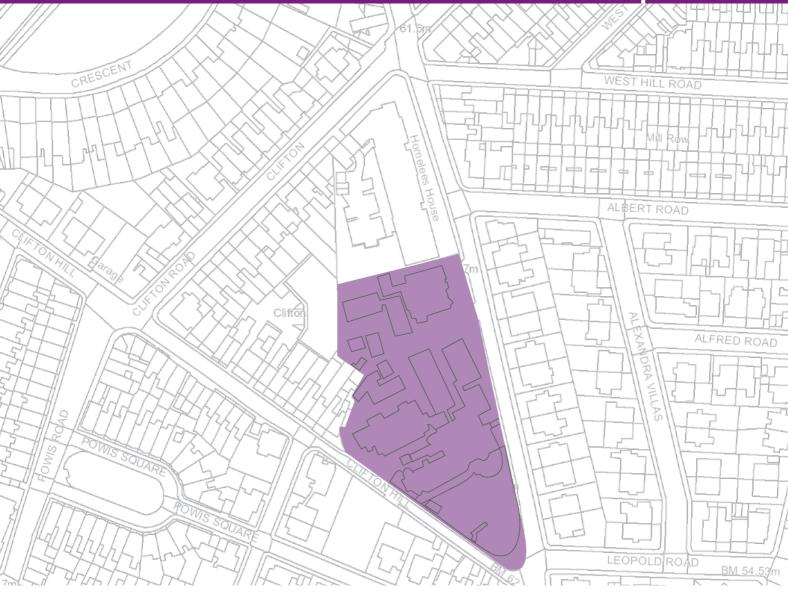
# Planning Brief

March 2010

## Former Royal Alexandra Hospital site



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## 1 **Executive Summary**

#### **2** Status of the Brief

## 3 Introduction & background

- 3.1 Introduction
- 3.2 Background
- 3.3 Stakeholder consultation
- 4 The site
- 4.1 Site description
- 4.2 Surrounding area
- 4.3 Former Royal Alexandra Hospital buildings
- 4.4 Planning history
- 4.5 Inspector's decision

## 5 **Conservation assessment**

- 5.1 Conservation Area Character Statements
- 5.2 Conservation assessment
- 5.3 Rankings for the retention of buildings
- 5.4 The options

## 6 **Deliverability**

- 6.1 Why deliverability is important?
- 6.2 Land-use
- 6.3 Assumptions
- 6.4 Sales revenue and build costs
- 6.5 Profit
- 6.6 Viability assessment
- 6.7 Preferred development approach

## 7 Development principles & guidance

- 7.1 National and local planning policy
- 7.2 Acceptable uses of the site
- 7.3 Unacceptable uses of the site
- 7.4 Design and infill development
- 7.5 Architectural features
- 7.6 Housing
- 7.7 Parking
- 7.8 Pedestrian and cycle facilities
- 7.9 Open space, outdoor recreation space and landscape
- 7.10 Trees and ecology
- 7.11 Sustainability
- 7.12 Section 106 contributions

#### 8 List of relevant documents

Disclaimer: This is a current document which will be reviewed in two years time

## Executive summary

This Planning Brief provides up to date planning guidance concerning acceptable development on the former Royal Alexandra Hospital site. The content of the Brief will be used in the assessment of future pre-application proposals and planning applications and is a material planning consideration in the determination of planning applications relating to the site.

**Section 3** provides the background to the preparation of the Brief and outlines the process of stakeholder consultation which has been undertaken in relation to the development principals enshrined within the Brief as well as the council's land-use and design options.

**Section 4** provides details on the site, including a description of the former hospital buildings and the characteristics of the surrounding area. It also summarises the planning history of the site and the Inspector's Appeal decision.

**Section 5** of the Brief outlines the results of an up-to-date conservation assessment of all the buildings on site. It suggests a ranking for the retention of each of the buildings, based on their architectural merits. The section also provides feedback from the Conservation Advisory Group (CAG) on the conservation assessment and the council's land-use and design options.

**Section 6** focuses specifically on deliverability. This is in recognition of the previous planning Inspector's observation that a viable scheme on the Royal Alex site is needed to prevent the physical deterioration and ongoing underutilisation of land and buildings, with the attendant harm to the character and appearance of the conservation area. The section summarises the findings of the District Valuer's financial assessment of the council's five land-use and design options. It also explains the role of market forces such as local market conditions, construction costs, sales and revenue etc. and their impact on deliverability.

**Section 6.7** identifies the preferred development approach which requires the retention of the principal hospital building in any proposals for the redevelopment of the site. Material considerations in arriving at the preferred development approach were:

- the Inspector's recent Appeal Decision;
- the results of the community consultation; and
- the conservation assessment and the need to preserve and enhance the character and appearance of the Conservation Area.

The Brief clarifies that the financial viability of proposed development is also a material planning consideration in the determination of planning applications for the site. It recognises that viability will be entirely dependent on the value of the scheme and the state of the local market at the time of submission of the planning application. Any viability case presented by developers will be independently assessed.

Given that the preferred development approach is likely to have viability implications, the Local Planning Authority does accept the need to be flexible in the interpretation of Local Plan policies in order for the city council to realise its aspirations for the site. Policy areas which may be interpreted more flexibly include:

- proportion of affordable housing;
- housing mix and size of residential units;
- \$106 contributions towards local infrastructure.

## Former Royal Alexandra Hospital Site Plan Brief 2010

The LPA acknowledges that under current market conditions, despite exercising flexibility in policy, proposals may not be financially viable in the short term. In these circumstances, the LPA would consider proposals which put forward temporary uses of the buildings on site until the market recovers. The Brief also explores other mechanisms, such as deferred planning obligations, to enable development to take place when economic conditions are less favourable.

The final section of the Brief (Section 7) identifies the development principles to guide the holistic regeneration of the site through clarification of Local Plan policy and, where appropriate, the Emerging Core Strategy.

## Status of the Brief 2

Planning Briefs do not form part of the Local Development Framework (LDF). Although the Brief cannot be given full statutory weight, the consultation on the document has extended beyond that which is normally undertaken for Planning Briefs. The city council has held early discussions with a number of stakeholders with an interest in the site (including amenity and residents' associations), to establish their priorities for any future development of the site. The draft land-use and design options for the site were also displayed at a Public Exhibition which generated 147 formal written representations. The content of the Brief has also been informed by adopted and emerging planning policy.

The guidance contained within this Brief is a material planning consideration and will be used in the determination of planning applications.

The document was adopted by the city council at the Environment Cabinet Members Meeting (CMM) on 2010.

## 3 Introduction & background

## 3.1 Introduction

The relocation of the services provided at the Royal Alexandra Hospital to the Royal Sussex County Hospital in 2006, provides an opportunity to bring about the regeneration of this strategically important and sensitive site. Although the site was purchased by Taylor Wimpey UK Ltd in 2006, it remains vacant following an unsuccessful planning application and subsequent Appeal by the developer/ landowner in 2008. Given the current unfavourable economic circumstances it is unlikely that the site will be developed in the foreseeable future without the proactive intervention of the local planning authority (LPA), which is one of the principal reasons for the preparation of this Planning Brief.

This planning brief provides a development framework that establishes the principles upon which future planning applications will be assessed and as such, it does not present detailed proposals. It also provides guidance to prospective developers of the site on the development opportunities, planning constraints and the responsibilities of delivering development within a conservation area. The proximity of the site to the city centre and its public transport facilities means there is significant opportunity to realise the city's wider sustainability objectives through good design.

Brighton & Hove City Council offers a pre-application service and developers are advised to contact the council at an early stage to discuss proposals for the site.



Former Royal Alex Hospital (Principal building)

## 3.2 Background

In December 2008, the council's Planning Committee refused to grant planning permission for a residential-led scheme submitted by the landowner of the site,

Taylor Wimpey UK Ltd (BH2008/02095). The scheme proposed the demolition of the former Royal Alexandra Hospital and the erection of three buildings containing 149 flats, a doctor's surgery and a pharmacy.

The landowner appealed against the decision but the appeal was dismissed by the Planning Inspectorate in June 2009 on the grounds that the design of the replacement buildings did not justify the demolition of the existing buildings. However, the Inspector acknowledged that any alternative scheme would need to be financially viable if it is to be built, otherwise the site would remain undeveloped for the foreseeable future, with consequent harm to the character and appearance of the conservation area.

At a case review with Planning Committee on the Royal Alex Hospital site on the 30 June 2009, Members agreed that there was a need to update the Planning Brief in the light of the recent Appeal Decision by the Planning Inspectorate. Members were particularly keen for the Brief to:

- emphasise the importance of promoting development that would seek to protect as much of the hospital building/s as possible;
- encourage greater joint working between the landowner, the community and amenity societies about the future of the former hospital site.

In the light of this case review, the council has sought to bring about a viable solution to the site's development via an up to date Planning Brief to provide advice for developers on what is acceptable in terms of land-use and design.

#### 3.3 Stakeholder consultation

Following the case review, early discussions were held with a number of stakeholders with an interest in the site (including amenity and residents' associations), to establish their priorities for any future development of the site, including:

Montpelier and Clifton Hill Association
Brighton Society
Regency Society
Clifton, Montpelier and Powis Community Association
Homelees House Residents' Association
Residents occupying 20 and 21 Clifton Hill
Primary Care Trust (PCT)/ GPs
Taylor Wimpey (the landowner)
Introduction & background 3

These discussions have contributed to an enhanced understanding of the site, its constraints and stakeholders' aspirations for its future development. The results of this consultation were used to inform the development of the draft land-use and design options for the site which were displayed at a Public Exhibition in Hove Town Hall Foyer on Saturday 24 October.

## **Public exhibition**

The response to the Public Exhibition from members of the public and amenity/ residents' associations was significant. The council received 147 formal written representations on the five draft land-use and design options presented at the Exhibition, either through forms completed at the Exhibition or emailed responses. The material presented on the Exhibition Boards was available in PDF format on the council's website with a link set up on the Home page throughout

## Former Royal Alexandra Hospital Site Plan Brief 2010

the seven day consultation period, which undoubtedly contributed to the high response rate. A summary of the results of this public consultation is included as a background document to this Brief.

## Conservation Advisory Group (CAG)

The options were also presented to the city council's Conservation Advisory Group (CAG). Feedback from members of CAG resulted in the appointment of a conservation consultant<sup>1</sup> to undertake a conservation assessment of the council's land-use and design options. CAG have subsequently been advised of the results of the consultant's conservation assessment and his evaluation of the council's land-use and design options. A range of views were expressed by CAG members on the form that retention of the buildings on the site should take. These views have informed the content of this Brief.

## Councillors

Regular briefings on the development and emerging content of the Brief have been undertaken with the Cabinet Member for the Environment and the Chairman of Planning Committee as well as the local ward Councillors.

<sup>&</sup>lt;sup>1</sup> Jack Warshaw, who provided evidence in chief on behalf of the city council at the Planning Appeal for the Taylor Wimpey scheme.

## The site 4

## 4.1 The site description

The former Royal Alexandra hospital lies within the central area of Brighton and covers an area of 0.73 Ha. It is located on the corner of Dyke Road and Clifton Hill within the Montpelier & Clifton Hill Conservation Area and occupies the southern section of a broadly triangular site bounded by Dyke Road, Clifton Hill and Clifton Road. The northern section is principally occupied by a mixture of terraced stucco fronted houses mainly dating from the early 19th century and a postwar development of flats. Dyke Road is a major North-South bus route, the B2121, merging with the A2010 further north. The road rises from south to north as it approaches the southern apex of the site. The eastern side of Dyke Road, fronting the site, is within the West Hill Conservation Area and contains a group of 6 pairs of substantial semi-detached villas.

The site is within close proximity to the main regional shopping area to the south and Seven Dials, the local District Centre to the north, which provides a range of shops and restaurants. To the north east, approximately 450 metres away, lies the main Brighton Railway Station. The location of the site is presented in Map 1 (mark on Conservation Areas).

## 4.2 The surrounding area

Clifton Hill contains some early buildings of c.1820 but otherwise the buildings in this area are mid-19th century, with St. Michael's Place dating back to the 1860's. Immediately adjacent to the site on Clifton Hill is a terrace comprised of narrow, stucco fronted houses, varying between two and three principal storeys. Further along Clifton Hill are some shops and a public house, with a taxi rank close by, but otherwise the buildings are in residential use.



View of Clifton Hill area

The Dyke Road area, opposite the Royal Alex principal building, is characterised by terraced houses with very small front gardens or paved areas at the northern end of Buckingham Road and semi-detached villas, set in well planted gardens, in the other four roads (including Dyke Road) further west. The majority of buildings in this area are rendered which reflects the mid-late 19th century date when most of them were built.





View of Dyke Road area

View of Homelees House

## 4.3 Former Royal Alexandra Hospital buildings<sup>2</sup>

## **Principal building**

The Brighton Hospital for Sick Children was founded at 178 Western Road on 3 August 1868 by Dr R.P.B.Taafe. It expanded into an adjacent building in 1870, but in the same year the hospital moved to the disused Church Hill School in Dyke Road where it was reopened with twenty beds on 14 July 1871 by the Bishop of Chichester. The present three-storey red-brick building hospital building was erected on the site in 1880-1 and was officially opened on 21 July 1881 by Princess Alexandra. Decorated with terracotta mouldings, it was designed in Queen Anne style by Thomas Lainson at a cost of £10,500. The girls' ward was named the Taafe Ward in honour of the hospital's founder<sup>3</sup>.





Photos of the Former Royal Alex

<sup>&</sup>lt;sup>2</sup>The descriptions of the different buildings on site have been derived from the Architectural Assessment conducted by Giles Quarme and Associates in October 2005.

<sup>&</sup>lt;sup>3</sup>Thomas Lainson designed the Middle Street synagogue (listed Grade II \*) in 1875 and was a Brighton based architect.

Wings to the rear of the building were built in 1904 in a Vernacular Revival style.

## The administration block (Victorian Villa)

The administration block or northern lodge, was built sometime before 1867 when it first appeared on a map of the area. The building is a good quality mid-Victorian two storey villa with a Doric portico and pair of half hexagonal projecting bay windows. Between 1867 and 1875 a side extension was added to the northern flank of the building. This is now partly obscured by a modern extension on the front. It remained as a private house until the hospital bought it in 1945. It would appear that the old Victorian and Edwardian extensions were swept away at the time that it was converted into an outpatients annex in 1949.

## **The Elizabeth Day Centre**

The Elizabeth Day Centre was constructed in 1904 as an isolation department of the hospital. It was originally an Edwardian building typical of its age and date. It made no attempt to emulate the Queen Anne style of the main hospital and was built as a two storey department with an adjoining single storey hall. Unfortunately, the building has been further compromised by a series of rectilinear flat roofed extensions of varying dates that have totally obscured the original pebble dash appearance of the building.

#### The nurses' home

The nurses' home dates from 1896 and is a two storey building crowned with a series of four tile-clad triangular gables. The original building has been altered by later additions such as the metal fire escapes and first floor access doors. In 1913-14 it was incorporated into a much larger building which extended to the north and the south of the original block. There was no attempt to retain any of the original 1896 structure other than its foundations.

## The laundry block

The laundry block dates from 1902 and was built in a domestic Tudor revival style. It comprises of a two storey main block, a tower and a single storey gabled element surrounded by a small ventilator. Like the main hospital building it has a traditional red tiled roof covering projecting eaves. Unfortunately, a number of original doors and window openings have been filled in flush with the external brickwork which has disturbed the original symmetry and composition of the building.

## 4.4 Planning history

Applications for planning permission and conservation area consent for the demolition of the former hospital buildings and erection of 156 residential units and 751 square metres of commercial floorspace (doctors surgery and pharmacy), associated access, parking and amenity space were withdrawn by the applicants, Taylor Wimpey UK Ltd (BH2007/02925 and BH2007/02926) in September 2007.

The scheme was subsequently revised by the applicants and formally resubmitted to the local planning authority in November 2007 (BH2007/04453) but was refused planning permission at Planning Committee in March 2008. An appeal against this refusal was submitted by the appellant to the Planning Inspectorate but was later withdrawn.

Conservation Area Consent for the demolition of existing buildings would have been refused in November 2008 (CAC application BH2007/04462), had an appeal against non-determination not been lodged by the applicant, for the following reason:

#### Reason

Policy HE8 of the Brighton & Hove Local Plan states that demolition in conservation areas will not be considered without acceptable detailed plans for the site's development. In the absence of an approved planning application for the redevelopment of the site, the demolition of the buildings would be premature and result in a gap site that would fail to preserve or enhance the character or appearance of the Montpelier and Clifton Hill Conservation Area and adjoining West Hill Conservation Area.

Further work was undertaken by the applicants to revise the scheme in the light of the reasons for refusal, resulting in the submission of a new application (BH2008/02095) and conservation area consent (BH2008/02808) for the demolition of the former hospital buildings and erection of 149 residential units comprising 40% affordable units and 807.2 sq m of commercial floor space for a GP surgery (including 102 sq m for a pharmacy) associated access, parking and amenity space. This application was refused planning permission at Planning Committee in December 2008, for the following reasons:

#### Reason 1

It is considered that the development by virtue of its siting, height, scale, mass, detailing and appearance does not contribute positively to its immediate surroundings and would have a detrimental impact on the character and appearance of both the street scene and the Montpelier and Clifton Hill Conservation Area and the setting of the West Hill Conservation Area. The proposal would therefore be contrary to policies QD1, QD2, QD4 and HE6 of the Brighton & Hove Local Plan.

#### Reason 2

The proposed development would provide an inappropriate amount of private amenity space and a lack of children's outdoor recreation space on the site for the occupiers of the residential properties, contrary to policies HO5 and HO6 of the Brighton & Hove Local Plan.

There are currently no active applications in relation to the site. However, the Local Planning Authority is aware that the owners of the site, Taylor Wimpey UK Ltd, are likely to submit a new application once they have had the benefit of reviewing the latest guidance contained within this Planning Brief.

## 4.5 Inspector's decision

An appeal against this refusal was submitted by the appellant to the Planning Inspectorate in December 2008 but was dismissed by the Inspectorate in June 2009. The Inspector's decision letter considered that the proposed redevelopment of the site was of insufficient quality to justify demolition of the existing hospital building/s. His main observations are summarised as follows:

- The principal hospital building and particularly its southern façade and the southern end of the Dyke Road frontage contribute positively to the character and appearance of the conservation area.
- He draws parallels with other red brick and terracotta buildings in the conservation area (i.e. St Mary Magdalen RC Church) which he contends distinguished non-residential buildings from the predominantly stuccoed appearance of the residential buildings.
- Strongly in favour of retaining the open space in front of the south façade.
- He did not consider that the appellants had demonstrated that the building was beyond economic repair, as required by policy HE8.
- He thought that the conversion scheme of 55 units, which could not demonstrate a viable use, was not proof that a viable use could not be found. He suggested that other variations of retention and new-build should be explored which might secure the contribution made by the south-facing façade or part of it to the conservation area.

While the Inspector did not rule out total redevelopment of the site, he said that "the existing main building is of sufficient value, in townscape and architectural terms, as well as fondness shown by local people that any replacement should be of the highest standard that recognises the value of the existing buildings and all that they stand for and would compensate for their loss".

The Inspector's decision has been used to inform the development of the land-use and design options for the site and the content of the Brief.

## Conservation principles & guidance 5

## 5.1 Conservation Area Character Statements

A good starting point for establishing sound principles for development within a Conservation Area, are the city council's adopted character appraisals for conservation areas. Developers are advised to familiarise themselves with the character statements for the Montpelier & Clifton Hill Conservation Area and West Hill Conservation Area included as a background document to this brief.

As these character statements reveal, conservation is not just a matter of retaining historic buildings, it is also a matter of respecting those qualities of space, rhythm and texture which are indicative to the area. The site occupied by the former Royal Alexandra Hospital, is a large triangular shaped area of land within the Conservation Area, with its own character. Although the space is environmentally valuable and diverse, it is somewhat compromised by second-rate and short-life buildings at the rear of the Alex and by some unsympathetic modern development in Clifton Mews. The back of the site therefore represents an opportunity for developers to design a scheme which responds more positively to the rhythms and textures of the surrounding area.

As so often with hospital buildings, incremental changes have eroded the original Lainson design and devalued the architectural merits of the building. However, developers should be aware that the main hospital building remains a landmark building, one that makes a positive contribution to the character of both the Montpelier & Clifton Hill Conservation Area in which it lies and the setting of the adjoining West Hill Conservation Areas.

#### 5.2 Conservation assessment

An architectural assessment of all the buildings on site was conducted by a conservation architect<sup>4</sup> at the time of the site's disposal. The results of this assessment have been used by the consultant<sup>5</sup>, an expert in the field of conservation and the conversion of historic buildings, to draw the following conclusions on the architectural merits of the building:

### Former principal hospital building

The 1881 main building by Thomas Lainson is seen, notwithstanding its disfiguring later alterations and extensions, as especially significant for:

- Its design philosophy, deliberately contrasting with the prevailing Italienate architecture;
- Its original, picturesque quality of massing, detailing and execution;
- Its historical significance as an innovative centre of excellence serving the local community;
   and
- Its symbolism, representing the collective memory of the local community of "their" children's hospital.

Whilst it is of some architectural character and merit, this is not sufficient in the opinion of the Department of Culture, Media and Sport and English Heritage to merit listing as a building of special architectural or historic interest. A request that the principal building and others are listed was rejected by the Secretary of State in 2006.

<sup>&</sup>lt;sup>4</sup>Giles Quarme a conservation architect appointed by the NHS Trust in October 2005 during the period that the site was being marketed for disposal.

<sup>&</sup>lt;sup>5</sup>Jack Warshaw, who provided evidence in chief on behalf of the city council at the Planning Appeal for the Taylor Wimpey scheme.

Notwithstanding this decision the assessment completed by English Heritage, states that: "some fine features survive from (the 1880s). The east elevation, in particular the terracotta porch, is notably intact and of high quality design and construction. The carved detailing on this and the eastern part of the south façade is particularly handsome. The cupolas to the west end are elegant additions to the skyline....(The hospital) has, however, experienced considerable alterations....(some of which) have compromised the integrity of the facades....None of the ancillary buildings are sufficiently architecturally distinguished to merit listing in their own right".

The decision letter nevertheless reaffirms the view that the building is clearly of interest in its local setting and makes a strong contribution to the conservation area. For this reason, the consultant identifies this building as worthy of retention. Moreover, the consultant recommends that the building is fully restored to the original 1881 Thomas Lainson building (i.e. without the balconies which were added in 1913).

## **Former Elizabeth Day Centre**

The day centre was originally an isolation building but has been severely compromised by later extensions, loss and erosion of original fabric. Whilst there is no technical reason why it could not be restored to its original appearance, it occupies a position on the site which would prevent any substantial new building. The consultant concludes that since "a quantum of development with reasonable prospect of viability must be factored in, the value of restoring the building back to its original appearance is questionable".

## **Former Laundry Building**

This building is the smallest and most utilitarian in character of the group of outbuildings, as befits its former function. Despite alterations, it is still attractive. The consultant concludes "that its loss or replacement should only be considered in the context of being tradeable for a greater benefit".

#### **Former Nurses Home**

The building with its multi-gabled form, cladding and relatively better state of external preservation than the other secondary buildings remains attractive from the front but considerably less so from the rear. Although it would easily lend itself to restoration, the consultant believes "it occupies a pivotal position on the site which could unduly constrain the form, layout and scale of any new build elements".

## **Former Administration Block (Victorian Villa)**

This villa fronting Dyke Road is one of the earliest villas in the area and remained a house, probably up to 1945 when it was purchased for hospital use. Although totally replanned internally, the consultant sees "no reason why it could not be returned to use as a single home or two family apartments with a suitable garden".

## 5.3 Rankings for the retention of buildings

Based on the consultant's assessment, the following rankings have been applied in relation to the architectural merits of buildings on site:

Former principal hospital building	1st
Former administration block (Victorian Villa)	2nd
Former Elizabeth Day Centre	}
Former laundry	} - joint 3rd
Former nurses home	}

Developers are advised to pay heed to these rankings when putting forward proposals for the redevelopment of the site. All development proposals must retain the principal building in the first instance and then explore the feasibility of retaining the former administration block (Victorian Villa) (see Figures 1 and 2). In a full economic recovery of the market, developers will be expected to bring forward redevelopment proposals that retain the principal building and the Victorian Villa. Developers will need to present robust justification for any departure from this preferred development approach, through presentation of a sound viability case.



Figure 1 - Current economic situation



Figure 2 - Full economic recovery

## 5.4 The options

The consultant was tasked with assessing the council's different land-use and design options, including a short commentary on whether or not they constituted reasonable development scenarios in respect of layout, numbers of units etc. The results of the Conservation Study are included as a background document to this Brief. The consultant was also asked to identify any additional options (if appropriate) which were significantly different from those already proposed that would merit further consideration.

The consultant identified a sixth preferred option as a variant on the five land-use and design options. This sixth option recommends the full restoration of the principal building to the original 1881Thomas Lainson building and the retention of the Victorian villa. He favours new build forms which are laid out across the site rather than around the perimeter in order to create more visual permeability. This option would generate in excess of 100 residential units. When completed, the consultant believes that the retained buildings would most likely become eligible for statutory listing.

The city council's Conservation Advisory Group (CAG) was advised of the results of the Conservation Assessment and the consultant's preferred option. A range of views were expressed by CAG members on the extent of restoration of the principal building, mostly in favour of the retention of the later 1913 balconies in any future restoration of the building. Members were keen that the Planning Brief should not be too prescriptive in relation to the form the retention of the principal building should take. However, as a minimum requirement, the Brief should stipulate that the principal building must be retained in any future redevelopment of the site. CAG was also keen for the Brief to exercise flexibility in relation to Local Plan policies for those schemes which retain the principal building but are financially unviable.

## Deliverability 6

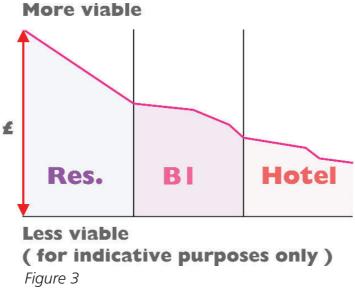
## 6.1 Why is deliverability important?

The inspector's decision letter of June 2009 recognised the need for a viable scheme on the Royal Alex site, to prevent the physical deterioration and ongoing underutilisation of land and buildings, with the attendant harm to the character and appearance of the conservation area. Without an assessment of deliverability, it is likely that unrealistic expectations are formed which may result in the promotion of schemes which are not viable, introducing delays into the development process. That is why the city council decided to appoint the District Valuer (DV)<sup>6</sup> to carry out a viability assessment of the different land-use and design options for the site in October 2009.

Best practice<sup>7</sup> in planning stresses the need for planning briefs to be realistic. This next section of the Brief is designed to bring about an understanding of market imperatives such as local market conditions, construction costs, sales and revenue etc. and their impact on deliverability<sup>8</sup>.

#### 6.2 Land-use

Based on the District Valuer's assessment of the current economic market (October 2009), the land-use most likely to attract developer interest and deliver early development of the site is residential, followed by B1 office development and finally hotel development. The draft design options were therefore developed assuming that the principal use of the site is likely to be residential, although B1 office/ hotel development are also shown as potential more minor uses of the main hospital building in those options which assume the retention of the original building/s (see Fig 3).



## 6.3 Assumptions

The number of residential units for each of the options were calculated using the following assumptions (see Appendix 1), all based on the adopted Local Plan policies:

- 40% of the housing on site is affordable (HO2)
- dwelling mix and size of units reflects the June 2009 Affordable Housing Brief and latest Housing Needs Assessment (HO3)

<sup>&</sup>lt;sup>6</sup> The District Valuer, James Feltham, was appointed in October 2009.

<sup>&</sup>lt;sup>7</sup> "Planning and Development Briefs - A Guide to Better Practice", Department of Communities and Local Government.

<sup>&</sup>lt;sup>8</sup> Technical guidance on viability and financial appraisal is contained in Atlas Guide - Planning for Large Scale Development; T10: Financial Appraisal and Project Viability

## Former Royal Alexandra Hospital Site Plan Brief 2010

Affordable residential units 30% 1 bed @ 51 sq m 45% 2 bed @ 66 sq m

25% 3 bed @ 86 sq m

Private residential units 40% 1 bed @ 51 sq m 50% 2 bed @ 66 sq m

10% 3 bed @ 86 sq m

- internal circulation space is 15% for the new build residential and 25% for the conversion of buildings being retained
- 5% of the whole development and at least 10% of the affordable homes are wheelchair accessible (H013)
- a GP surgery is provided in all of the options
- undercroft parking is provided for all new build residential development to a ratio of approximately 0.6 spaces per household

## 6.4 Sales revenue and build costs

The assumed level of sales revenue and build costs have been provided in consultation with the DV service's building surveyor and quantity surveyor and are summarised on p2-3 of the DV report (see Appendix 5). In addition to these standard sales revenues and build costs, other items have been included:

- Undercroft parking beneath the new build elements has been costed at £825/sqm or £10,300 per parking space
- Wheelchair access requirement has been costed at £5,000 per unit (across 10% of units)
- Demolition and site clearance has been estimated at £150,000
- Groundwork/ decontamination has been estimated at £50,000
- Perimeter fencing/ boundary works has been estimated at £150,000
- \$106 contributions have been estimated at £3,504 per unit (being the amount submitted in the May 2009 Inquiry)
- Professional fees have been estimated at 12.5%

#### 6.5 Profit

The financial appraisals contained within the DV report have been assessed against a target profit of 20% of private residential sales revenue, 8% of affordable residential sales revenue, 8% of community/ medical sales revenue and 15% of commercial (hotel/ B1 office) sales revenue. This produces a blended target profit for each of the options depending upon the mix of uses.

## 6.6 Viability assessment

The District Valuer's snapshot report of October 2009, concludes that the fall in the residential market since the end of 2007 has compromised the viability of any scheme on the Royal Alex site. The site acquisition price in 2007 represented a historic high but has not been used by the District Valuer to assess current viability. Instead, the current estimate of value is based on its former use as a hospital and equates to £6.85m. Use of this value as the underlying site value renders only Option 1 (total redevelopment) as borderline viable. The land value would have to fall to a range

of £2.9m - £5.25m to render each of the other options as viable. The full results of the District Valuer's assessment are included as a background document to this brief.

The closest options to complete redevelopment are options 2 and 3, which are both residential schemes retaining the main building (option 2) /plus a sensitive extension (option 3). These provide residual land values of £5.1m and £5.25m respectively. In the absence of a current use value, the market fall for residential development land would have fallen from the original acquisition price to about these levels.

Nevertheless, it is important to recognise that viability assessments are conducted by applying certain assumptions at a specific point in time. If variables such as land values, build costs or the percentage of affordable housing were to change then the viability of each of the options will be directly affected. For example, using the information supplied by the District Valuer, it is estimated that a rise in land values or a reduction in the percentage of affordable housing could result in options 2 and 3 (the retention of the main building) becoming viable (assuming a 15-16% target profit level).

Recent discussions with the District Valuer service have revealed that since the options were tested in the Autumn of 2009, build costs have reduced and land values have slightly risen. Given that the site is located in a prime residential area, it is

anticipated that it could be one of the first areas in the city to benefit from any future upturn in the economy and development industry. This is likely to have a significant bearing on the viability of the site in the future.

## 6.7 Preferred development approach

## Retention of the principal building

The LPA recognises and is sympathetic to the historic, cultural and emotional attachment of the local community to the former Royal Alexandra Hospital. The Conservation Assessment, feedback from the public exhibition and from members of the Conservation Advisory Group (CAG), clearly demonstrated a wish among the local community to retain the principal building. The LPA will therefore require the retention of the principal building in any future redevelopment of the site. In order to recognise important conservation principles as key material considerations, it may be necessary to adopt a more flexible approach to the interpretation of planning policies. This is because the cost of retaining and converting the principal building will undoubtedly put additional financial pressure on the viability of future proposals.

## **Characteristics of preferred development scheme**

- 102 residential units
  - 81 new build units
  - 21 conversion units
- A target of 20% affordable housing units to be achieved as a proportion of the new build elements of the scheme (i.e. excluding 21 conversion units)
- Retention of the principal building
- Retention of the open space to the south of the principal building
- Retention of all trees protected by Tree Preservation Orders (TPOs)
- Provision of a G.P. surgery
- Height of development restricted at higher points of the site to 2-3 storeys and should not exceed 5 storeys on the remainder of the site
- Provision of undercroft parking 50 spaces

## **Development viability**

The viability of proposed development will be independently tested and taken into account in the determination of future planning applications for the Royal Alex site. The assessment of viability will be entirely dependent on the value of the scheme and the state of the local market at the time of submission of the planning application.

Given that the preferred development approach is to retain the principal hospital building and that this is likely to have viability implications, the Local Planning Authority does accept the need to be flexible in the interpretation of Local Plan policies in order for the city council to realise its aspirations for the site. Policy areas which may be interpreted more flexibly include:

- proportion of affordable housing;
- housing mix and size of residential units; and
- \$106 contributions towards local infrastructure.

## **Affordable housing provision**

The land-use and design options which were tested by the District Valuer, were based on a number of assumptions (see Section 6.3). There is no doubt that a more flexible approach to policy could have an effect on the overall viability of the preferred development scheme. For example, an assessment of the preferred development scheme i.e. retention of the principal building, has been undertaken applying different proportions of affordable housing and different land values (see Tables A and B), the rest of the assumptions remain the same.

Table A - Using the estimated land value as a hospital

Based upon existing use value as hospital at £6.85m <sup>9</sup>	Affordable housing units	Private units	Total units	Target Profit GDV (%)		Viable at EUV of 6.85M
Retain principal building - 40% affordable units (excluding 21 conversion units)	31	71	102	17%	9%	No
Retain principal building -  20% affordable units (excluding 21 conversion units)	16	86	102	17%	14%	Borderline
Retain principal building - <b>0% affordable units or 100%</b> private units	0	102	102	17%	19%	Yes

**Table A** demonstrates that the preferred development scheme is rendered unviable at 40% affordable housing provision (i.e. Policy HO2). At 20% affordable housing provision, profitability is improved but the scheme is borderline in terms of viability and at 0% affordable housing provision the scheme exceeds target profit levels.

<sup>&</sup>lt;sup>9</sup> The District valuer has valued the site based on its former use as a hospital. If the site had been valued as a development site then the value would have fallen to meet the required obligations in planning policy. The DV considered that, in this case, the land value would become so low as to be unrealistic in a hypothetical willing vendor/ willing purchaser of the site. That is why he has chosen to use the asset value as a hospital.

Table B - Using the estimated land value as a housing site

Based upon existing use value as a residential development at £5M <sup>10</sup>	Affordable housing units	Private units	Total units	Target Profit GDV (%)		Viable at EUV of 5.0M
Retain principal building - 40% affordable units (excluding 21 conversion units)	31	71	102	17%	16%	Borderline
Retain principal building -  20% affordable units (excluding 21 conversion units)	16	86	102	17%	21%	Yes
Retain principal building - <b>0% affordable units or 100%</b> private units	0	102	102	17%	26.5%	Yes

**Table B** demonstrates that the preferred development scheme is borderline viable at 40% provision of affordable housing. However, the scheme exceeds target profit levels by 4% and 9.5% respectively at both 20% and 0% affordable housing provision. The scenarios played out in Tables A and B suggest that the provision of 20% of affordable housing is a reasonable aspiration for the site.

A general target of 20% of affordable housing units as a proportion of the new build elements of the scheme will therefore be required. Given the current economic climate and the LPA's keenness for the site to be developed as soon as possible, planning permission will only normally be granted for three years. The target provision for affordable housing for any particular scheme, once agreed, will remain in place for three years from the granting of planning permission. Thereafter, the LPA will carry out a site reappraisal. Developers should be aware that the council will seek an appropriate mechanism through a \$106 Obligation, to secure the maximum amount of affordable housing at the time of reappraisal that would allow the scheme to remain viable. In order to facilitate this, the LPA will expect at least 40% of all residential units (i.e. the maximum affordable housing provision under Policy HO2) to be built to the minimum Housing Corporation space standards. This approach should overcome the LPA's concern over viability assessments which are a snapshot of the market at a particular point in time, by ensuring that developers provide an appropriate level of affordable housing, if market conditions change.

### Flexible approach

In periods of economic recession and where the developer is able to demonstrate a robust financial case, the LPA may consider a number of flexible mechanisms for bringing the site forward for redevelopment. This flexible approach is particularly relevant on sites of strategic importance which are delivering other key planning objectives, in this case, the retention of the principal building. Mechanisms which the LPA may deploy in relation to the site are:

<sup>&</sup>lt;sup>10</sup>The LPA has used a land value that reflects the site's potential for residential development. The £5M figure is based on the DV's assessment (see 1st para under Land Value, p3 of the report) that since the acquisition of the site in 2007 (in excess of £10M), residential development land values have broadly halved due to the recession

## Former Royal Alexandra Hospital Site Plan Brief 2010

- deferred planning obligations;
- the establishment of a longstop date;
- regular review of the local market in relation to the affordable housing provision and S106 contributions;
- agreement of maximum ceilings for financial contributions and affordable housing provision within \$106.

## **Temporary uses**

The city council acknowledges that under current market conditions, despite exercising flexibility in policy, proposals put forward by developers may not be financially viable in the short term. In these circumstances, the LPA would consider proposals which put forward temporary uses of the buildings on site until such a time that the market recovers. The life of consent for temporary uses will be limited to three years. Acceptable temporary uses could include medical administration, leisure or B1 office uses but the developer would need to demonstrate that there would not be any adverse environmental impact in terms of traffic generation, parking, noise and disturbance.

## Development principles & guidance 7

## 7.1 National and local planning policy

A summary of all the national and local planning policies relevant to the site is included as a background document to this Brief.

## 7.2 Acceptable uses of the site

Acceptable land uses for the site are guided by policy HO20 of the Local Plan (see Frame1 below). Since the Royal Alex Hospital has been relocated to the main hospital site on Eastern Road, Exception b of policy HO20 applies:

- priority will be given to residential and mixed use schemes.
- community uses such as a medical centre, G.P. Surgery, school etc. will be encouraged because they are compatible with its former community use as a hospital.
- leisure (i.e. hotel) and B1 (i.e. office) uses may be acceptable if they are ancillary to the principal use of the site.
- residential care home or nursing home uses may be acceptable providing they meet the needs of local people identified within the city council's Housing Strategy and Older People's Housing Strategy.
- day nursery and childcare facilities may be acceptable uses providing they are part of a mixed use development of the site and could demonstrate that they would not result in traffic congestion or prejudice highway safety.

## Frame 1 - Local Plan policy HO20 Retention of community facilities

Planning permission will not be granted for development proposals including changes of use, that involve the loss of community facilities, including hospitals, health centres, surgeries/ clinics, museums, art galleries, exhibition halls, places of worship, day care centres, libraries, schools, crèches, public toilets, church and community halls, theatres and cinemas.

## Exceptions may apply when:

- a. the community use is incorporated, or replaced within a new development; or
- b. the community use is relocated to a location which improves its accessibility to users; or
- c. existing nearby facilities are to be improved to accommodate the loss; or
- d. it can be demonstrated that the site is not needed, not only for its existing use but also for other types of community use.

Where an exception (a-d) applies, a priority will be attached to residential and mixed use schemes which may provide 'live work' and/ or starter business units to meet identified local needs.

The Local Planning Authority would particularly like to encourage developers to consider the inclusion of a GP surgery as part of any future mixed-use scheme. Early stakeholder consultation with Brighton & Hove's Primary Care Trust (PCT) has revealed that the existing Montpelier GP Practice in Victoria Road is not fit-for-purpose, is inaccessible for disabled people and therefore fails to meet the requirements of the Disability Discrimination Act (DDA). The PCT has carried out an exhaustive search for suitable alternative sites and premises without success. Feedback from local residents' associations would also suggest strong support for the establishment of a new and expanded GP practice at the Royal Alex site in place of the existing Montpelier Surgery.

## 7.3 Unacceptable uses of the site

Principal uses of the site which are not considered acceptable include:

### **Retail use**

The site is outside of the Seven Dials shopping area which is designated a Local centre in the adopted Local Plan. The developer would need to demonstrate that a more suitable site could not be found within an existing defined shopping centre. The only exception which may be applied is if the retail use were very ancillary to the principal use of the site i.e. a small café attached to a Day Care Centre.

## **Light industrial**

Light industrial uses would not be compatible with the historic fabric of the area and its Conservation Area status.

## 7.4 Design and infill development

There are several areas within the site where new infilling or replacement development might be acceptable. Any new development must take account of the principal building, the character of the conservation area and the surrounding historic context. Specific attention should be paid to the detailed design, scale and use of materials to ensure that any new development is sympathetic to its surroundings.

Consideration should also be given to the design of the public realm to ensure that it meets the aspirations of the emerging Core Strategy CP3 Public Streets and Spaces. New development should contribute towards the implementation of public realm improvements by:

- preserving or enhancing the setting of the city's built heritage;
- encouraging active living and healthier lifestyles;

Developers will be expected to make a positive contribution towards securing Lifetime Neighbourhoods through high quality design of the public realm.

Given that the site is not identified as a taller buildings node within SPG15, development should not exceed five storeys. Developers will be expected to take on board the level changes across the site and to respond appropriately. For example, to the north and west of the site where the ground level falls by two storeys or more, development may need to be restricted to no more than two to three storeys. Neighbourhoods through high quality design of the public realm.

#### 7.5 Architectural features

#### Flint wall

The boundary of the site consists of a field flint wall, made from flints gathered from the surfaces of ploughed fields. Boundary walls are important to any setting. They provide a sense of enclosure and scale to the street and define public and private spaces.

Through the use of common materials and forms they also define and link the grounds and gardens of properties, provide cohesion to an area and compliment the architecture of the buildings they enclose.

The flint wall boundary should be retained in any redevelopment of the site. In terms of its Conservation Area status, good quality original flintwork must not be rendered, tiled over or painted. Repairs and alterations should be carried out to match, including the flint type; its spacing, coursing and strike as well as the mortar mix, colour and texture and brick or stone dressing style and materials.



## **Chimney stacks**

Chimney stacks are important elements of the historic townscape of Brighton & Hove, enlivening and enriching the roofscape. The height and design of stacks varies greatly depending on the period, style and status of a building. In cases, such as large late-Victorian buildings, chimney stacks were not simply a functional element but a deliberate architectural feature, often very tall and making use of decorative brickwork.

All chimney stacks to the main roof of the principal building, including any pots, must be retained. Demolition of a chimney stack to a rear extension will be permitted provided that the stack does not make a positive contribution to the street scene or the appearance of a public open space.



## **Cupolas and turrets**

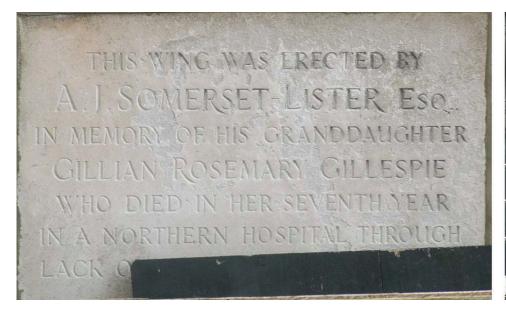
In the case of historic buildings in conservation areas, consideration must be given to the impact of any changes to the roof form not only on the appearance of the building itself but also on the common roofscape of the street or group of buildings of which it forms a part.

In all cases, embellishments such as turrets and cupolas will be considered an integral part of the building's design and significance and must be retained.



#### **Commemorative stones**

There are two commemorative stones which should be retained as interesting architectural features of the principal building, in any future redevelopment of the site.





## 7.6 Housing

In accordance with exception b of policy HO20, the site is suitable for residential and mixed-use schemes. It is expected that proposals for new residential development and residential conversions (including changes of use) incorporate a mix of dwelling types and sizes that reflects and responds to Brighton & Hove's housing needs (see section 6.3).

Given the changes to the emerging Core Strategy policy CP12 Affordable Housing, which now states that "the Council will negotiate with developers to secure up to a 40% element of affordable housing" some flexibility may be exercised on major development proposals putting forward less than 40% affordable housing. However, the developer would need to demonstrate that the proposal meets the council's aspirations in terms of retaining the principal building and that viability was likely to be adversely effected as a result of pursuing a conversion option. Flexibility may also be exercised in relation to the mix of dwelling types and size of units providing the preferred development approach is delivered.

## 7.7 Parking

The council's parking standards are set out in policy TR19 of the Local Plan and SPGBH4 Parking Standards. These must be adhered to by the developer in any future redevelopment of the site. The existing car parking standards for residential development in SPGBH4 allow a maximum of 1 car space per dwelling plus 1 space per 5 dwellings for visitors. However, given the proximity of the site to central Brighton and the railway station, residents and users of the site are not expected to be heavily dependent on the private car. Thus a lower car parking ratio than the maximum set out in the standards is likely to be acceptable.

The design of parking areas should be considered as an integral part of the scheme, and should be designed to lessen their visual impact, by incorporating new planting where appropriate and exploring the use of shared surfaces. Given the constraints of the site, the LPA would actively encourage developers to consider the provision of carefully designed and lit basement parking with an emphasis on safety and security (i.e. Park Mark), particularly in support of residential proposals.

## 7.8 Pedestrian and cycle facilities

The council seeks to achieve sustainable development. Developers should therefore maximise accessibility for cyclists and pedestrians in those areas well served by public transport and centrally located, such as the Royal Alex site. In order to encourage the safe movement of pedestrians and cyclists both within and around the site, all vehicular access to the site, as well as the internal layout of roads, footpaths and parking areas, should give priority to the needs of pedestrians and cyclists. Thus, all future proposals for the site should allow for a high degree of permeability for both pedestrians and cyclists. Where appropriate, pedestrian crossing facilities should be provided by the developer in the area surrounding the site.

## 7.9 Open space, outdoor recreation space and landscaping

The open space to the south of the principal building must be retained in any future redevelopment of the site. This space contributes positively to the character of the area and provides the setting for views across the site from various vantage points both within the Montpelier and Clifton Hill Conservation Area and the adjoining West Hill Conservation Area. Encroachment by development into this open space will therefore not be permitted. The creation of a wild garden with sitting out areas, for example, would be complementary to either a residential or mixed use of the site. Developers will need to give consideration to whether this space should be public or semi-private. The LPA will review proposals for this space in the light of the mix of land uses proposed.

In the case of residential development, the provision of outdoor recreation space within the site should be in accordance with the standards set out in policy HO6 of the Local Plan and CP6 of the emerging Core Strategy. Any departure from these standards will need to be robustly justified by the developer. Careful attention to high quality design and detailing of the outdoor recreation space will be required, to encourage natural surveillance and active use of the space. Consideration should also be given to the possible integration of the existing TPO trees within proposals for the outdoor recreation space.

The landscape associated with the proposed redevelopment of the site should be an intrinsic part of the overall design concept. The appropriate use of soft landscaping, the inclusion of balconies and roof terraces, good use of street planting and climbing foliage, all assist in providing a contrast to the built form. Any new landscaping should have regard to existing wildlife habitats and the ecology of the area in accordance with CP5 Biodiversity in the emerging Core Strategy. Any hard surfacing materials should be chosen to reinforce the urban, pedestrian scale of the development. They should complement the materials of the built form and natural landscape, with an emphasis on quality and detailing.

## 7.10 Trees and ecology

All trees with a TPO must be retained in future proposals for the site and should be used to guide the form of the development in line with the requirements of SPD06 Trees and Development Sites. Their setting should be preserved and enhanced, enabling them to continue to make a positive contribution to the character of the area. Any construction work on the site should accord with the British Standards Institute (BS 5837) Guide for trees in relation to construction. New tree planting and/ or good landscaping can help to protect the residential environment by mitigating the effects of noise and fumes. Developers should consider a planting strategy which optimises these environmental benefits, as well as provide privacy and frame views.

Attention to the ecology of the site is also important. Development proposals should conform to the guidance contained within the latest draft SPD on Nature Conservation and Development <sup>11</sup>. The council will actively pursue the maximisation of opportunities to build-in beneficial biodiversity and geological features as part of good design. Such opportunities might include areas of new habitat at ground, wall and roof level (green walls and green roofs), naturalistic landscaping and wall mounted nest boxes. The CIRIA publication "Building Greener" provides detailed guidance on these techniques.

## 7.11 Sustainability

SPD08 Sustainable Building Design and its associated checklist outline the minimum standards in relation to sustainable design which will be expected on the site. These refer to standards around e.g. energy and carbon dioxide emissions, water use, use of materials and building benchmark standards. The following performance benchmarks are expected to be practical and achievable. There is emerging national evidence which would suggest that achieving these standards in sustainability increases the profitability of private sales.

## **Code for Sustainable Homes**

All new build residential units, including those within mixed-use developments, are expected to emit no annual net CO2 from energy use, be designed to Lifetime Home Standards and achieve a minimum rating of Level 4 of the Code for Sustainable Homes (CSH).

## **BREEAM ratings**

All non-residential developments are expected to score at least 60% in the energy and water sections of the relevant BREEAM assessment within a minimum overall rating of 'Excellent'.

## **Sustainability Checklist**

All developers will be required to submit a completed Brighton & Hove Sustainability Checklist with the planning application and/or a sustainability statement with all full or reserved matters planning applications (in the case of outline applications, a condition will be attached requiring these at reserved matters stage and a Section 106 agreement will provide for any mitigation measures).

## **Energy efficiency and carbon dioxide emissions**

Energy use can most easily be minimised where the design approach includes energy efficiency as a guiding principle at the outset of the design process. This means incorporating the highest possible levels of insulation and airtightness, and applying passive design solutions to maximise passive heating, cooling, lighting and ventilation. All developments are expected to exceed Part L Building Regulations by 20% as a minimum, but residential development should aspire towards zero carbon status (emitting no net annual carbon dioxide emissions from energy use).

<sup>&</sup>lt;sup>11</sup> This SPD is due to be adopted in Summer 2010.

## **Construction and operational waste**

To minimise the impact of construction on the community, all contractors that work on the construction sites will be expected to achieve a level of performance equivalent to that required under the Considerate Constructors Scheme. This includes measures for controlling working hours, dust and traffic as well as general public safety. In particular, contractors will be expected to make specific proposals for avoiding pollution and for minimising and recycling on-site waste in line with the council's Policy SU13 and SPD03 Construction & Demolition Waste. Specifically, contractors will need to demonstrate compliance with the council's PAN05 Recyclable Materials and Waste Storage PAN to ensure provision is made for recycling waste from both residential and commercial accommodation within the development.

#### 7.12 Section 106 contributions

It is normal for sites of this kind, for contributions to be sought from developers to pay for, or contribute towards, the cost of additional infrastructure needed to service the new development. The level of contribution is generally related to the scale of the new development and its impact on the local environment, as required in Policy CP9 of the emerging Core Strategy.

Where there is robust evidence that development is not able to meet all planning obligations for reasons of viability, then flexibility and timing on meeting those contributions may be allowed that will secure obligations and delivery of development in reasonable timescales, through appropriate triggers in development phasing (see Section 6.7 Para "Flexible Approach").

## 8 List of relevant documents

## **Background documents**

Draft land-use and design options

Summary of Public Consultation results

Planning Inspectorate's Appeal Decision, 12 June 2009

Conservation Area Character Statements

Development Options Conservation Study, Jack Warshaw, January 2010

"Architectural assessment of the listability of the hospital and its ancillary buildings", Giles Quarme, October 2005

District Valuer's Summary Report - Viability Appraisal, October 2009

National and Local Plan policies

Brighton & Hove Local Plan 2005

Core Strategy Proposed Submission Feb 2010

"Planning and Development Briefs - A Guide to Better Practice", Department of Communities and Local Government, 1997

ATLAS Guide - Planning for Large Scale Development, T10: Financial Appraisal and Project Viability, 2010

## **Supplementary Planning Documents**

SPD 03 - Construction & Demolition Waste (January 2006)

SPD 06 - Trees & Development Sites (March 2006)

SPD 08 - Sustainable Building Design (June 2008)

SPD 09 - Architectural Features (December 2009)

Draft SPD on Nature Conservation and Development (due to be adopted Summer 2010)



