

Statement on behalf of Origin Housing for  
Stage 2 Matter 11 and Stage 3 Matter 16.  
Stevenage Borough Council  
Local Plan Examination

February 2017

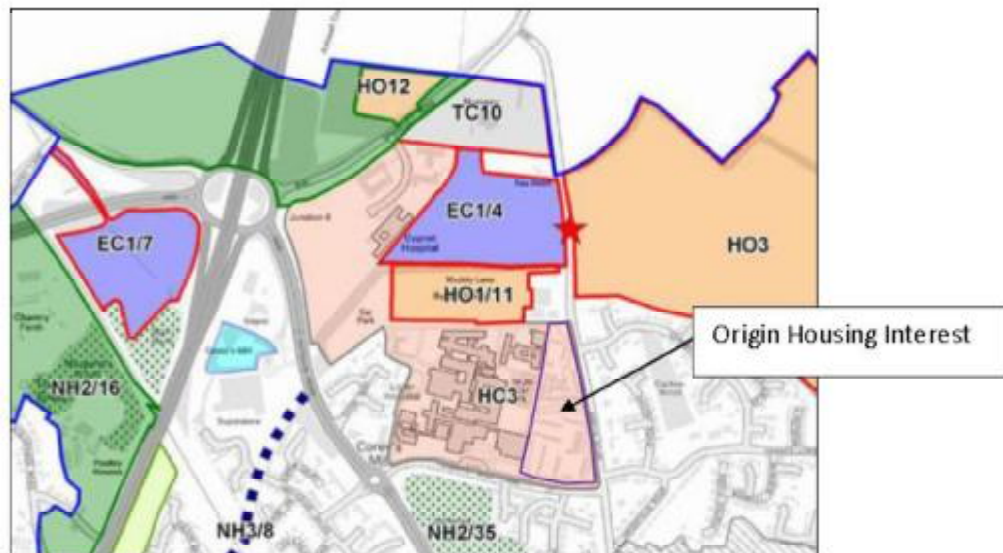
## **1. INTRODUCTION**

- 1.1 This Statement complements our original representations on behalf of Origin Housing to the draft Local Plan.
- 1.3 Origin Housing owns the land to the east of the Lister Hospital. It is all held on a long lease and comprises a range of residential accommodation including studios, flats and houses.
- 1.4 Origin works in close collaboration with the hospital to provide a range of flexible residential accommodation primarily (though not exclusively) let to staff working at the hospital. These homes cater for a wide range of household from single people to families with children and for a wide duration of occupation from a matter of weeks to years.
- 1.5 Origin Housing objects to the proposed allocation of its land as HC3 for Class D1 or C2 Health Care uses.
- 1.6 As explained at our meeting with the Borough Council on 29 April 2016, attended by representatives of both Origin Housing and the Hospital, the proposed designation of Origin Housing's residential accommodation in the draft Local Plan as HC3 for Class D1 or C2 Health Care uses is unacceptable for the following reasons:
  - The lawful planning use of the Origin accommodation is C3 residential. This cannot be changed by a Local Plan.
  - It is inconsistent with the constructive pre-application meetings with the Borough Council planning department in 2015 prior to the draft Local Plan. Origin Housing proposes a residential redevelopment with affordable key work homes for primarily for rent and some for sale.
  - Origin Housing has a close collaboration with the Lister Hospital Trust and is discussing occupation of the proposed residential

accommodation by hospital related residents. This would be prejudiced by the draft Local Plan.

1.7 Unless amended, the consequence is that the land is effectively blighted. Neither additional health facilities would be provided nor much needed upgraded and increased residential accommodation for occupation by Hospital staff.

1.8 There is a simple and effective solution viz., the boundary of HC3 should be revised to exclude Origin's land.



1.9 This was explained in the original representations to the draft Plan, a meeting with the Borough Council on 29 April 2016 which was also attended by a representative of the hospital Trust and confirmed in a letter to the Borough Council. (Appendix 1).

## 2. MATTER 11 – COMMUNITY FACILITIES

2.1 The Stage Matters and Questions poses the following questions:

1. *“What consideration has been given to the increase in demand for medical facilities as a result of the increase in population during the Plan period?”*
2. *What new facilities are proposed and what is the justification for them?*
3. *How will they be funded and is any of the funding in doubt or subject to viability testing?*
4. *Is there a need for any additional faith/spiritual facilities?*
5. *Is the relocation of the Arts and Leisure centre justified?*
6. *What consideration has been given to the increase in demand for educational provision as a result in the increase in new homes and increased population during the Plan period and what increase in places is planned?*
7. *Is the proposed provision justified and based on a sound evidence base?*
8. *Should the Plan make provision for a hospice as suggested by some representors?”*

2.2 None of these is directly relevant to Origin’s representations.

### **3. MATTER 16 – HOUSING SITE ALLOCATIONS**

3.1 The Stage Matters poses the following questions:

1. *“Are the proposed housing site allocations appropriate and justified in the light of potential constraints, infrastructure requirements and adverse impacts?”*
2. *Are the assumptions regarding the capacity of the sites justified, what is this based on?*
3. *What is the basis for proposing housing on areas of public open space and sites currently in recreational use? What is the situation regarding the adequacy of open space/recreational facilities in the*

*areas concerned? How would the proposed housing sites affect this? Is the approach justified and is it consistent with the NPPF?*

*4. Are the detailed requirements for each of the allocations clear and justified? Have site constraints, development mix and viability considerations been adequately addressed? Are the boundaries and extent of the sites correctly defined?"*

3.2 Origin's representations relate to Question 1.

3.3 Origin's residential accommodation is included within the Health Campus as defined on the draft Proposals Map with the policy and justification set out in Chapter 11.

3.4 The proposed policy is HC3: The Health Campus.

*"Planning permission will be granted for appropriate Class D1 or C2 healthcare uses. Other use classes will be permitted where they provide ancillary facilities which support the site's principal function."*

3.5 It goes on to say that:

*"Other uses will not be permitted unless it can be satisfactorily demonstrated that the land is no longer required to meet long-term healthcare needs."*

3.6 The justification for the policy is:

***11.18** The Lister Hospital provides the main focus of the Health Campus. It was opened in 1972 and offers general and specialist hospital services for people across Hertfordshire and south Bedfordshire. A number of services have been centralised onto the Lister Hospital site in the last few years. Many of these have moved from the Queen Elizabeth II Hospital in Welwyn Garden City. This includes accident and emergency, maternity, acute elderly and acute mental health units.*

***11.19** This has led to significant development, transforming the existing hospital site. Around £170 million has been invested. Improvements include: a new surgical unit (called the Treatment Centre), an expanded maternity unit, a new multi-storey car park and major changes to the emergency and inpatient services. The Lister Hospital is the town's largest employer, providing more than 2,700 jobs.*

*Ensuring a successful future for the hospital is critical to the future of the town.*

**11.20** *Policy HC3 safeguards the existing hospital site. This will allow the Lister Hospital to operate successfully throughout the plan period to 2031.*

**11.21** *The hospital is supplemented by additional healthcare facilities to the north, which provide specialist care homes and mental health services.*

**11.22** *There is a small parcel of undeveloped land within this campus, adjacent to the A602. Development here will be restricted to healthcare related uses, which complement the existing facilities.”*

- 3.7 As already explained Origin Housing opposes the allocation of its residential accommodation for Class D1 or C2 use. The reasons are amplified below.

**The Lawful Planning Use is C3 Residential.**

- 4.2 The lawful use of Origin's accommodation is C3 residential.
- 4.3 The lawful use of any site or property cannot be changed unilaterally by a local planning authority or by a notation on a Proposals Map of a Local Plan.
- 4.3 Similarly an application to replace residential accommodation with new residential accommodation could not, in principle, be reasonably refused by the Borough Council simply because it might prefer the site put to a different use.
- 4.4 For this reason alone, the designation should be deleted.

**The Designation is inconsistent with Origin's Constructive Pre-application meetings with the Borough Council Planning Department.**

4.5 Origin Housing proposes a residential redevelopment with homes for sale and affordable tenures. The sketch scheme shows:

- A perimeter zone of higher villas and blocks which relate to the hospital and perimeter roads. Keyworker accommodation and a crèche are proposed close to the hospital. Apartment blocks also would provide a natural screen for the residential development from Corey's Mill Lane to the south which is heavily trafficked.
- A house zone with 63 homes. The housing zone is separated by a strong green buffer between the blocks and predominantly placed along North Road where there are existing large houses. These range between two and three storey buildings, formed as short terraces or courtyards and formed as larger prominent properties reflecting scale and character of prominent houses in the area. hospital.
- Apartment blocks with 139 units. Higher density apartments would be formed along Corey's Mill Lane to the south and along the main hospital access road to the west. These range between five and seven storeys.
- Keyworker Accommodation with some 246 rooms in 1, 2 & 3 bedroom flats and 4 room clusters.

4.6 An element of private housing for sale is required as an integral part of the scheme to render it viable. However, the proposed affordable element will meet or exceed the Borough Council's policy requirement. If necessary, a financial appraisal will be submitted with the planning application.

- 4.7 Several pre-application meetings have taken place with the Borough Council's Planning Department, most recently in July and August 2015. No objection was raised to the principle of Origin's proposals. The designation of Origin's Land and accompanying policy HC3 in the draft Local Plan were therefore unexpected.

**It would prejudice the Provision of New Residential Accommodation for the Lister Hospital.**

- 4.8 Origin Housing has a close relationship with the Lister Hospital and is in continuing discussions with the Trust on the potential occupation of the proposed residential accommodation by staff.
- 4.9 This is confirmed in the representations by Barton Wilmore on behalf of the Trust:

*"The housing stock is somewhat dated and the Trust and Origin are exploring options for redevelopment. Whilst the density of the residences could be increased the demand for ancillary accommodation is likely to result in very little surplus land for healthcare purposes."*

- 4.10 The demand for accommodation from hospital staff and occupancy levels are very high. There is a waiting list. The Hospital advises that with expansion of services, there is likely to be an increase in staff numbers and corresponding demand for residential accommodation.
- 4.11 This collaboration would be prejudiced by the draft Local Plan. The consequence for the Borough Council would be counter-productive. Neither additional health facilities would be provided nor much needed upgraded and increased residential accommodation for the Hospital.
- 4.12 Origin Housing appreciates the Hospital Trust's need for new facilities. Accordingly, it supports the recommendation of the Trust that an area



of the rugby club site of approximately three acres should be allocated for hospital expansion.

29 April 2016  
JMD 29 April 16 to SBC



Ms S Barker  
Principal Planning Officer  
Stevenage Borough Council  
Daneshill House  
Danestrete  
Stevenage SG1 1HN

John Dyke  
E: [jdyke@savills.com](mailto:jdyke@savills.com)  
DL: +44 (0) 20 7409 8895

33 Margaret Street  
London W1G 0JD  
T: +44 (0) 20 7499 8644  
[savills.com](http://savills.com)

Dear Ms Barker

#### **ORIGIN HOUSING REPRESENTATIONS**

Thank you for meeting with us and Richard Harman from the NHS Trust today..

As we explained, the designation of Origin Housing's residential accommodation in the draft Local Plan as HC3 for Class D1 or C2 Health Care uses is both inaccurate and counterproductive.

Unless amended, the consequence is that the land is effectively blighted. Neither additional health facilities would be provided nor much needed upgraded residential accommodation for the Hospital Trust.

We look forward to your response but reiterate that there is a simple and effective solution viz., the boundary of HC3 should be revised to exclude Origin's site, as proposed at today's meeting by both Origin and the NHS Trust.

Yours sincerely

A handwritten signature in black ink, appearing to read "John M Dyke", with a long horizontal flourish extending to the right.

John M Dyke  
Director