built facilities in context: 34% (Total: 212)



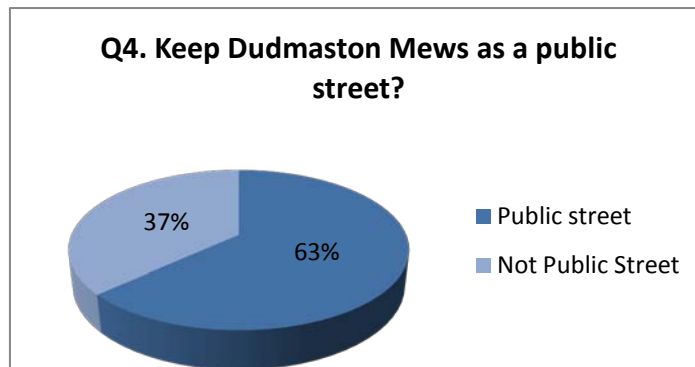
**3. Where sites and buildings could be released for new uses, would you prefer:**

- Remodelled buildings with an extra storey: 13%
- **Developing new buildings behind existing buildings or façades: 54%**
- Developing high quality entirely new buildings in keeping with the area: 33% (Total: 154)



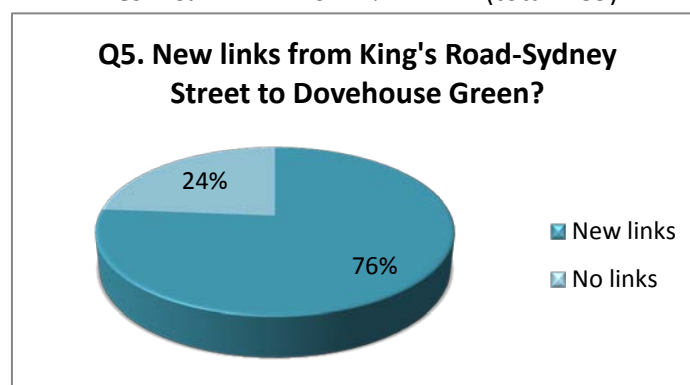
**4. Do you favour keeping Dudmaston Mews a public street?**

**Yes: 63%**      **No: 37%**      (total: 136)



**5. Do you support creating new links from 250 King's Road and 151 Sydney Street to Dovehouse Green?**

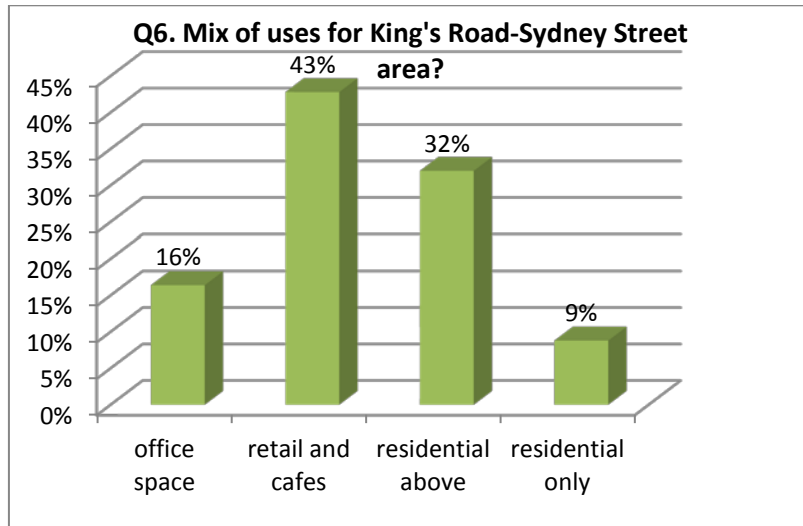
**Yes: 76%**      **No: 24%**      (total: 139)



**6. Do you favour creating a mixed use quarter at the corner of King's Road and Sydney Street, with:**

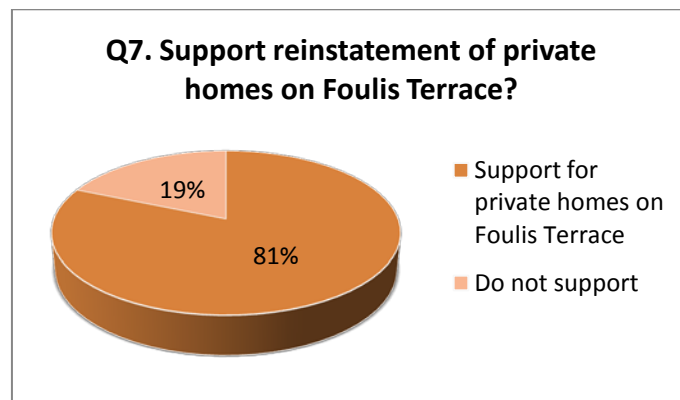
Office space	16%
<b>New courtyards and ground floor retail/ café spaces</b>	<b>43%</b>
<b>Some residential uses on upper floors</b>	<b>32%</b>
Some residential only buildings	9%

(Total: 250)



**7. Do you support the reinstatement of private homes on Foulis Terrace?**

**Yes: 81%**      No: 19%      (total: 150)



\*

The following section sets out the comments made by respondents in written responses and the workshop discussion groups, and it is grouped around the main blocks under consideration.

## **C. Commentary on Issues and Options**

### **1. Overview of Hospital Consolidation Plans**

There was clear support from respondents (86%) for the Royal Brompton Hospital's efforts to consolidate its activities onto one campus, and the opportunity to improve the area 'has genuine win-win potential'. Several respondents stated that the hospital should be supported in its fundraising as much as possible, in order to continue to provide the quality of care that they had received there themselves.

#### **Site Capacity**

There was however concern about how the hospital uses, currently housed in various buildings across the area, could be accommodated on just the Sydney and Dovehouse Street block without creating a 'monolith'. This was coupled with questions about the future space needs of the hospital if it were to grow further, but with no land left for expansion. The disposal of property with a clear public purpose was felt to be against the RBK&C Core Strategy. Several respondents referred to the Chelsea Farmers' Market area as historically being part of the hospital grounds, and so should be leased for new development, and ownership retained creating a logical place to develop further hospital facilities in the future.

#### **Access**

Transport, traffic and car parking were all regarded as a key considerations for any options in this area and that there were insufficient details at this stage for how they would be dealt with. The hospital was estimated to have some 3,000 staff and patient visitors, with reports of people arriving by car in distress at not being able to park in order to visit dying relatives in hospital. The conflict with on-street ambulance parking or waiting bays was raised frequently. It would also help if the type of hospital uses to be accommodated were set out in the next stage of consultation, as there were concerns around more emergencies bringing increased traffic and noise to the area. The new Planning Brief should show how these issues would be accommodated, and whether this would include underground car parking (commercially enabling the hospital or otherwise).

#### **Mixed Uses**

As many of the options suggested new residential development, there was interest in seeing social, community and educational uses being accommodated, as well as enabling private healthcare facilities and residential development (following policies CK2 and CK1), plus retaining lower cost retail premises, and space for younger or older people.

#### **Enabling Policies**

There were ideas about how the hospital should seek funding from private donors if there is a shortfall in its fundraising from property. But a view also expressed was that if the hospital is helped



to achieve its consolidation by a relaxation of Council policies, that the profits go specifically into creating better hospital buildings, or otherwise to cross-fund community projects.

### **Development Overview and Vision**

There is a general concern about major disruption to the area if the wide range of other proposals consulted upon during in 2013, for example, is implemented. There was a call to have a 'nuisance' plan for any hospital-related construction periods and upon completion, which will cover environmental, health and safety, emergency and general traffic, and security issues.

Respondents could also foresee that in selling off land with planning approvals in place, the hospital and Council would have far less control over when new development would come forward, and how they should be co-ordinated.

It would therefore help if there were a timeline showing any proposed projects in the area, so that residents can see the relative timescales and likelihood of any construction taking place (e.g. Crossrail 2, the Curzon cinema block area, etc.), in the context of an overall 'vision' for the area which is comprehensively planned.

## **2. Royal Brompton Hospital - Sydney Street**

There was support (31%) for adding to and improving the Sydney Street building either with new frontages or an additional storey. This was seen primarily as a way of improving 'one of the ugliest buildings in the world' directly opposite St Luke's Grade I listed church. A new pedestrian entrance on this side could help to achieve this improvement, and create a sense of arrival for people.

The views expressed were to make it more attractive, 'improve the interplay' between the church and the hospital, to reorganise the parking areas, to develop space underground, and even whether this building could be redeveloped completely. The draft Planning Brief (2004) was seen as still very helpful, especially on servicing and access arrangements. The hospital's architects employed to design the Cale Street extension for the existing planning consent were not seen to be 'good enough for Chelsea'. There were concerns about the design of extensions or new buildings in relation to possible impacts on Guthrie Street and Cale Street in terms of loss of light and sunlight, maintaining a visual buffer to the hospital, improving servicing and access arrangements, the safety of storing gases onsite, and the positioning of heating, ventilation and air handling system outlets.

## **3. Royal Brompton Hospital - Dovehouse Street**

Given the inefficient layout of the hospital buildings west of the main Sydney Street building, the consultation examined options for changes to the two main buildings on Dovehouse Street – the Chelsea Wing (1914) and the former Nurses' Home (1925). The options suggested were to: retain the building facades and build new hospital buildings behind; or redevelop new facilities with or without lower buildings fronting onto Dovehouse Street itself. By a narrow majority of just two votes,

respondents favoured retaining the Dovehouse Street facades with new buildings behind (74 votes cast in favour of keeping the facades (35%), and 72 in favour of new purpose-built facilities, 34%).

Consequently there were very mixed views about retaining the building facades, with a particular focus on the northern end of Dovehouse Street - the 1913 former Chelsea Hospital for Women - which was seen by some as beautiful, imposing and well-proportioned, and to 'complement the conservation area'. Yet the principle of 'facadism' was not welcomed by many others, as it would compromise the design of the new hospital facilities behind, with its existing floor levels and windows, and limited development space available behind. There were ideas to retain some 'memorial' elements of the frontages (e.g. the pediments) as a better approach. Observations included the need to create much better outdoor space for patients and their families as part of the proposals, such as where the existing open space currently is along Dovehouse Street. Improving the service area off Cale Street was also raised.

As the amount and type of new hospital space to be provided was unknown at this stage, the option of mews style buildings fronting onto Dovehouse Street itself was commented upon - to be 'of a domestic scale', set back and sympathetic to the conservation area. The temporary scanner buildings should also be incorporated within the main hospital buildings, and the idea of holding an open architectural competition was recommended for the design of the hospital buildings to ensure an 'exceptional quality' of design.

The open and bright nature of Dovehouse Street was raised as a concern in case of a loss of light especially to the homes opposite, but also for no artificial light pollution.

#### **4. Fulham Wing, South Parade and Dudmaston Mews block**

Looking at the sites which the Hospital Trust no longer wishes to retain in hospital use, the options suggested were for:

- remodelling the buildings for new residential uses and with an additional storey;
- developing new residential buildings behind existing buildings or retained facades; or,
- developing entirely new residential buildings.

This focussed on Fulham Road Wing (also known as South Block) and South Parade Wing, plus the small service lane Dudmaston Mews which runs between them. The general consensus (54%) was for retaining the existing buildings or their facades and adding new buildings behind. The architectural merits of the two Wings were seen to be different though, with Fulham Wing judged to be 'tall and opposing' as well as dirty, ugly, depressing and ready for demolition, while South Parade is 'a grand terrace of houses' and more attractive.

There was a joint request by the Royal Marsden Hospital and Institute of Cancer Research for The Royal Brompton Hospital and the Council to resume discussions about whether Fulham Wing (South Block) could be retained for hospital or research use by them. Both the Royal Marsden and the Institute of Cancer Research are constrained by their lack of physical space and are located on either side of Fulham Wing. The Royal Marsden had successfully redeveloped their buildings to provide

new facilities behind existing frontages. These joint discussions would determine whether the existing building could be remodelled for continued healthcare related uses, or whether it remains surplus to any hospital needs.

The Council's Core Strategy policy CK1 was cited as requiring 'a sequential approach' so that this hospital or similar use strategy is considered for land and/ or buildings first, followed by social and community uses, and then any enabling development options. Other ideas proposed for parts of Fulham Wing or South Parade were social, community and educational uses – accommodating some of the free or independent schools in the area, which are also constrained by a lack of space; Christ Church School was mentioned. There was also the idea of a private healthcare facility, which would be both hospital use and enabling.

However, there was concern that land uses with property values lower than residential development would harm the Royal Brompton Hospital's wider ambitions (making the short fall in funding even larger). The hospital has had a long history of funding through development. If it is not retained in its current form, Fulham Wing could be developed with aspects of its building or facades (the gable ends or turrets) retained.

The nuisance caused by the ambulances waiting at the top of Dovehouse Street was raised, as well as their impact on traffic joining Fulham Road, with traffic rat-running and building up along South End Row in front of South Parade.

The Council's general policy emphasis on 'live, work and play' was mentioned, so that the area is balanced with different uses, plus outdoor spaces.

Dudmaston Mews was seen as a street that should remain public (63% in favour), but with ideas about it becoming an alternative type of open space and opening up the rear gardens more. It was noted as having real London street qualities, and so should remain open. The mews idea should be looked at carefully however, as Onslow Gardens mews were not seen as very good. (There were also ideas about glazing over it to form a winter garden.) How it is used and changed will depend upon how the Fulham Wing and South Parade buildings are adapted or redeveloped.

## **5. 1-11 Foulis Terrace**

This Grade II listed terrace of eleven houses, which have been used as Houses in Multiple Occupation (HMOs) by the hospital, are seen as very attractive and an 'excellent terrace of mid nineteenth-century stucco houses'. Respondents were very keen to see it repaired and reinstated as private homes with 81% supporting this principle, and largely in favour of single family homes rather than flats. There was little concern about adding an extra storey to them to help make them more financially valuable, but with guidance needed to ensure that the overall roofline is well designed. The associated reduction in residents' car parking was welcomed.

There was however concern about the loss of affordable housing that this reinstatement would represent and whether the hospital plans would deliver other affordable housing onsite instead to maintain 'a balanced community'. Hospital staff, visiting patients' families, patients or students

should also not be deprived of temporary accommodation as a result of its conversion. The loss of the nursery on site was a concern, although many were not aware of it before.

## 6. 250 King's Road and 117-151 Sydney Street

The consultation also looked at land owned but not occupied by the Hospital Trust and its Charity – principally along Sydney Street and at the corner of King's Road. The southern-most block comprising 250 King's Road and 151 Sydney Street is currently used as small business office space and smaller scaled shops in arcades and cafes, with a courtyard garden. Along Sydney Street is the area occupied by the Chelsea Farmers' Market and the Chelsea Gardener (125), and 117-123 Sydney Street is a Grade II listed terrace of houses, used as shops and cafes at street level. There are two surface car parks (one accessed from Britten Street and the other from Sydney Street), and a route to Dovehouse Green from the Sydney Street surface car park.

The options suggested in the consultation were for a mixed use area, to include similar office space, retail and café space, more courtyard space, plus some additional residential development on upper floors or in single use buildings. Making new links to Dovehouse Green from the corner of King's Road-Sydney Street was also raised.

Of the mix of uses suggested, respondents generally favoured new courtyards and ground floor retail/ café space (43%), with some residential uses on upper floors (32%), and a smaller vote for office space (16%). Residential only buildings were not as popular (9%).

There were also requests to retain the Chelsea Gardener and Farmers' Market, as their amenity and 'open feel' were seen as very important and would be missed. Respondents wanted assurance that the well-maintained buildings on the corner of King's Road and Sydney Street – 'highly characterful and handsome buildings' - would be retained, its courtyard improved, and the two mature sycamore trees in the car park kept, along with the public footpath between Sydney Street and Dovehouse Green. Respondents were generally keen to maintain employment space for the private sector, as well as the hospital itself if needed.

There was an acknowledgement that the Chelsea Farmers' Market was a temporary 'stop-gap' and under used, and that the draft 2004 Planning Brief had already set out the intention to 'restore the area' by building there.

Ideas for redevelopment were for a 'grand space and shops' like Duke of York Square or a public space suitable for children, with small independent shops ('low tech shops', and not supermarkets or chain stores), and located as close as possible to the King's Road to draw in custom – 'with an identity and space that works'. Keeping the courtyard open and linked to Dovehouse Green was favoured (with 76% of votes), but several people mentioned that creating this type of link has been declined in the past by St Luke's Church, for which Dovehouse Green had previously served as the parish burial ground. 117-123 Sydney Street should also be restored with retail/ cafes at street level and residential uses above.

Reinstating a frontage along Sydney Street was supported, with new buildings of the same scale as the terrace of residential terraces opposite. Any development should be sympathetic to Dovehouse Green with no commercial frontages onto it, and maintaining glimpses through to St Luke's Church. Dovehouse Green itself was currently the subject of a 'village green' application, with tree preservation orders being sought. Respondents referred to proposals made by students at the Prince of Wales' School of Architecture in 1990s, which were of a good scale.

## **Appendix A: Responses Received**

The consultation comments received are contained in Appendix A1-3. For privacy reasons, names, contact details and any personal references have been removed.

A1 Table of postal and online responses

A2 Letters and emails received

A3 Minutes from exhibition workshops

## **Appendix B: Exhibition Panels and Leaflet**

B1 A3 folded leaflet as distributed and as available online

B2 A-I Nine Exhibition Panels as displayed and available online