



Statement

Our ref 12015/DG/PS
Date 10 October 2011
To Caroline Caldwell, Programme Officer / Elizabeth Fieldhouse DipTP, DipUD,
MRTPI
From Nathaniel Lichfield & Partners
Copy West London Mental Health Trust

**Subject St Bernard's Hospital, Uxbridge Road, Southall - Statement
addressing Matters and Issues relating to the London Borough of
Ealing's Core Strategy
Representation No. 12 – Matter 3 (relating to representations
numbers 52, 56 and 59)**

1.0 Introduction

1.1 This Statement has been prepared on behalf of the West London Mental Health NHS Trust (WLMHT) to address a number of matters and issues raised by the Inspector responsible for reviewing the London Borough of Ealing's (LBE's) Core Strategy.

1.2 Within Section 2, we provide some background in respect of the WLMHT earlier representations and take the opportunity to update the Inspector in light of some recent and important changes made by the WLMHT. Within Section 3 we specifically consider matters raised by the Inspector in light of these changes and where it is prudent to do so.

1.3 These representations should be read in conjunction with representations submitted in November 2010.

2.0 Background

2.1 On behalf of the West London Mental Health NHS Trust (WLMHT), Nathaniel Lichfield & Partners (NLP) submitted representations to the LBE in respect of its Development Strategy (Final Proposals) and Development Management (Initial Proposals) in November 2010. At the same time it submitted a New Site Form relating to surplus land available for redevelopment at the St Bernard's Hospital estate, Uxbridge Road, Southall.

2.2 Within these representations it was explained that the WLMHT is required by its Commissioners to deliver a new Medium Secure Unit at St Bernard's Hospital by April 2015. To fund this it is necessary for the WLMHT to dispose of

redundant parts of its estate, with the benefit of planning permission and listed building consent where appropriate.

- 2.3 This includes surplus land and buildings to the north of the estate along the Uxbridge Road (the Uxbridge Road Site), where a residential led development is proposed, and the conversion of the former asylum building and associated buildings to residential use.
- 2.4 At that time it was intended that the above mentioned development would come forward in three phases as vacant possession was secured, i.e. the Short Term (2010 – 2015), Medium Term (2015 – 2025) and Long Term (2025 onwards). The WLMHT has now reconsidered its phasing strategy based on a detailed analysis of how it can continue to provide for the needs of its patients whilst decanting out of out-dated accommodation to allow redevelopment or re-use. It is, therefore, now in a position to bring the redevelopment proposals forward earlier than previously advised. The Uxbridge Road Site and the western and central core of the asylum building will be vacant by 2015 and the eastern end of the asylum building will be vacated by April 2017.
- 2.5 Pre-application discussions with the Council and other stakeholders are at an advanced stage in respect proposals for the Uxbridge Road site and over recent weeks, discussions have commenced in respect of proposals for the conversion of the asylum building to residential use. Approximately 170-180 units are proposed for the Uxbridge Road Site and the asylum building is being assessed as being capable of delivering some 310 residential units; some 480-490 residential units in total (near 500 residential units). Both planning applications are due to be submitted in February/March 2012. The site area is over 5 hectares in area.
- 2.6 In light of the above, part of the St Bernard's Hospital estate should be identified in the Core Strategy as a Potential Housing Site which is capable of delivering approximately 500 residential units for the Borough, the vast majority of which will be within the first five years of the Plan period.

3.0 **Matter 3 – Housing (relating to representations numbers 52, 56 and 59)**

Question 1: Does the CS make appropriate provision for the effective delivery of new housing, including affordable housing, in terms of the amount, distribution, location, phasing, size and tenure of new housing development, having regard to national policy, and is it fully justified and supported by an up-to-date, credible and robust evidence base?

- 3.1 The Core Strategy makes appropriate provision for the effective delivery of new housing and it is appropriate to direct this growth to strategic corridors within the Borough. However, the WLMHT is concerned that the identified Potential Housing Sites within the Core Strategy requires updating to reflect the availability of significant land for housing at the St Bernard's Hospital estate.

- 3.2 To make the Core Strategy sound in this respect, the Council should demonstrate that all sites put forward, using a New Site Form, in November 2010, have been considered to ascertain the contribution that they could make towards the delivery of housing in the Plan period and where prudent reflected in the Core Strategy.
- 3.3 The above-mentioned site is not acknowledged in the Strategic Housing Market and Needs Assessment 2009 because the WLMHT was not in a position to confirm its intentions when this document was first consulted on. The Council was notified of this site in November 2010 and a New Site Form submitted, albeit, the phasing of the proposed development was different for reasons explained above. Despite this, the site does not appear to have been reflected in the Core Strategy.
- 3.4 Some 5 ha of land are identified for redevelopment at the St Bernard's Hospital estate. This represents a large site that is capable of delivering a significant quantum (c. 500 units) of new housing for the Borough, the vast majority of which will be within the first five years of the Plan period. As such, it is appropriate that this site is identified as a Potential Housing Site and the housing trajectory updated accordingly.

Question 2: Are there sufficient identified sites to demonstrate that there is an identified 5 year supply plus an additional 20%. Large and small sites need to be identified; if they are to come from windfall sites the provisions of PPS3 would not be met. Is there a reliance on garden land to meet the provision?

- 3.5 As above.

Question 3: Key policy 1.2(a) sets a 50% affordable housing target is this viable on all sites?

- 3.6 Policy 1.2(a) refers to “**at least 50%**” (NLP emphasis) of housing being affordable, suggesting that a higher provision may be sought.
- 3.7 The London Plan no longer sets an affordable housing target but instead advises Local Planning Authorities to set their own targets. The policy will therefore require updating to reflect this.
- 3.8 Given current economic conditions, which may or may not prevail during the early part of the Plan period, and in light of restricted grant funding, it would seem highly unlikely that such a high provision of affordable housing would be viable. In relation to the WLMHT's redevelopment proposals, a provision of 50% affordable housing would render the development unviable, particularly given the extent of listed buildings at the estate. Fundamentally, this would undermine the development and the WLMHT's ability to fund the delivery of new and essential clinical services elsewhere on the estate.

3.9

The wording of this policy is wholly inflexible and fails to take account of any external factors which may impact on viability, which may include economic conditions, a lack of grant funding and/or site specific conditions such as ground contamination, other such remedial works or unique conditions. In order for the policy to be sound, it is critical that the level being sought is realistic for the lifetime of the Plan period. As currently drafted the policy is onerous and lacks flexibility and will therefore actually inhibit development and achievement of the Core Strategy's objectives.