
**JERSEY FUTURE HOSPITAL
CO004 – SITE OPTION REPORT**

**APPENDIX 7 – Town Planning
Assessment**

QUALITY ASSURANCE

Sign off: Kieren Morgan

Position: Principal



Jersey Future Hospital Project

Assessment of planning issues for proposed Options A-D

27th March 2015

The judgments provided by the author are subjective and are based upon available information, with reference to local knowledge and experience.

Option A: Dual Site – Acute Services at General and Ambulatory Care at Overdale

Key features:

Overdale:

- Development retained on existing site – owned and controlled by H&SSD.
- William Knott and Poplars buildings retained.
- New vehicular access onto Westmount Road.
- Location of development likely to require removal of trees on site and located in Westmount Park.
- Maximum number of floors will be two (at 4500mm floor to floor).

General Hospital:

- Development retained on existing site – owned and controlled by SOJ..
- Retention of Granite Building consistent with planning requirement (listed building). Potential loss of existing listed buildings at Edward Place to be discussed with SOJ Planning and Environment.
- Building heights for all new developments) consistent with those noted in the SOC and as advised by SOJ Planning and Environment Department.
- Improvements to townscape and public realm.
- New emergency vehicle access arrangements.

Assessment of key issues:

Overdale	Issue	Comment	Assessment of issues		
			Low	Medium	High
	Policy	No presumption against development in the Green Backdrop Zone. Removal of trees needs to be justified.	<input type="checkbox"/>		
	Access	<p>Assessment needed to understand if the proposed use would result in an increase in trip generation.</p> <p>The road network serving the site is not ideal and mitigation measures are likely to be needed to improve blue light access, routes for emergency vehicles, the operation of junctions and improvement of the pedestrian environment.</p> <p>Connectivity to General Hospital and St Helier are issues that need to be resolved. Transport arrangements could be arranged to avoid peak hours. Parish of St Helier has indicated a requirement for a Hopper Bus.</p> <p>Investigation of sustainable transport choices needed to maximize choices for patients and users. Of all options, this location is likely to generate highest car use. Although staff likely to use hopper service, people who are ill, injured are likely to travel to the site by private car..</p>		<input type="checkbox"/>	

	Parking	Baseline assessment needed to inform parking provision.	<input type="checkbox"/>		
	Landscape & Visual Impact	<p>Loss of trees and height of new buildings.</p> <p>Any new building is likely to be approximately 8.4m (max); this height has the potential to be visible from distant locations from the west, south and east.</p> <p>The position of new buildings will require an assessment of trees in Westmount Park and on site. It is likely that existing trees will need to be removed to ensure a compatible relationship to be achieved.</p> <p>Although there appear to be no protected trees on the site, there is a commemorative oak planted when the hospital was opened, that has ecological and cultural value.</p>		<input type="checkbox"/>	
	Impact on neighbours	The potential for the position and height of new buildings to have an adverse effect upon neighbours will require careful assessment. Locations where maximum building heights are needed will need to take into account the amenities of neighbours.		<input type="checkbox"/>	
General Hospital					
	Policy	No presumption against development.	<input type="checkbox"/>		
	Access	Rationalisation of access arrangements including new emergency vehicle access from Newgate Street. Details need to be agreed with TTS.	<input type="checkbox"/>		
	Parking	Existing parking arrangements retained.	<input type="checkbox"/>		
	Heritage – above ground	Presumption against the loss of potential listed buildings (2,3 & 4 Edward Place). The overall benefit to society likely to outweigh concerns. Changes allow the setting of the existing listed building (part of the General Hospital site) to be improved.	<input type="checkbox"/>		
	Heritage – below ground	Assessment of any below ground heritage assets required.	<input type="checkbox"/>		
	Townscape	Removal of prominent, modern building allows improvement of setting of listed buildings; and strategy to improve public realm to be introduced. Any increase above existing height needs to be tested and justified against policy guidance for St Helier.		<input type="checkbox"/>	
	Employment	Any loss of employment uses needs to be justified – likely to be accepted on basis of over-riding strategic benefit.	<input type="checkbox"/>		

Option B: Single Site Overdale

Key features:

- Includes Jersey New Waterworks site and Field (opposite Overdale Hospital site east of Westmount Road). William Knott and Poplars buildings retained.
- New vehicular accesses onto Westmount Road and Tower Hill.
- Extent of new building occupies most of existing site.
- Location of development will require removal of trees located in Westmount Park and all trees on site.
- Maximum number of floors will be four (at 4500mm floor to floor) with one floor at lower ground (at 4500mm floor to floor).
Car-parking proposed includes drop-off, short stay and disabled parking on site and main visitor parking in the above mentioned Field.

Assessment of key issues:

	Issue	Comment	Assessment of issues		
			Low	Medium	High
	Policy	No presumption against development in the Green Backdrop Zone. Removal of trees needs to be justified. Potential for _small incursion onto land designated as Protected Open Space. Mitigation measures may need to be discussed and agreed with H&SSD and SOJ Planning and Environment. Loss of trees of high quality, commemorative flat oak and group of coastal pines will also need mitigation measures as above. Inclusion of Field to provide car-parking involves development of land designated as Green Zone overall benefits likely to outweigh policy presumption against.	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	
	Access	The proposed use is likely to result in an increase in trip generation. Continuous blue light access needed The road network serving the site is not ideal and mitigation measures are likely to be needed to improve blue light access, routes for emergency vehicles, the operation of junctions and improvement of the pedestrian environment. Connectivity to St Helier and wider island is an issue that will need to be resolved. Investigation of sustainable transport choices needed to maximize choices for patients and users. Of all options, this location is likely to generate highest car use. Although staff likely to use hopper service, people who are ill, injured are likely to travel to the site by private car..		<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	Parking	Baseline assessment needed to inform parking provision. Requires the loss of a green field.		<input type="checkbox"/>	
	Landscape & Visual Impact	This option requires maximization of site occupancy. This will require the loss of trees and has implications for the height of new buildings.			<input type="checkbox"/> <input type="checkbox"/>

Option C: Single Site General Hospital

Key features:

- Includes development on land not owned and controlled by SOJ.
- Loss of listed buildings (2,3 & 4) Edward Place as mentioned above).
- Maximum number of floors will be seven (at 4500mm floor to floor).
- Improvements to townscape and public realm.
- Emergency vehicle access relocated to Newgate Street with extension of same to Kensington Place.

Assessment of key issues:

	Issue	Comment	Assessment of issues		
			Low	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	High
	Policy	No presumption against development	<input type="checkbox"/>		
	Access	Rationalisation of access arrangements including new emergency vehicle access from Newgate Street (as secondary route. Primary route will be via Gloucester Street and Newgate Street). Details need to be agreed with TTS.	<input type="checkbox"/>		
	Parking	Existing parking arrangements retained	<input type="checkbox"/>		
	Heritage – above ground	Presumption against the loss of listed buildings (2,3 & 4 Edward Place as described above). The overall benefit to society likely to outweigh concerns. Changes allow the setting of the existing listed building (part of the General Hospital site) to be improved.	<input type="checkbox"/>		
	Heritage – below ground	Assessment of any below ground heritage assets required.	<input type="checkbox"/>		
	Townscape	New buildings increase the height and mass of built form, which will have an impact upon the townscape character of the site and the surrounding area. The significance of the impact will depend upon design and massing choices. The height will require careful justification as it exceeds guidance provided by Tall Buildings policy and St Helier Design Guidance. However, the proposals are consistent with the guidance stated in the previous SOC as provided by SOJ Planning & Environment. New building arrangements will enable improvements to the public realm, particularly the setting of the Listed Building on site and the frontage of the site with The Parade.	<input type="checkbox"/>		<input type="checkbox"/>

Option D: Single Site Waterfront

Key features:

- Development relies on the acquisition of sites not owned H&SSD.
- Development of part of the site has already been confirmed by a Masterplan approved as Supplementary Planning Guidance. Any change in development proposals will require a change in policy and the approval of the States.
- Further Supplementary Planning Guidance is provided by planning policy 'The Jersey Waterfront 2006'.
- The scheme involves the loss of Les Jardins de La Mer, which is designated as Protected Open Space in the revised Island Plan, 2011 and is one of the island's popular public open spaces.
- Vehicle access from the west requires traffic management interventions to enable vehicles to cross the dual carriageway.
- Part of the site has been identified to provide temporary car-parking during the construction of The Esplanade Quarter Car-Park.
- Maximum number of floors is five (at 4500mm floor to floor).
- Building heights on Les Jardins de La Mer site are restricted by policy provided for by St Helier Design Guidance (2013). Building heights on other parts of the site are restricted to 6-storeys by other SPG.

	Issue	Comment	Assessment of issues		
			Low	Medium	High
	Policy	Development of this site will require new Supplementary Planning Guidance and approval by the SOJ.			<input type="checkbox"/>
	Access	<p>Transport Strategy – ensure that any changes to road system can accommodate predicted vehicle volumes and provide required blue light access. Existing Masterplan has an approved Transport Assessment.</p> <p>The site is close to St Helier Town Centre and Liberation Bus Station. The site has easy access to Primary Route Network.</p> <p>Ensure that proposals are compatible with development proposals for Esplanade Quarter.</p> <p>Access via La Rue de L'Eteau may be restricted as the road can get congested and vehicles currently park illegally, which causes congestion.</p>		<input type="checkbox"/>	
	Parking	<p>Temporary car-parking whilst The Esplanade Quarter is being constructed will need to be maintained or provided elsewhere.</p> <p>Patriotic Street retained for patient and staff parking.</p> <p>Number of spaces provided on site informed by baseline assessment of current transport modes by staff and visitors.</p>	<input type="checkbox"/>		

	Contaminated Land	Legacy issues – cost and remediation implications. Potential risk that contamination found can't be remediated or disposed of – see current local asbestos issue.	<input type="checkbox"/>	<input type="checkbox"/>	
	Flooding	Coastal and combined surface water drainage – further assessment being prepared.			
	Public space	The loss of Jardin de La Mer is likely to be viewed as contentious. Any replacement, which is likely to be on General Hospital site, would have to replicate quality. Question about resources already invested. Building on JdM contrary to St Helier Design Guidance and Policy SC04.			<input type="checkbox"/>
	Townscape Building heights	The Jersey Waterfront 2006 SPG appears to provide for over 6-storeys in area (this excludes Jardin de la Mer) – subject to excellent design – may need to be off-set with provision of public open space. The proposed building height of five floors (at 4500mm floor to floor) exceeds policy guidance and will need to be justified.			<input type="checkbox"/>
	Townscape Vistas	Extending onto Jardin de La Mer site moves the edge of town further west – implications for important vistas and views – any increased height and mass compared with context (over 6-storeys) – loss of views down Gloucester Street and views from Millenium Court (although there are no legal rights to a view)			<input type="checkbox"/>
	Heritage	Any alteration of granite sea-walls, slip-ways may cause concern – there was an objection to impact of Esplanade Quarter upon The Esplanade sea-wall – a Grade 3 Listed structure.	<input type="checkbox"/>		
	Housing	Loss of approved residential development. However there is no identified shortage for this type of housing.	<input type="checkbox"/>		

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26/03/2015

Mr Gardiner
Future Hospital Project
4 Edward Place
The Parade
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Application Number PA/2014/1945

Dear Mr Gardiner

I write further to the Planning Engagement Meeting of 23 February 2015 to provide feedback on the site development options as presented in the Site Appraisal document. I have now had the opportunity to discuss the options with the Director of Development Control and the Director of Policy, Projects and Historic Environment. However, this advice is not based on any discussion with other consultees or third parties that may be engaged as part of any subsequent planning application.

For completeness the options are:

- A. Dual Site. Mixed new-build and Refurbishment;
- B. Overdale. 100% new-build;
- C. General Hospital (C1) + Kensington Place, and (C2) + Lewis Street;
- D. Waterfront. 100% new-build.

ISSUES FOR CONSIDERATION

In order to provide continuity in our feedback we have developed an outline methodology which identifies a set of core issues which can be considered across all the sites. These are summarised below, to give a flavour of the considerations within each of the issues.

There may be other site-specific considerations which are then reviewed as and when they might arise (rather than across all sites). The feedback seeks to concentrate on core planning issues, and so will not go into overtly technical matters (such as drainage) and also avoids straying into aspects of the operational benefits of each option, however, there may be cross-over, for example, between the issues of planning timetable and the overall project delivery.

Planning policy - This considers the zoning of the site in the Island Plan, and identifies the general assumptions within those zones, plus whether there are any site-specific planning policy constraints.

Planning history - This reviews the current use of the site, and considers whether the site has an established planning context which lends itself to the proposed uses.

On-site impacts - This considers the public impacts in the immediate vicinity of the particular site, including visual impact of scale and form, and potential relationships with the established general character of the area.

Off-site impacts - This looks at the same issues as the on-site impacts, but considers the wider context townscape and landscape context in medium and long distance views. The 3d model would be a useful tool to assist on this issue, but this has not yet been made available.

Neighbour impacts - Alongside the issues of public impacts (from the earlier two categories) this provides an assessment of specific relationships with adjacent neighbours, be it from scale / form, or from other potential impacts on amenity, such as increased traffic.

Vehicular access - This looks at the likely adequacy of the local highway network for general vehicular access.

Connectivity - This considers the accessibility by methods other than the private car, and whether the site is well located by reference to the existing spatial distribution of homes, jobs and services in St Helier and how well it relates to existing transport infrastructure.

Biodiversity - The specific ecological interest of each site will not be known until detailed survey work is undertaken, but consideration can be given to the potential for impacts on biodiversity by reference to whether a site is previously developed and the characteristics of the general existing environment.

Heritage impacts - Most development project will have implications for known heritage assets, whether they are on-site or adjacent to the project area.

We have then also included an element of text for "**Other Issues**" which are matters which may be material to individual sites, but nevertheless need to be raised, and are going to be part of the assessment process. These do seek to focus on planning issues, and avoid straying into other 'operational' elements of the wider project considerations.

BASIS OF ASSESSMENT

All planning determinations include a series of issues which have to be assessed individually, and then balanced against each-other to come to an overall conclusion. So, for each of the above issues we have attempted to prescribe a consideration of whether it is likely to be 'positive' to a successful planning outcome, or whether it is likely to be 'negative'. For the purposes of emphasis, we have also included consideration of whether the consideration is likely to have a *strong* impact.

A view is therefore given for each issue as to whether it is likely to be:
Strongly positive / Positive / Neutral / Negative / Strongly negative

The planning risks for each particular option will therefore be the issues which have the most 'negative' considerations, and (in particular) the most 'strongly negative' considerations (which have been highlighted in red on the attached overview sheets). However, it may be in an overall planning assessment the negative side of a balanced determination might be off-set by a series of strongly positive feedback on other issues. It is therefore generally the extreme of 'strongly negative' feedback which needs most particular attention, hence being highlighted.

SUMMARY

The assessment process is set out on the attached sheets (one per option) and identifies that Option D (the Waterfront) has numerous 'strongly negative' issues, representing considerable risks. Particularly, in relation to the scale of the buildings, the loss of strategically important public open space and the disruption to the existing Masterplan. On the basis of the current planning policy context, this option would be extremely difficult to support.

The scale of the buildings at Overdale and the need to expand from the existing footprint equate to a significant visual impact and means that Option B (100% new build at Overdale) is also likely to be very difficult to support from a planning perspective. The requirement to address issues of accessibility, from an operational perspective, also pose other issues of capacity for the local transport infrastructure and ease of access for the intended user, given its peripheral position away from existing transport services and established routes.

In then looking at Option A (dual site) some of the planning challenges posed by development at Overdale are mitigated by a reduction in scale, and reduced functionality at a more peripheral location may be off-set by the enhanced locational benefits of continuing to focus some development at the existing General Hospital Site.

Moving to focus all the development at the existing General Hospital site would result in larger buildings but in a location that is already well integrated in an urban context and existing transport infrastructure, with the potential to improve local routes and junctions. The principal planning challenges of intensifying the use of the existing site and expanding its footprint to varying degrees are represented by; the increased scale and mass of the resultant buildings and their impact for adjacent residents and the character of the local streets and this part of town; and the loss of other land uses. The loss of tourism uses is not considered particularly significant. The loss of residential use is more challenging, when set against the need for homes and the impact of this upon the local community. The quality and quantum of any such loss has not, however, been specified at this stage. The heritage impact of the proposals for the existing site are mixed, with the potential to improve the frontage setting of the original 1860 Hospital whilst creating a more challenging relationship with bigger, taller buildings behind. Options to expand the site of the existing hospital result in the potential loss of three (Option C1) or seven (Option C2) other heritage assets, with impacts on the urban context of others.

On the basis of the enclosed summary of the planning issues, it can be seen that all the sites contain significant planning risks, but we consider that those which are most likely to be supported are Option C1 (to Kensington Place); possibly Option C2 (to Lewis Street) dependent upon the impact on housing loss and the local community; or Option A (dual site).

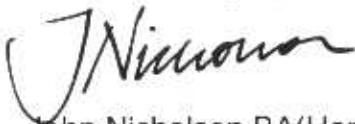
In relation to timetable, with the exception of Option D (The Waterfront), there is little between the options. Option D is likely to require a great deal of preliminary planning policy work to de-couple the current Esplanade Masterplan, and this is likely to be a highly political process as it has much wider planning issues to consider than 'simply' the delivery of a new hospital. It is likely to be linked to the emerging Future St Helier initiative, primarily in relation to the question of increased connectivity between town and the Waterfront, as the works necessary to deliver the new Hospital to this site may mean the road could not be sunk. It is unlikely that the masterplanning work to resolve the implications for the wider Esplanade project would take anything less than 6

months, and may be significantly longer than this. All of this would be preliminary work, ahead of the submission and determination of a planning application.

Considering the other options, each will require extensive pre-application work, across the suite of technical disciplines, and all options would also need an Environmental Impact Assessment. In relation to determination, it would not be realistic to assume a 'standard' determination (13 weeks) and a period of 4 to 6 months should be timetabled. You should also be conscious that there is the potential for the Minister to order that the determination of any application should be made after a Public Inquiry. This would occur when the Minister considered that the development would be likely to have a significant effect on the interests of the whole or a substantial part of the population. There is a strong chance that this application would warrant a Public Inquiry and whilst 6 to 9 months would remain a reasonable timetable for determination by this route, you should be aware that the process is considerably different to that of a standard application.

I trust this is set out in a format which you find useful and after consideration of this advice we remain open to discussing any of the content with you.

Yours sincerely



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The content of this correspondence and any other advice from an Officer or the Department is given in good faith, but **without prejudice** to the formal consideration of planning matters and any future decision. These decisions include, but are not limited to, formal planning applications. In all cases, formal decisions are subject to the full planning process, which may include public and statutory consultation. Consequently, the final decision on any planning matter may not reflect the initial advice given. The purchaser and/or vendor of a property transaction should not rely upon any such informal advice

OPTION A

Dual Site. Ambulatory care at Overdale, and Acute at General Hospital site.

<p>PLANNING POLICY Hospital – positive Overdale – negative</p>	<p>The redevelopment of the General Hospital site is focusing development in the Built-Up Area. Whilst the Overdale site is also in the Built-Up Area, it is peripheral to town, separated by local topography. Its peripheral location is manifest by its location in the Green Backdrop Zone and part of its site envelope being designated Protected Open Space.</p>
<p>PLANNING HISTORY Both - positive</p>	<p>Both sites have an established healthcare history.</p>
<p>ON-SITE IMPACTS Hospital - neutral Overdale - negative</p>	<p>The General Hospital site will continue to be intensively used whilst Overdale will have a larger quantum of buildings and greater intensity of use.</p>
<p>OFF-SITE IMPACTS Hospital – neutral Overdale – negative</p>	<p>The scale of development at the Hospital is similar to the height / parameters of the existing context, with some increase in mass on The Parade. At Overdale a 2-to-3 storey development is likely to be visible on the escarpment in distant views from the west / south, including strategic approaches to town: these might be, at least in part, mitigated.</p>
<p>NEIGHBOUR IMPACTS Hospital – neutral Overdale - negative</p>	<p>Development on the General Hospital site is largely within the existing campus and has limited direct relationships with neighbours. There is a small expansion of the site in the NE corner together with an increase in massing of buildings here which will alter relationships with neighbours and impact on approaches into the town. At Overdale there are residential neighbours in close proximity, who are likely to suffer some impacts.</p>
<p>VEHICULAR ACCESS Hospital – positive Overdale – strongly negative</p>	<p>The General Hospital is part of the established highway network with generally good road links whilst at Overdale the position on the ridge above St Helier means all vehicular routes are heavily compromised.</p>
<p>CONNECTIVITY Hospital – positive Overdale – strongly negative</p>	<p>The General Hospital is in the central urban area, well located to where people live and work: it enjoys good integration with existing transport infrastructure and is generally accessible by foot, bike and bus. Overdale is physically remote and has compromised infrastructure for all forms of travel. It would require a dedicated journey and networks would need to be enhanced to cater for the likely increase in trip generation: this would also have implications for infrastructure, and its ability to cope, in the wider locality.</p>
<p>BIODIVERSITY Hospital – neutral Overdale – negative</p>	<p>The General Hospital site is entirely previously-developed land but the project would see the Overdale site extend into the grassland and treed areas around the present buildings.</p>
<p>HERITAGE IMPACTS Hospital – negative Overdale - neutral</p>	<p>The remodelling of the General Hospital would involve clearing the 1960's block, benefiting the setting of the Grade 1 1860 Hospital and Entrance Lodge. Limited expansion to the NE results in the loss of three heritage assets at Edward Place. Heritage impacts at Overdale would likely be limited to the setting of Thorpe Cottage on St John's Road.</p>
<p>OTHER ISSUES neutral</p>	<p>The General Hospital is within an Area of Archaeological Potential.</p>

OPTION B**Overdale. 100% new-build.**

PLANNING POLICY strongly negative	Whilst Overdale is in the Built-Up Area, it is peripheral to the town and is separated by local topography. Its more peripheral location is manifest by its location in the Green Backdrop Zone and part of its site envelope being designated as Protected Open Space. The new building is likely to have significant incursions into these areas, and car parking is likely to be required in Field 1551 on the eastern side of Westmount Road, which is Green Zone.
PLANNING HISTORY neutral	The site has an established healthcare history, but not for this intensity of use.
ON-SITE IMPACTS strongly negative	These are likely to be severe, both from the scale and the intensity of relocating the entire hospital functions to this site.
OFF-SITE IMPACTS strongly negative	Bearing in mind the scale of the structures and the site position on a visually prominent promontory, it is considered that the visual impact of the new building would be significantly detrimental, across local, mid-distance and longer views.
NEIGHBOUR IMPACTS strongly negative	There are residential properties in close proximity and the scale and intensity of the development are likely to result in significant harm to their amenities.
VEHICULAR ACCESS strongly negative	Given the position of Overdale, on the ridge above St Helier, all vehicular access routes are heavily compromised. There would likely be significant adverse impact on local transport infrastructure and capacity.
CONNECTIVITY strongly negative	Overdale is physically remote from the centre of St Helier and access would usually require a dedicated journey by car given that foot, bike and bus options are challenging and consequently limited.
BIODIVERSITY strongly negative	The proposed footprint of the Overdale building would extend significantly into presently undeveloped grassland and treed areas around the current buildings.
HERITAGE IMPACTS negative	Heritage impacts at Overdale would likely be limited to that upon both the setting of Thorpe Cottage (LBG3) on St John's Road and, more significantly, upon that of Westmount Gardens (potential listed place Grade 2).
OTHER ISSUES positive	The transfer of all the hospital functions to the Overdale site would leave the opportunity of a development site at the existing General Hospital.

OPTION C1**General Hospital + Kensington Place**

PLANNING POLICY positive	This option would be redevelopment on the existing General Hospital site, with an extension on the hotel sites, through to Kensington Place. This is all within the Built-Up Area and spatially acceptable.
PLANNING HISTORY positive	The majority of the site has a healthcare history and the hotels on Kensington Place are known to have development potential, being the subject of a previous application (withdrawn).
ON-SITE IMPACTS negative	The proposal would result in buildings from 5 to 7/8 storeys high, which is significantly larger than the majority of the existing buildings and will alter the local context.
OFF-SITE IMPACTS negative	The larger buildings will form a cluster and there is already a tall building on site, but the increase in scale and overall mass will be clearly distinguishable in views from higher land around St Helier; on approaches into the town; and from adjacent streets, particularly Gloucester Street and Newgate Street.
NEIGHBOUR IMPACTS strongly negative	The scale of the buildings on the extended site is likely to have a significant damaging effect on the amenities of neighbours who would remain in properties on the western side of Kensington Place.
VEHICULAR ACCESS positive	This option is likely to introduce a road link from Gloucester Street to Kensington Place, enhancing general vehicular accessibility.
CONNECTIVITY positive	The site is well placed to link to the homes and services within central St Helier: it enjoys good integration with the existing transport infrastructure and is generally accessible by foot, bike and bus. Enhancing the permeability of Kensington Place would be a positive outcome of this option, of benefit to pedestrians and cyclists.
BIODIVERSITY neutral	The site is previously developed and there are not considered to be any adverse impacts emerging.
HERITAGE IMPACTS negative	The demolition of the 1960's block is likely to be beneficial to the original 1860 Hospital: the impact of a greater mass of development to the rear of this building will, however, have an adverse impact upon its setting and relationship with other buildings. Expansion of the site in the NE would likely involve the loss of three heritage assets (pLBG3) on Edward Place.
OTHER ISSUES negative	This option obviously requires the acquisition of buildings outside the current General Hospital campus. The existing General Hospital sits within an Area of Archaeological Potential.

OPTION C2**General Hospital + Kensington Place & Lewis Street**

PLANNING POLICY negative	This option would all within the Built-Up Area and spatially acceptable, but would involve the loss of some residential properties between Kensington Place and Lewis Street: the quality and quantum of this is not presently known.
PLANNING HISTORY negative	The main element of the site has a healthcare history and the hotels on Kensington Place are known to have development potential, however, group of buildings to Lewis Street are predominantly residential.
ON-SITE IMPACTS neutral	The proposal would result in buildings from 5 to 6 and 7 storeys high, which is larger than the majority of the existing buildings but will sit reasonably comfortably in their immediate context: the impact of this is less severe than Option C1.
OFF-SITE IMPACTS negative	The larger buildings will form a cluster and there is already a tall building on site, but the increase in scale will be clearly distinguishable in views from higher land around St Helier: the impact of this is less severe than Option C1.
NEIGHBOUR IMPACTS strongly negative	The scale of the buildings on the extended site is likely to have a significant damaging effect on the amenities of neighbours who would remain in properties on the western side of Lewis Street.
VEHICULAR ACCESS positive	This option is likely to introduce a road link from Gloucester Street to Kensington Place, enhancing general vehicular accessibility.
CONNECTIVITY positive	The site is well placed to link to the homes and services within central St Helier: it enjoys good integration with the existing transport infrastructure and is generally accessible by foot, bike and bus. Enhancing the permeability of Kensington Place would be a positive outcome of this option, of benefit to pedestrians and cyclists..
BIODIVERSITY neutral	The site is previously development and there are not considered to be any adverse impacts emerging.
HERITAGE IMPACTS negative	The demolition of the 1960's block is likely to be beneficial to the original 1860 Hospital: the impact of a development to the rear of this building will have an impact upon its setting and relationship with other buildings, but to a lesser extent than Option C1.. Expansion of the site in the NE would likely involve the loss of three heritage assets (pLBG3) on Edward Place and four (pLBG3) in Kensington Place.
OTHER ISSUES strongly negative	This option obviously requires the acquisition of a significant number of residential properties outside the current General Hospital campus: this has an adverse effect on the number of homes that might be lost, although no information is available about the quantum or standard of accommodation currently provided here; and negative implications from the disruption and displacement of the local community.

OPTION D
Waterfront

PLANNING POLICY strongly negative	Whilst in the Built-Up Area, the site would involve the loss of the Jardins de la Mer, which is Protected Open Space. It would also take land which is proposed to be developed for alternative uses by the States-endorsed 2008 Esplanade Quarter Masterplan, including residential, tourism and public open space uses.
PLANNING HISTORY strongly negative	The majority of the site is already committed for alternative uses, including temporary replacement car parking which is integral to the Esplanade Quarter office project, plus the Zephyrus and Westwater residential schemes.
ON-SITE IMPACTS strongly negative	The scale of the buildings would be significant, and unrelated to the existing forms, or those envisaged by the Masterplan. It would also fail to deliver public amenities envisaged by the Masterplan, including significant public realm enhancements. It would result in the direct loss of existing public space provided by Jardin de la Mer.
OFF-SITE IMPACTS strongly negative	The scale and form would have the visual and physical effect of cutting-off St Helier from the sea, and the visual impact from around St Aubins Bay would be severe for long views and strategic approaches to St Helier.
NEIGHBOUR IMPACTS negative	Residential properties are generally remote, but there will be negative impacts, principally related to outlook, as a result of the scale, on both Marina Court and Century Buildings.
VEHICULAR ACCESS negative	The dual-carriageway means that direct access will be difficult to achieve without significant remodelling of the infrastructure. There are also like to be increased flows on the routes around the harbour.
CONNECTIVITY positive	The site is well located with reference to the homes and services within the central area of St Helier. Local severance of the site from the existing town would need to be addressed, as identified in the Waterfront Masterplan.
BIODIVERSITY neutral	The land is previously developed and there are no known issues in relation to habitat loss.
HERITAGE IMPACTS negative	The scale of the proposed buildings is so large that they may be considered to have a negative impact on the setting of Elizabeth Castle in mid-distance views of the harbour area.
OTHER ISSUES strongly negative	This is reclaimed land and there may be contaminated land issues to resolve. The water-side location may make the site vulnerable to flooding in the context of climate change. The existing General Hospital is released as a development site. The planning policy position may take many months to resolve, due to the wider 'opportunity-cost' implications of this option.