Our ref: EP/19258/HaslarGosportDraft Local Plan

Gosport Borough Council, Planning Policy, Town Hall, High Street, Gosport, Hants, PO12 1EB



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## BY EMAIL TO PLANNINGPOLICYCONSULTATION@GOSPORT.GOV.UK

3<sup>rd</sup> December 2021

Dear Sir/Madam

# SUBMISSION ON THE DRAFT GOSPORT BOROUGH LOCAL PLAN 2038 ON BEHALF OF HASLAR DEVELOPMENTS LIMITED.

We have been instructed by our client Haslar Developments Limited, hereafter referred to as 'HDL' of the Site Office, Royal Hospital Haslar, Haslar Road, Gosport, Hampshire, PO12 2AA to lodge this submission on their behalf, on the Draft Gosport Borough Local Plan 2038.

Our client congratulates the Borough Council on production of the Regulation 18 Consultation Draft and welcomes the opportunity to comment by 3<sup>rd</sup> December 2021.

## **Executive Summary**

The key points in this submission are:

• The borough is already 80% built upon and that space is at a premium; the number of households is increasing but the size of households is decreasing; the population is ageing; the Borough is characterised by smaller properties (ie 59% terraced houses or flats); new housing completions have reduced with only an average of 130 dwellings completed every year since 2011; growth is constrained by the peninsula location and land in active military use with large areas requiring significant investment and are more complex to develop as in this instance; a substantial number of new homes are required; and preservation and enhancement of the built and natural heritage of the borough are to be encouraged. This indicates that, within reason, as outlined below, the Haslar Hospital site should be considered for further C3 housing over that currently

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- stipulated (a modest increase of only 60 no. C3 units) in the emerging local plan and tied to the future non provision of any hotel on site.
- The Borough Council take the position that the requirement for some 5,576 homes advocated to 2038 by Government is not achievable. Instead, a figure of approaching 3,500 homes is considered by the local authority to be deliverable within the borough. Meeting the shortfall of 2,000 homes has clearly been abandoned by the local authority but we believe that this should not be the case with the subject site being a major contributor (perhaps 13%) of this 2,000 dwelling shortfall to 2038.
- The subject site clearly would go some way to bridging the shortfall of approximately 2,000 new homes and this is a significant shortfall given the size and population of the borough.
- There is substantial potential to accommodate at least a further 260 C3 units within the subject site primarily through conversions of existing non-residential floorspace, conversion from C2, change of use and potentially from sensitive new build and extension to existing and permitted in a non obtrusive manner. This would result in an increase from the previously permitted 286 C3 units, say 300 units, to 560. This additional 260 C3 units from the 300 limit of the 2011 adopted local plan would likely comprise the following: an additional 60 units where the hotel was previously approved and recognised in Draft Policy SS6 covering this site; a further 50 units from the conversion of the previously permitted medical and health floorspace within the main building; and the remaining c150 C3 units coming from conversion of C2 units.
- Whilst our client welcomes the currently suggested increase of 60 C3 units they are disappointed that any increase is tied to the non provision of the hotel and notes that there are other suitable C3 opportunities within the site. This additional 60 C3 units falls a considerable way short of what the site could reasonably and sustainably accommodate (approximately an additional 260 C3 units) likely within existing buildings from change of use and conversion from previously permitted C2 use whilst retaining an element of that type of accommodation within the overall development without comprising any of the heritage of the overall site whether that is the listed buildings, the park and SINC etc.
- From the original grant of outline permission there is a clearly an evolving, everchanging and dynamic development with full realisation of the difficulty in providing those uses previously approved and anticipated (the hotel) with new uses and activities

- not originally approved and anticipated (leisure, hydrotherapy and spa facility independent of any hotel).
- The amount of floorspace granted planning permission under 12/00591/OUT comprises 6,973 or very nearly 7,000sqm health and medical floorspace (Class D1).
   This is clearly an excessive amount of floorspace for such a use in the context of the site and the general location.
- There is clearly further scope to provide additional C3 use where this substantial but unrealistic medical use was previously permitted. The provision of approximately 500 C2/C3 units would only warrant a medical facility of approximately 500-1,000sqm and not the 7,000sqm that is currently available. In our view there is simply no requirement for a large hospital such as was previously on site and that demand only exists for a much smaller facility with no sustainable opportunity of a medical facility somewhere between these two scales. The permitted CCRC facility will remain in place within the main hospital building and additional services such as physiotherapy, podiatry etc if they are not available within the proposed medical facility more appropriately located within the former pathology building.
- We believe that C2 provision should be reduced as shown in this submission so that
  there remains a strong care provision within the site and to accommodate the C3
  increase. C2 provision can be increased potentially through reuse of buildings to be
  retained.
- We have requested that Policy SS6 in relation the subject site be amended as indicated in this submission to accommodate additional C3 units and also to maintain a more appropriate range and balance of uses and that explanatory text to that policy be amended to include the following:

'Reflecting the existing consent which is being implemented, it is envisaged that that the facilities of the site will largely be used across a reasonable and sustainable balance of medical, health and care, and residential purposes that will encourage maximum but sympathetic and sustainable utilisation of buildings and facilities across the site including those not envisaged in the 2014 grant of outline planning permission. This will likely require a further deed of variation to the existing S106 Agreement linked to the outline consent. It may

also require a land capacity assessment and will likely require revisions to the site masterplan previously approved by the local authority.'

## Background

The site, the subject of this submission, has the benefit of planning permission under Gosport Borough Council reg. ref. 12/00591/OUT for which all matters were reserved. That planning permission was accompanied by listed building consent under Gosport reg. ref. 12/00592/LBC and included demolition and partial demolition of various buildings and walls within a listed park and conservation area. The statutory constraints of the site are set out below in further detail along with further details on what was granted outline permission, on what is a very complex and sensitive site.

The outline consent was facilitated by a Section 106 Agreement relating to number of planning obligations including the phasing and timing of the commencement, construction, completion and occupation of various elements of the permitted development as summarised in more detail below. The planning application submitted was lodged in 2012 and the Section 106 was engrossed on 25<sup>th</sup> September 2014. A deed of variation dated 21<sup>st</sup> December 2015 was subsequently agreed between our client and the local authority. A Section 278 legal agreement for offsite roadworks was signed with the Borough Council this past summer.

This is a large and complicated site, is the subject of a complex set of planning permissions and legal obligations, a conservation area, a registered park and numerous listed buildings. As the emerging Borough Plan is at pains to point out the Haslar site is not only constrained with a number of designations but is located within a Borough that is also significantly constrained to provide future development including residential (Class C3) residential development in particular.

## **Planning Context**

The planning context for this submission is the following:

- Outline Planning Permission and Listed Building Consent;
- The Section 106 Obligation and Subsequent Deed of Variation;
- The Masterplan for the site;

• The Adopted Gosport Borough Local Plan 2011-2029

Outline Planning Permission and Listed Building Consent

Outline planning permission was granted in 2014 under Gosport Borough Council ref. 12/00591/OUT for the following key components: mixed use development including demolition of listed buildings and buildings within a conservation area and protected park with conversion of existing buildings and erection of new buildings to comprise 286 no. residential units (Class C3); a Continuing Care Retirement Community containing a 60 no. bed care home, communal facilities and 244 no. self contained retirement units (Class C2); offices and business units (Class B1); a health centre (Class D1); Hotel (Class C1); tearooms and restaurant/bar (Class A3/A4); convenience store (Class A1); church, public hall and heritage centre (Class D10 together with alterations to existing vehicle ad pedestrian access arrangements, open space provision, landscaping and parking.

That planning permission was accompanied by a listed building consent for demolition and partial demolition of various buildings and walls located within this listed park and conservation area under Gosport Borough Council ref. 12/00592/LBA.

The outline consent and the listed building consent were complemented by a grant of full planning permission under Gosport Borough Council ref. no. 14/00192/VOC for the variation of conditions 1, 2, and 3 to remove reference to temporary consent and the removal of condition 4 of planning permission ref. K17770 (Listed Buildings in Conservation Areas).

Planning permission was granted under local authority ref. 16/00446/FUL for landscape improvement works including reprofiling and resurfacing of the promenade, new seating and lighting, alterations to the existing flood defence wall and provisions of gates.

Public access to the Memorial Garden is being facilitated under the auspices of Shoreleave and the provision of a shed under 21/00284/FUL to enable the Garden to be properly maintained and managed for reception of the public. Those works are progressing and are expected to be finished very shortly.

## Section 106 Obligation and Subsequent Deed of Variation

S106 legal obligations dated 25<sup>th</sup> September 2014 were entered into by our client under 12/00591/OUT and included the following:

- The phasing and delivery of development;
- Money from the disposal of the 15 no. existing listed terraced residences to be applied to the refurbishment and restoration of the heritage assets on site.
- Conservation management plan detailing how and when the demolition and renovation and refurbishment of the various heritage assets on the site including the park will take place and the setting out of measures to protect all heritage assets during construction;
- The provision and use of Class D1 health facilities, including use by the general public;
- The provision and use of Class C2 residential institution uses, including details of the care package;
- The provision and use of Class D2 leisure facilities to include a community hall and heritage centre including details of lease arrangements and fit out;
- A training and employment plan;
- The provision and management of open space and access to the site, including the waterfront, by the public;
- The provision of recreational disturbance mitigation and ongoing management measures, including details of the timing of provision; and,
- The provision of infrastructure, services and facilities, education and affordable subject to viability assessments.

A deed of variation was agreed between our client and the local authority on 21<sup>st</sup> December 2015 relating primarily to the statutorily protected terrace of listed residences and the demolition and enhancement and replacement of historical works within the Zymotic area.

## Masterplan for the Haslar Site

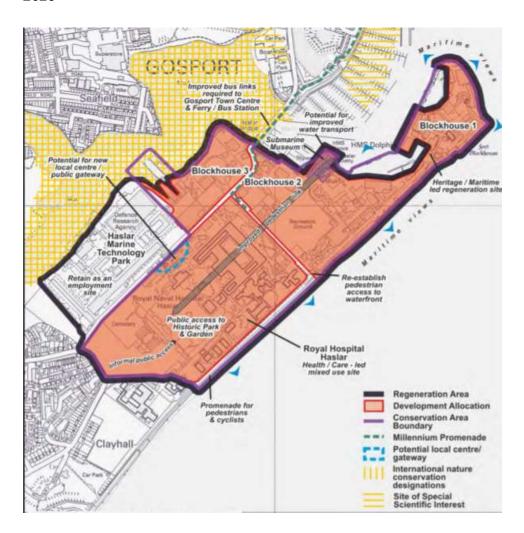
A masterplan was undertaken for the site and the most recent version is the 2014 Addendum Design and Access document produced by Darmody Architecture incorporating various consultant inputs. The context for that document has changed substantially insofar as the statutory plan in place for the site at that time was the Gosport Borough Local Plan Review

2006. The detail of the document has also changed with large areas devoted to medical uses and activities which has consequently been proven to be very aspirational. At that time a more even balance of C2 and C3 uses was anticipated and a hotel seemed a reasonable prospect for delivery on site. It was also anticipated a number of non statutorily protected buildings would be removed but it is becoming increasingly likely that these buildings especially around the pathology building will be retained, repurposed and reused. Much of the site has been cleared including the Cross Link structure.

## Gosport Adopted Borough Local Plan 2011-2029

The statutory development plan in place covering the Haslar Hospital site is the Gosport Borough Local Plan 2011-2029 which was adopted in October 2015. The key part of that local plan determining the future development of the Haslar Hospital site is the identification of the subject site within 'Regeneration Area 3: Haslar Peninsula'. Within Regeneration 3 the Blockhouse/Haslar Gunboat Yard and the Haslar Marine Technology Park including QinetiQ are also identified for future development. The relevant policy covering all 3 sites within Regeneration Area 3 is Policy LP6 which sets out the general principles for all parts of the Haslar Peninsula as well as specific considerations for each of the sites. Within Plan 6 of the adopted Borough Local Plan, which is reproduced below in Figure 1, there are the following key objectives: health care led mixed use site; public access to the Historic Park and Garden, the re-establishment of pedestrian access to the waterfront; and the provision of a promenade for pedestrians and cyclists.

**Figure 1:** Extract from Plan 6 (Haslar Peninsula) of the Adopted Borough Local Plan 2011-2029



The key policy for the development of the Royal Haslar Hospital site, as per the rest of the peninsula, is set out in Policy LP6. LP6 is divided into general policies covering all of the Royal Haslar Hospital, Bockhouse/Haslar Gun Boat Yard; and the Haslar Marine Technology Park including QinetiQ. The second part of the same policy contains Haslar Hospital specific requirements.

The general policy requirements under part (1) of Policy LP6 are as follows:

a) The distinctive built heritage and setting of the Haslar Peninsula is conserved ad enhanced and opportunities are taken to interpret the historic significance of the hospital site and the Blockhouse/Haslar Gunboat Yard;

- b) It accords with the principles set out in Policy LP45 on flood risk including the need to undertake a Flood Risk Assessment with the appropriate flood defences and mitigation measures;
- Measures to avoid and mitigate any adverse impacts on internationally important habitats are taken. Proposals should protect and enhance biodiversity on site and within the vicinity including protected species and important habitats;
- d) Opportunities to improve public transport services and cycling/pedestrian access to and from the site are taken as appropriate;
- e) Any additional traffic generated by the development should be within the capacity of the existing road network and should not compromise the safety of existing roads; and
- f) Contamination issues are addressed.

Further explanatory text is provided on the general policy requirements in paras 7.101-7.119 inclusive. The key points from the explanatory text for LP6 on the general provisions identified above are as follows:

- The protection and enhancement of the historic buildings, and the park and grounds are a key priority and consequently it is important that the buildings are re-used appropriately at an early stage to prevent them falling into disrepair (para 101);
- Most of the site is located within Flood Zone 1 but is surrounded by higher risk areas with one small area in the south west corner (which is to be retained as open space) within Flood Zone 2 (para 7.104);
- Haslar Hospital being in Flood Zone 1 could potentially be surrounded by tidal floodwater in an extreme flood event it would be necessary for any Flood risk Assessment (FRA) to include a flood response plan (para 7.107);
- Proposals should avoid and mitigate any adverse impacts on internationally important habitats) or areas outside of the designated sites known to be of importance to the internationally important species) (para 7.109);
- A project level Habitats Regulation Assessment (HRA, also known as an Appropriate Assessment), is likely to be required at the planning application stage depending on the location and the nature of the proposal in the Harbour Peninsula (para 7.110);
- Part of the hospital site has been identified as a Site of importance for Nature Conservation (SINC) due to the presence of plant life. The site also has evidence of

- badgers, roosting bats, reptiles and nesting birds on site. Consequently, it will be necessary to undertake all the relevant on-site ecological assessments. There are also a number of mature trees which are worthy pf protection (para 7.112);
- Any proposals will need to include details of ongoing management of the natural features of the site in order to protect and enhance the site's biodiversity particularly in relation to habitats and species included in the UK list of Priority Species and Habitats and within Local Biodiversity Action Plans (para 7.112);
- In view of the limitations of the existing access roads and the finite capacity of the bridge over Haslar Creek, HCC as the Highway Authority consider that proposed development on the peninsula should not result in significantly more traffic than that arising when the proposed sites were fully occupied by the MoD. The scale of development proposed on the peninsula will therefore need to be kept within the capacity of the current bridge and highway network (para 7.1115); and,
- Improve accessibility, proposals will need to include a range of measures to accommodate and encourage non-car trips and consequently Travel Plans will be required (para 17.117).

The policy requirements specific to the subject site under part (2) of Policy LP6 are as follows:

- a) Medical, health and care facilities including residential care will be the prime uses on this site including the reuse of the existing facilities and buildings;
- b) Other employment uses will be encouraged including the reuse of buildings for small offices and workshops;
- c) There may be the opportunity for the development of a range of small-scale retail facilities and services to serve the site and the local community;
- d) Appropriate leisure and tourism uses;
- e) Up to 300 dwellings (Use Class C3) will be considered if it can be demonstrated that it is necessary for facilitating the other medical, health and care uses on this site and that it is appropriate to the character and setting of the Hospital site.

The explanatory text that supports and elaborates on the above Policy LP 6 requirements specific to the Haslar Hospital site includes the following key points:

- The site has been designated as a Grade II Registered Park on Historic England's Register of Parks and Gardens of Special Historic Interest. The site also includes a number of Listed Buildings and other important buildings (para 7.121);
- The site includes significant areas used for burial (para 7.121);
- The key characteristics of the site is the formality of the layout and the form of the buildings and the grounds with the subservient scale of buildings to the main hospital (para 7.121);
- The site is suitable for a range of medical and health uses including public medical and health facilities, private healthcare and specialist practices (para 7.123);
- The site could also provide preventative treatment and facilities such as health club/spa uses and a gym (para 7.123);
- The site is suited to care facilities including opportunities for a veterans care facility
  with all the relevant associated facilities and/or a Continuing Care Retirement
  Community (CCRC) as well as extra care facilities (para 7.124);
- The site has potential to play an important role in meeting the demands of an increasingly ageing population (para 7.124);
- There are opportunities for other types of employment including office and workshop types use particularly in the north west of the site (para 7.125);
- Small scale retail is considered to be appropriate and approximately 300sqm is suggested (para 7.127) in order to be policy compliant (para 7.128);
- The site is considered appropriate for hotel and conferencing facilities (para 7.129);
- The adopted Local Plan acknowledges that in order to ensure healthcare/care-led scheme is viable, open market housing is likely to be required (para 7.130);
- Residential use may also represent the best use of particular historic buildings (para 7.130);
- It is considered that around 300 dwellings (Use Class C3) could be accommodated on site (para 7.130);
- The enabling role of any dwellings will need to be clearly demonstrated by a developer (para 7.130);
- It is important that nationally important buildings and grounds will be protected and where appropriate opportunities are taken to enhance the assets (para 7.133);

- Due to the presence of the historic park and garden there is limited scope for new buildings within the site (para 7.133);
- The area of the former 'cross link' building should be restored as open space (para 7.134);
- An important objective for the redevelopment of the site is to encourage public use of the historic grounds and the local authority will also require that public access to the Solent frontage is secured with links to the historic park (para 7.135); and,
- Insufficient capacity in the local sewerage system has been identified to meet anticipated demand from the development proposed at the Royal Hospital Haslar site.
   New or improved local sewerage infrastructure will therefore be required to serve the development or separation of surface water which currently drains to a combined system (para 7.137).

## National Planning Policy Framework (NPPF)

The most recent version of the NPPF is from July 2021. A key principle of the NPPF is the 'presumption in favour of sustainable development' and states that local plans should positively seek opportunities to meet the development needs of their area and be sufficiently flexible to adapt to rapid change. This second point is picked up later on this submission.

Para 2.3.22 of the Draft Local Plan identifies that the NPPF is clear that to support the Government's objective of significantly boosting the supply of homes, local planning authorities need to ensure that local plans allow for a sufficient amount and variety of land to come forward where it is needed. To determine the minimum number of homes needed, the NPPF requires that strategic policies should be informed by a local housing need assessment, conducted using the standard method in national planning guidance – unless exceptional circumstances justify an alternative approach which also reflects current and future demographic trends and market signals. The NPPF (2021) introduces the standard method for calculating the housing requirement for each local authority area.

## The Regulation 18 Draft Gosport Local Plan 2038

The Draft Local Plan recognises at the outset that South Hampshire has a dense and complex settlement pattern with areas of high landscape value and sensitive habitats with the New

Forest National park to the west, the South Downs National Park to the north, and Chichester Harbour Area of Outstanding Natural Beauty to the east and the Solent to the south (para 1.5.8). The South Hampshire local authorities have agreed, through partnership, to maximise development potential in urban areas, minimising greenfield land take, assist in the provision of sustainable modes of transport and protecting the environment including international and national nature conservation designations, flood zones and urban green spaces.

Sections 1.6 and 1.7 present the Borough profile and issues as follows:

- The Borough is predominantly urban in character with 80% built upon. Space is at a premium so must be used effectively;
- By 2038 the number of households is expected to increase by 4.4% but the household size will decrease to 2.14 persons per household;
- The population is ageing due to longer life expectancy with nearly 30% of the Boroughs population to be over 65 by 2038;
- There is low density of employment provided in the Borough one of the lowest in the UK;
- The Borough is a relatively affordable place to live compared to other parts of the region. The Borough is characterised by smaller properties with 59% comprising terraced houses or flats;
- Over the last decade the number of new housing completions has reduced in part due to national trends but also the type of development land and its availability. Since 2011, an average of 130 dwellings were completed every year;
- The enhancement of leisure and cultural facilities is an area where the Local Plan can deliver:
- The Borough faces significant flood risk from a variety of sources. Predicted increases
  in the frequency and intensity of storms will likely have implications for the Borough's
  coastal defences. The quality of Gosport's environment is reflected in its built heritage
  which relates closely to its naval and maritime associations;
- The Borough has 17 conservation areas covering 260 hectares of land, 2 no. Areas of Special Character, approximately 540 Listed Buildings, 13 Scheduled Ancient Monuments, 2 Listed Parks and Gardens as well as many locally significant heritage assets;

- Growth is constrained by the peninsula location and land in active military use. Large areas, previously used by the MoD, require significant investment and more complex to redevelop;
- A substantial number of new homes are required;
- The natural environment and diverse range of habitats and species need protection from the pressures of new development as well as biodiversity enhancements so that can continue to be enjoyed by all;
- The rich historic built environment risks being eroded through insensitive development
  which fails to promote local distinctiveness. It is therefore necessary to find suitable
  uses which preserve and enhances the significance of historic buildings and their
  setting.

In respect of a vision, outlined in Section 1.8, it is stated that:

'Growth in the right kind of housing is a priority. The provision of new market and affordable homes will be focused on making the best possible use of previously developed land. New homes will be well designed, come in a variety of sizes and forms, and be built to nationally recognised standards.'

The emerging local plan also seeks to 'regenerate Gosport through the delivery of high quality sites and enhance a sense of place.' This is to be achieved by:

- Making the most effective possible use of land and prioritising brownfield sites in accessible locations.
- Promoting local distinctiveness through the conservation and enhancement of the Borough's rich historic built environment and ensuring all new development is of the highest quality.
- Creating high quality environments in the Borough's Regeneration Areas, working collaboratively for positive outcomes, which celebrate heritage assets and maximise economic regeneration.

Policy D1 also seeks to adapt and mitigate against climate change through:

a) Promoting a sustainable pattern of development by directing growth towards locations that reduce the need to travel and maximise the ability to make trips by sustainable

- modes of transport (Policies D2: Development Strategy, D3: Urban Regeneration Areas and D12: Accessibility to New Development);
- b) Delivering higher densities of development on the most accessible sites (D3: Urban Regeneration Areas and H1: Sustainable Residential Neighbourhoods).

Policy D2 (Development Strategy) sets out a target of some 3,500 net additional new dwellings and additionally states under point 3 that:

'Brownfield land within the urban area of the Borough will be the priority for new development. New mixed-use development will be focused within the following Regeneration Areas in line with Policy D3:

Urban Regeneration Areas:

- a) Harbour Regeneration Area
- b) Rowner and HMS Sultan Regeneration Area
- c) Daedalus Regeneration Area'

Explanatory para 2.3.10 states that 'Brownfield sites will also be required to deliver sufficient housing to meet as far as possible the housing future identified by the Government's standard method.' It is acknowledged that this needs to be balanced with the need to provide sufficient land for employment and commercial floorspace, open space and community facilities to ensure that Gosport becomes more of a sustainable Borough. It will be necessary to protect and enhance the quality of the local environment to ensure the Borough remains a place where people wish to live, work and invest. Urban Regeneration Areas (URAs) have been identified which are integral to delivery of the overall strategy. Within the URAs are Strategic Development Sites which are largely brownfield sites and they will play a major role in regenerating the Borough providing a range of uses.

Para 2.3.24 states that the local housing requirement is 5,576 homes between 2021 and 2038 which works out at 328 homes every year. The Draft Local Plan however points out in para 2.3.25 that the requirement for some 5,576 homes is not achievable. Following two 'Calls for Sites' to landowners, agents and developers as well as the findings of the Strategic Housing Land Availability Assessment (SLAA), as well as considering past trends, the standard method

figure of 5,576 homes is not achievable and instead a figure of approaching 3,500 homes would be deliverable within the borough. This would represent 206 dwellings per annum (dpa) (over a 17 year period between 2021 and 2038) and would be an increase in the delivery rate when compared with the current Adopted Local Plan (GBLP 2011-2029) which requires 170 dpa as stated in para 3.2.25.

#### Para 3.2.26 states that:

'It is clear that given the sites available, the Borough's already built-up nature and various ecological and other environmental constraints as well as the need to provide a balanced community with sufficient employment opportunities that it will not be possible to provide a sufficient amount of land to accommodate 5,576 homes in the Borough. This would currently mean that the Borough has an unmet need of 2,076 dwellings (assuming a supply of 3,500 dwellings is achieved).'

Para 2.3.29 states that the Borough has long recognised constraints on the availability of sites and limitations of highway infrastructure associated with its peninsula location. The shortfall of c2,000 dwellings cannot be met therefore in the eyes of the local authority.

Table 2 (Housing Supply as at 1<sup>st</sup> April 2021 for the Plan period to 2038) identifies some 262 C3 residential units for the subject site granted planning permission and not built out. A further 151 C3 units in the equivalency of C2 units are identified for the Royal Haslar Hospital site. It should be noted that these figures compare with 284 C3 units and 244 C2 units granted permission.

Para 2.3.37 states that the Borough has significant areas of brownfield land as a result of its military legacy. 'Consequently the use of this land in the urban area is a key priority as it will regenerate underused sites, bringing back life to previously vibrant areas which provided employment and a variety of local facilities. Any such proposals for brownfield land would still need to take account of whether the site includes land of high environmental value.'

#### Para 2.3.38 states that:

'Since 2003 94.5% of new dwellings in Gosport Borough have been built on Previously Developed Land. In many cases the re-use of brownfield sites in the Borough

represents an opportunity to re-use historic buildings and such proposals add to the distinctive character of the Borough. The focus of development on brownfield sites also safeguards the finite resource of green open spaces in one of the most built-up areas in the South East.'

The subject site is located within the R1 Harbour Regeneration Area. Policy D3 (Urban Regeneration Areas) sets out the policy for all three URAs. It states:

## 'Policy D3: Urban Regeneration Areas

- 1. The Council supports major regeneration and growth in the Borough's three urban Regeneration Areas and will work with the local community and key stakeholders to ensure that within these areas proposals provide new exemplary urban communities delivered to the highest possible design standards through responsibly capitalising on its waterfront townscape, heritage assets and marine environment. The Council's key objectives for the three urban Regeneration Areas are to deliver:
- a) At least 2,600 new homes in the period up to 2038 to contribute towards meeting local housing needs and enable local residents the opportunity to access affordable home to buy or rent;
- b) Sufficient suitable sites to assist the development and evolution of Gosport as a world-class global hub for marine and maritime economic activity and provide an overall broader range of job opportunities for local residents; and c) New physical, social and environmental infrastructure that meets the needs of all residents and visitors including improved access and permeability by connecting places through new or improved vehicular arrangements, pedestrian and cycle routes, and public transport infrastructure.
- 2. All development proposals within the three Urban Regeneration Areas should address the following key local issues in line with the relevant strategic policy and national planning guidance:
- a) Protect, enhance and find viable new uses for Gosport's unique set of heritage assets:

- b) Avoid and reduce the risks from all sources of flooding and the impacts on coastal processes and ensure that flood risk is not increased elsewhere as a result;
- c) Protect the quality and status of internationally and nationally important sites and where necessary provide suitable mitigation; and
- d) Suitably address issues of land contamination.'

Explanatory para 2.4.20 in relation to housing (point 1a of Policy D3) acknowledges that 'Gosport Borough has a notably more restricted supply of developable land for additional housing than other local authorities in the South Hampshire area, given it is heavily built-up and constrained by an extensive coastline with its sensitive habitats and potential flood risk. Each urban regeneration area nonetheless includes significant parcels of previously developed land with redevelopment potential which can contribute to meeting a proportion of the identified housing needs of the Borough.'

Regarding residential needs, para 2.4.21 states that 'The emphasis in the Urban Regeneration Areas is on efficiently using land to deliver medium to higher density residential development that provides a significant proportion of the overall number of smaller dwellings identified as being needed in Gosport in the plan period. Within the Town Centre and Waterfront it is anticipated that the predominant residential typology provided will be flats. Within the Haslar Peninsula, Rowner and Daedalus it is anticipated that there will be greater scope for providing a broader mix of residential typologies including flats, family houses, age-restricted housing and residential care homes for people with needs.'

Para 2.4.32 recognises that Haslar Hopital has a Grade II Registered Park and Garden, which was the first purpose-built naval hospital in England and includes a number of Listed Buildings such as the Ward Blocks (II\*) and the Chapel of St. Luke (II\*).

In the context of Heritage Assets (point 2a of Policy D3) para 2.4.32 states that:

'Enhancing, or better revealing the significance of heritage assets within the urban Regeneration Areas should always be addressed in development proposals and may be achieved through positive planning which includes:

Removing an intrusive building or feature;

- Replacement of a detrimental feature by a new and more harmonious one;
- Restoring or revealing a lost historic feature or view;
- Introducing a wholly new feature that adds to the public appreciation of the heritage asset;
- Introducing new views, including glimpses or better framed view that add to the public experience of the asset; and
- Improving public access to, or interpretation, of the heritage asset including its setting.'

Policy D7 (Flood Risk and Coastal Erosion) under Point 3 states that 'A site-specific Flood Risk Assessment (FRA) will be required for development proposals on those sites which are 1 hectare or more in Flood Zone 1 and for all development on land within Flood Zones 2 and 3. The FRA must also clearly demonstrate that: a) any residual risks can be safely managed; and b) safe access and egress to and from the site.

Policy D8 (Healthy Communities) advocates the promotion of heathy living without actually facilitating or promoting sports, recreation and leisure amenities and facilities.

Policy D10 (Heritage Assets) identifies that the local planning authority will grant planning permission for development that conserves or enhances those features which positively contribute to its special architectural, historic, landscape or archaeological interest and crucially in the context of Royal Haslar Hospital states under point 5 of Policy D10 that 'Heritage assets at risk will be monitored and development proposals that improve their condition will be encouraged.'

Crucial to the future development of the Royal Haslar Hospital site is Policy SS6 (Royal Haslar Hospital). Policy SS6 is set out as follows:

'Policy SS6 Royal Haslar Hospital

 Land at Haslar Hospital, as shown on the Policies Map, is allocated for the following mixed-use development:

- a) Either:
- i. Up to 300 residential dwellings (Class C3 use) and a hotel (Class C1); or
- ii. Up to 360 residential dwellings (Class C3 use).
- b) Up to 305 residential care units (Class C2 use);
- c) Medical, health and care facilities including residential care will be the prime uses on this site including the re-use of existing facilities and buildings;
- d) Other employment uses will be encouraged including the reuse of buildings for small offices and workshops;
- e) Appropriate leisure and tourism uses;
- f) Small-scale retail facilities and services to serve the site and the local community.
- 2. Development proposals should address the following design and habitat objectives:
  - a) The Listed Buildings and the Historic Park and Garden are conserved and where appropriate enhanced;
  - b) That public access to the Historic Park and Garden and the Solent frontage is secured; and
  - c) The on-site Haslar Hospital Site of Importance to Nature Conservation (SINC) is appropriately protected and opportunities taken to enhance it.
- 3. Development proposals should be served by a sufficient level of infrastructure including a connection to the sewerage system at an appropriate point of adequate capacity.
- 4. Flood risk from all sources of flooding must be fully taken into account for development proposals at Royal Haslar Hospital through site-specific FRA(s). New development will be safely managed through the application of appropriate flood risk mitigation measures.'

Key elements of the explanatory text to Policy SS6 include the following:

Para 3.8.3 states that 'Reflecting the existing consent which is being implemented, albeit slowly, it is envisaged that that the facilities of the site will largely be used for medical, health and care, and residential purposes. Due to the large amount of floorspace at Royal Hospital Haslar there are a range of other uses that could be accommodated on the site which are

compatible with these health related and residential uses. It will also be important to create as many jobs as possible to replace the employees that worked on the site and help address the current residential/employment imbalance in the Borough.'

Para 3.8.4 states that 'Reflecting the existing consent, residential use may also represent the best use of particular historic buildings. It is considered that around 300 dwellings (Use Class C3) could be accommodated on the site in addition to the consented hotel. However, if the hotel was found not to be a viable proposition, it is considered that an additional 60 residential dwellings, up to an overall total of 360 Class C3 residential dwellings, could be provided instead of the hotel.'

Para 3.8.5 states that 'The site is also suitable for a range of medical and health uses including public medical and health facilities, private healthcare and specialist practices. The site could also include preventative treatment and facilities such as a health club/spa uses and a gym. The site is suited to care facilities including opportunities for a veteran's care facility with all the relevant associated facilities and/or a Continuing Care Retirement Community (CCRC) as well as extra-care facilities. The site has the potential to play an important role in meeting the demands of an increasingly ageing population.'

Para 3.8.10 states that 'The key characteristic of the Hospital site is the formality of the layout and the form of the buildings and grounds with the subservient scale of buildings to the main hospital.'

Para 3.8.11 in respect of the landscape setting states that 'As Haslar Hospital is a Registered Park & Garden, particular regard will be given to protecting the unique historic landscape in development proposals.'

Para 3.8.12 states that 'Due to the presence of the 'historic park and garden there is limited scope for new buildings within the site but where opportunities do exist planning applications should be accompanied with the relevant supporting material demonstrating how the proposal respects the historic features and setting of the hospital site.'

It is noted that allocated housing sites outside URAs are located some distance away from the subject site as shown in Plan 19 entitled 'Other allocation sites outside the Regeneration Areas'.

The housing section of the emerging Local Plan summarises the key housing issues and these are identified as:

- There is a continual demand for a range of housing to meet local needs at each stage
  of life and meet the requirements of the increasing number of households;
- There is clear need, and hence justification, for the provision of affordable housing, particularly rented tenures;
- Access to capital and employment conditions are key factors in restricting access to market housing as well as the cost of housing;
- The number of older people (conventionally those aged 65 and over) and those with long-term health problems will increase notably in the future and the specific housing needs arising should be planned for; and
- The focus of new market housing provision will continue to be on 2- and 3-bed properties with demand from both younger families and downsizers.

Key housing policy in the context of the subject site is Policy H1 (Sustainable Residential Neighbourhoods).

## 'Policy H1: Sustainable Residential Neighbourhoods

- 1. The appropriate density of residential development will be informed and assessed by:
- The need to maximise the efficient use of scarce land resources;
- The character and mix of uses of the area in which it is located taking into account local townscape, protected trees and heritage assets;
- Level of accessibility in terms of walking, cycling and public transport; and
- The need to minimise environmental and amenity impacts.
- 2. Indicative built densities for different areas are set out in Table 3 but the criteria above may indicate that a different density is appropriate. Where the proposed built density falls below that specified the applicant will be expected to provide supporting information justifying the density proposed. Applications that, on balance of

considerations, either fail to make efficient use of land or propose an excessively high density for its context, will be refused.

- 3. New residential development should contribute towards meeting the need for a mix of housing as set out in Table 4 with the aim of delivering mixed, balanced and sustainable neighbourhoods. Account will need to be taken of the:
- Strategic Housing Market Assessment (or any subsequent revision);
- Detailed Local Housing Market Assessments (where applicable);
- Current and future demographic studies and profiles;
- Locality and ability of the site to accommodate a mix of housing; and
- Market signals and local housing market trends.

Applications that, on balance of considerations, fail to provide a suitable mix of housing will be refused.

- 3. The regeneration and renewal of existing housing estates, or larger sites partly comprised of housing estates, will continue to be promoted to ensure that high quality new housing and site environments are provided in line with the principles of sustainable neighbourhoods set out in Point 1 above. In redeveloping existing housing estates opportunities to improve public open spaces, provide new or improved community facilities and alternative modes of transport, and create opportunities for employment will be taken where appropriate.
- 4. Proposals for self and custom build housing, to be occupied as homes by those individuals, will be supported by the Council where they are in conformity with all other relevant local and national policies. On sites with 40 or more non-flatted market dwellings site promoters should provide at least 2.5% of plots as self-build plots.'

Table 3 (indicative Built Density Range (dwellings per hectare (DPH)) shows indicative densities across several types of location: Town Centre and Waterfront; Other Regeneration Areas such as the subject site where the range of 50 to 100dp is considered acceptable in principle; and Suburban areas.

Table 6 (Mix of Housing by Size and Tenure) sets out the recommended mix of market and affordable dwellings. Para 5.3.6 further states that 'In all proposals at least 70% of the market dwellings should also be a suitable mix of 2-bed and 3-bed dwellings, given that this is the source of greatest need, irrespective of whether they are flats or houses or a mix of both. The Council will however be willing to negotiate in exceptional circumstances a different market housing mix if it can be demonstrated that this would result in other significant positive benefits to the local community. This could include for example the optimal viable use of a designated heritage asset.'

Para 5.4.9 states that 'The Gosport Borough Council Demographic Projections (September 2019) sets out (Paragraph 3.67) that it would be reasonable for the Borough Council to conclude that there is <u>no</u> need to provide housing under the new NPPF definition of affordable home ownership.'

Policy H3 (Housing for Older and Vulnerable People) identifies a positive approach being taken towards housing proposals that seek to meet the needs of an ageing population and increased needs for those with disabilities.

Para 5.11.11 under 'Policy E3: Tourism' identifies the subject site as a tourism and visitor economy opportunity where it is stated 'Public access to the listed park and gardens and Solent frontage at Royal Haslar Hospital together with a café and the interpretation of historic features as part of the consented scheme at the site (see Policy SS6).'

Policy C6 (Community, Cultural and Built Leisure Facilities) supports the development of new community, cultural and built leisure facilities including those proposed within the regeneration areas and other proposed sites.

Policy LE8 (Securing Measurable Biodiversity Net Gain) states:

## 'Policy LE8: Securing Measurable Biodiversity

- 1. All developments are expected to provide a net gain in on-site biodiversity and where possible contribute towards the wider Local Ecological Network.
- 2. Development meeting the thresholds set out below are required to secure a measurable net gain of biodiversity of at least a 10% increase in biodiversity units for the lifetime of the development and contribute towards the wider network of green infrastructure (see Policy D4) and the Local Ecological Network (see Policy D5). The development thresholds are:
- a) Development of 10 dwellings or 0.5ha or more (if the number of homes is not known);
- b) Development for other buildings of 1,000 square metres or more and a site of 1 hectare or more.
- 3. Planning conditions or obligations will be considered to provide appropriate enhancement and site management measures. Arrangements for the long-term management of any measures required will need to be appropriately secured.'

## Our Client's Submission on the Regulation 18 Draft Local Plan 2038

As indicated above our client generally welcomes the Draft Local Plan and the opportunity to comment on it.

Our client's principal concern is the limit, albeit increased from 300 to 360 for C3 residential on the subject site set out within Policy SS6. Our client feels that such a small increase is unjustified or that such a limit should not be imposed as long as a reasonable or proportionate level of C2 uses and health and medical and other mixed use are also provided. Further justification is set out under the following headings:

- Borough Context
- Housing Justification
- Site and Development Justification
- Provisions of the NPPF

Other Provisions in the Draft Local Plan and Associated Documents

Our detailed comments are as follows:

## Borough Context

Additional C3 residential to that currently proposed to be limited to 360, from the previous 300 of the adopted local plan can clearly be provided on the subject site. This contrasts dramatically with the non-ability of the rest of the Borough outside the URAs and limited housing allocation sites to accommodate further residential development to the required quantum as acknowledged by the local authority in the emerging Local Plan itself.

Sections 1.6 and 1.7 stated that amongst other things that the borough is already 80% built upon and that space is at a premium; the number of households is increasing but the size of households is decreasing; the population is ageing; the Borough is characterised by smaller properties (ie. 59% terraced houses or flats); new housing completions have reduced with only an average of 130 dwellings completed every year since 2011; growth is constrained by the peninsula location and land in active military use with large areas requiring significant investment and are more complex to develop as in this instance; a substantial number of new homes are required; and preservation and enhancement of the built and natural heritage of the borough are to be encouraged. This indicates that, within reason, as outlined below, the Haslar Hospital site should be considered for further C3 housing over that currently stipulated in the emerging local plan and tied to the future non provision of any hotel on site.

Any increase in the provision of C3 housing on the subject site can be consistent with the Draft Local Plan's vision for the Borough which is:

'Growth in the right kind of housing is a priority. The provision of new market and affordable homes will be focused on making the best possible use of previously developed land. New homes will be well designed, come in a variety of sizes and forms, and be built to nationally recognised standards.'

That vision is to be achieved by the following, all of which are in alignment with the provision of additional C3 units on this site:

- Making the most effective possible use of land and prioritising brownfield sites in accessible locations.
- Promoting local distinctiveness through the conservation and enhancement of the Borough's rich historic built environment and ensuring all new development is of the highest quality.
- Creating high quality environments in the Borough's Regeneration Areas, working collaboratively for positive outcomes, which celebrate heritage assets and maximise economic regeneration.

It does not make planning sense to frustrate these objectives for the retention of brownfield land and floorspace within existing buildings for medical use for which there is insignificant demand when there clearly is pressing demand for housing in the borough as clearly stated in the draft local plan itself and indeed a significant housing shortfall in the Borough to 2038. Brownfield sites such as this are required to deliver sufficient housing to meet as far as possible the housing figure identified by the Government's standard method (para 2.3.10).

## Housing Justification

Using the Government's mandated standard for identifying housing need the emerging Local Plan acknowledges that there is a need for some 5,576 homes between 2021 and 2038 which works out at 328 homes every year. The Draft Local Plan however points out in para 2.3.25 that the requirement for some 5,576 homes is not achievable and that following two Calls for Sites' to landowners, agents and developers as well as the findings of the Strategic Housing Land Availability Assessment (SLAA), as well as considering past trends, that the standard method figure of 5,576 homes is not achievable and instead a figure of approaching 3,500 homes would be deliverable within the borough. Meeting the shortfall of 2,000 homes has clearly been abandoned by the local authority but we believe that this should not be the case with the subject site potentially being a major contributor (perhaps 13%) of this 2,000 dwelling shortfall to 2038.

The subject site clearly would go some way to bridging the shortfall of approximately 2,000 new homes and this is a significant shortfall given the size and population of the

borough. However, we believe there is substantial potential within the subject site to accommodate at least a further 260 C3 units (including the 60 in lieu of the hotel). This additional 260 no. C3 units from the 300 limit of the 2011 adopted local plan would likely comprise the following: an additional 60 units where the hotel was previously approved as accepted in emerging Policy SS6; a further 50 units from the conversion of the previously permitted medical and health floorspace within the main building; and the remaining circa 150 units coming from conversion of C2 units within Blocks A to F and residually the provision of sympathetic extensions to existing and approved buildings on site.

Table 2 of the emerging Local Plan identifies some 262 C3 units not built out as per April this year and a further 151 units equivalency from the C2 units permitted (244 C2 units were permitted).

Where there is such a significant shortfall in housing provision within the Borough further consideration should be given in the plan to increasing the housing allocation of C3 units for this site. The provision of an additional 260 units would meet 13% of the Borough's shortfall in a manner appropriate to housing type needs (Terraces or flats).

Whilst our client partially welcomes an increase of 60 units they are disappointed that any increase is tied to the non provision of the hotel and notes that there are other substantial suitable conversion or change of use C3 opportunities within the site. This additional 60 C3 units suggested by the Borough Council falls a considerable way short of what the site could reasonably and sustainably accommodate (approximately an additional 260 C3 units) likely within existing buildings from change of use and conversion from previously permitted C2 use whilst retaining an element of that type of accommodation within the overall development without comprising any of the heritage of the overall site whether that is the listed buildings, the park and SINC etc. There would be a consequential drop in the number of C2 units to be provided so that the site is not overdeveloped.

The equivalent policy of the adopted plan (Policy LP6) stated that around 300 C3 units could be accommodated and that the enabling role of any dwellings would need to be demonstrated by the developer. We believe, to use that same phrase, an increase can be accommodated as long as the enabling role of dwellings (presumably considered in the context of restoration

and sympathetic reuse of the site's considerable built heritage) was demonstrated in proposals for such an increase as well as protection and enhancement of the site's natural and built heritage.

We request that Part 1 Policy D3 (Urban Regeneration) be amended to reflect an increase in the number of new homes to be provided up to 2038 from the currently stated 2,600 homes to an increased figure to be determined by the local authority including this and other regeneration and allocated sites. An increase in C3 units on the Royal Haslar Hospital site as requested would be consistent with Part 2 as follows:

- a) Protect, enhance and find viable new uses for Gosport's unique set of heritage assets;
- b) Avoid and reduce the risks from all sources of flooding and the impacts on coastal processes and ensure that flood risk is not increased elsewhere as a result;
- c) Protect the quality and status of internationally and nationally important sites and where necessary provide suitable mitigation; and
- d) Suitably address issues of land contamination.

All of these requirements can be met with the requested increased allocation of C3 units much of which will be achieved with change of use or insignificant conversion from C2 and meet a significant shortfall in housing provision which at a shortfall currently of 2,000 homes means people leaving the Borough, which would be highly undesirable, regrettable and most importantly unsustainable in planning terms.

The requested additional C3 provision is consistent with para 3.8.4 which states that 'Reflecting the existing consent, residential use may also represent the best use of particular historic buildings.'

## Site and Development Context

Our client is very clear that outline planning permission was granted in 2014 for a mixed use development with an emphasis on care and medical, employment and residential with a prerogative to protect and preserve, reveal and accentuate, and give access to what is a sensitive built and natural environment. It is also clear that whilst some medical use would be

retained and employment and other mixed use activities would be provided that residential C3 would be the facilitator to achieving these highly desirable outcomes.

From that outline grant of planning permission it is clear that a hotel is not going to be viable on the site for the foreseeable future and this is acknowledged by the local authority in their emerging Policy SS6 referred to above and their willingness in the form of Draft Policy SS6 to accommodate additional 60 C3 units at the expense of the hotel. It is intended that employment and other uses will be accommodated in time and indeed there is an imminent planning application for a leisure centre, hydrotherapy and spa to be lodged shortly. From the original grant of outline permission there is a clearly an evolving, everchanging and dynamic development with full realisation of the difficulty in providing those uses previously approved and anticipated (the hotel) with new uses and activities not originally approved and anticipated (leisure, hydrotherapy and spa facility independent of any hotel).

The amount of floorspace granted planning permission under 12/00591/OUT comprises 6,973 or very nearly 7,000sqm health and medical floorspace (Class D1). This comprises 1,174sqm in the basement, 1,932sqm on ground floor, 1,921sqm on the first floor and 1,946sqm on the second floor of Block D of the main building. This is clearly an excessive amount of floorspace for such a use in the context of the site and the general location. From our discussions with architects some 7,000sqm (or 70,000sqft) would provide a scale of facility that would be well beyond the requirements of not just the development and residents living on the remainder of the site but well beyond what the site could sustainably accommodate commercially, operatively, sustainably and from a transport perspective. Such a scale as originally anticipated would likely involve a facility offering substantial elected surgery, which we acknowledge would provide a strong connection to the past, but would also involve a significant number of overnight patients and stays which is likely unrealistic in the context of the site's overall future development.

There is clearly further scope to provide additional C3 on the subject site and primarily within the main hospital building where a very large floorspace was previously permitted for medical use. The provision of approximately 500-650 C2/C3 units would only warrant a medical facility of approximately 500-1,000sqm and not the 7,000sqm that is currently permitted. The permitted CCRC facility will remain in place within the main hospital building and additional services such as physiotherapy, podiatry etc if they are not available within the proposed

medical facility more appropriately located within the former pathology building, can be proposed within the employment floorspace of which there is sufficient floorspace anticipated.

The provision of additional C3 units whilst retaining the essence of the outline consent whilst meeting current housing need would be consistent with para 3.8.5 of the emerging Local Plan which states that 'The site is also suitable for a range of medical and health uses including public medical and health facilities, private healthcare and specialist practices. The site could also include preventative treatment and facilities such as a health club/spa uses and a gym. The site is suited to care facilities including opportunities for a veteran's care facility with all the relevant associated facilities and/or a Continuing Care Retirement Community (CCRC) as well as extra-care facilities. The site has the potential to play an important role in meeting the demands of an increasingly ageing population.'

#### Provisions of the NPPF

The NPPF advocates sustainable development and in that regard our clients request for greater accommodation of C3 can be sustainably and acceptably achieved on site. The NPPF states that 'local plans should positively seek opportunities to meet the development needs of their area and be sufficiently flexible to adapt to rapid change.' There is clearly a shortage of homes projected to 2038 that our client can assist in meeting. The NPPF states that its aim is to boost the provision of new homes.

Para 119 of the NPPF states that 'Planning policies and decisions should promote an effective use of land in meeting the need for homes and other uses, while safeguarding and improving the environment and ensuring safe and healthy living conditions. Strategic policies should set out a clear strategy for accommodating objectively assessed needs, in a way that makes as much use as possible of previously-developed or 'brownfield' land.'

Our requested amendments and the consistency requested in Policy SS6 are consistent with the NPPF therefore.

Other Provisions in the Draft Local Plan and Associated Documents

As part of the current local plan review the Borough Council has undertaken a Strategic Housing Land Availability Assessment (SLAA). As part of broader assessment of the Haslar

peninsula there is reference to a housing capacity of 1,173 in Section 5.5 of the SHLAA Stage 2 Site/Broad Location Assessment but in Table 2 of the same document, in Section 5.10 there is reference to a capacity of 1,772. Is there an inconsistency in these differing figures?

A further stage to assessment of housing potential of sites considered under the SLAA process is contained in Appendix 2 of the Stage 2 SHLAA document, the key element which relates to the Royal Haslar Hospital site is shown below, in Figure 2.

Figure 2: Stage 2 SHLAA for Royal Hospital Haslar



Our client accepts what the Borough Council acknowledge above, that the subject site is a significant brownfield mixed use regeneration site. It is accepted that there are nationally important heritage assets and a number of other constraints and viability issues. However, closer inspection of the site and its context would clearly indicate that there is considerable scope for additional C3 units on site a substantial proportion of which would not interfere with those nationally important heritage assets. However, we support the next sentence in Figure 2 which states that 'cross-subsidy with residential units is making development achievable.' We are aware of several opportunities on site where additional C3 can be provided without harm to built or natural heritage assets. These potential C3 opportunities are not considered adverse to the preservation or enhancement to existing heritage assets on site. In the majority of cases they involve conversion or change of use which must be considered relatively benign in the context of contamination, flooding, the character and appearance of the conservation area and registered park and the need for additional new build would be considered to be minimal.

We request that Policy SS6 be amended as follows with additional text in bold and text to be deleted in strikethrough.

"Policy SS6 Royal Haslar Hospital

- 1. Land at Haslar Hospital, as shown on the Policies Map, is allocated for the following mixed-use development:
  - a) Either:
  - i. Up to 300 500 residential dwellings (Class C3 use) and a hotel (Class C1); or
  - ii. Up to 360 560 residential dwellings (Class C3 use).
  - b) A minimum of Up to 305 100 residential care units (Class C2 use);
  - c) A range of medical, health and care facilities including residential care will be the prime uses provided on this site including the sympathetic and sustainable re-use of existing facilities and buildings not previously envisaged under outline planning permission 12/00591/OUT;
  - d) Other employment uses will be encouraged including the reuse of buildings for small offices, and workshops and professional services allied to health, medical and leisure including physiotherapy, podiatry, hydrotherapy etc;
  - e) Appropriate leisure, wellness and tourism uses;
  - f) Small-scale retail facilities and services to serve the site and the local community.
- 2. Development proposals should address the following design and habitat objectives:
  - a) The Listed Buildings and the Historic Park and Garden are conserved and where appropriate enhanced;
  - b) That public access to the Historic Park and Garden and the Solent frontage is secured; and
  - c) The on-site Haslar Hospital Site of Importance to Nature Conservation (SINC) is appropriately protected and opportunities taken to enhance it.
- 3. Development proposals should be served by a sufficient level of infrastructure including a connection to the sewerage system at an appropriate point of adequate capacity.

- 4. Flood risk from all sources of flooding must be fully taken into account for development proposals at Royal Haslar Hospital through site-specific FRA(s). New development will be safely managed through the application of appropriate flood risk mitigation measures.
- 5. Substantial development towards meeting the above thresholds should be accompanied by a transport assessment and where necessary a Travel Plan.

We request that a visual to accompany Policy SS6 as the Royal Hospital Haslar in the manner that Plan 16 is presented for the Fort Blockhouse and Plan 17 represents the Rowner and HMS Sultan site.

We request that the words 'albeit slowly' in para 3.8.3 be deleted and that a number of changes reflective of our requested changes to Policy SS6 be incorporated also so that this para would read as follows:

'Reflecting the existing consent which is being implemented, albeit slowly, it is envisaged that that the facilities of the site will largely be used foracross a reasonable and sustainable balance of medical, health and care, and residential purposes that will encourage maximum but sympathetic and sustainable utilisation of buildings and facilities across the site including those not envisaged in the 2014 grant of outline planning permission. This will likely require a further deed of variation to the existing S106 Agreement linked to the outline consent. It may also require a land capacity assessment and will likely require revisions to the site masterplan previously approved by the local authority.

The above suggested rewording is reflective of the fact that uses and activities must be sustainable and that there is potential for buildings on site not previously identified for use in the outline consent or subsequently, to be reused. The use of the former pathology building for a reduced medical or health facility is a case in point. The use of the basement of Blocks D and E for leisure, spa and hydrotherapy, where no previous permission was granted is another example. The delay in developing the site is a consequence of a complex site, the need for a large number of technical reports to be provided and by broader economic circumstances as well as more recently challenges presented by Brexit and Covid 19.

The Borough Council may wish to add to the explanatory text of Policy SS6 that the adopted masterplan for the site will likely have to be revised and updated and that a land capacity assessment for the development of the site may have to be produced to justify further development on site including C3.

We would suggest that, as a consequence of the above, the figure of 2,600 new homes referred to in point (a) of Part 1 of Policy D3 (Urban Regeneration Areas) be amended accordingly taking account of this submission and potentially others in relation to the other URAs and allocated sites. There will likely be other places in the Draft Local Plan that this figure will change.

We trust you will give due consideration to this submission.

Yours sincerely

Eamonn Prenter

CUNNANE TOWN PLANNING LLP