

Springfield

June 2010
New proposals



Introduction from the Chief Executive



Judy Wilson
Chief Executive

The development of Springfield is a matter of great importance to us at the Trust and of course to you, our neighbours, partners, service users and staff. We have received many hundreds of responses to our original planning application, and have been left in no doubt about your views.

The following pages set out the aims, background and details of the Trust's new proposals for Springfield, highlighting the changes that have been made in response to feedback from the community on and since the refusal of our initial application. Information about our proposed timetable is on the back page, together with details of how to contact us. We welcome your comments – please feel free to get in touch.

Aims



The Trust's chief concern is providing excellent services for those members of our community who require mental health care, and to do this we need the best possible facilities. Unfortunately, the majority of Springfield's current facilities are not of an appropriate standard, and cannot be improved sufficiently through refurbishment. The 80-acre site is itself a largely untapped resource, with wasted space, many empty and crumbling buildings, and an incoherent layout that is difficult both to navigate and to maintain securely. It is generally acknowledged that the Trust cannot continue this way: we need to make better use of this asset so that we can stop wasting resources on empty and unsuitable space and concentrate them on the care we provide.

At the same time, the necessary regeneration of Springfield provides an opportunity to make it something that really benefits the community – other local people as well as those receiving the care we provide. The scheme includes provision of residential accommodation – including much-needed affordable houses for families – as well as a variety of high-quality outdoor space, allocated space for community facilities, a school, a care home and supported independent living units for people with learning disabilities. It also includes improvements to public transport and pedestrian and cycle facilities. The site will be easier to navigate and more secure, with improved access and enhanced transport links. Details of these benefits are set out in the following pages.

Springfield today

The main building, Springfield Village, and the derelict Orchid Wing

Background Site

Springfield is the Trust's largest site and the location of the majority of its inpatient services, ranging from addictions and eating disorder services through to psychiatric intensive care and medium secure services. 20,000 people receive care from the Trust each week, and 39,500 are treated each year, including 3,582 inpatient admissions. We serve 5 boroughs – Wandsworth, Merton, Kingston, Sutton and Richmond – and also provide some national services, such as our deaf child and adolescent service, the only one of its kind in the UK.

Springfield has housed a mental health hospital since the construction of the main building in 1840. However, hospital requirements have changed as methods of care have evolved over the years, and many of Springfield's buildings, including the two listed ones, are no longer suitable for use as mental health facilities. The Trust urgently needs to provide facilities which are of an appropriate standard, as well as to reduce the amount of empty and wasted space and improve the condition of the site as a whole.



Consultation and development process

The Trust's work to develop a plan for Springfield began with a series of workshops in 2004 which were attended by local residents, staff and service users. The results of these sessions led to the development of a masterplan for the site, set out in the 2005 'Springfield – Vision and Masterplan' document produced by consultant masterplanners Urban Strategies Inc.

This work established the principles which formed the basis of the Trust's first outline planning application, submitted in 2008 and refused by Wandsworth Council in March 2009. Fundamentally, the Council and local community told us that this set of proposals attempted to fit too much onto the site.

Since then, we have held a number of formal public engagement events, including a series of street canvassing sessions and a workshop for local residents, service users, staff and politicians. This work was led by an independent firm of public engagement specialists appointed to ensure that as wide a range of views as possible was heard and that the dialogue was handled impartially. The Trust has also continued to meet with local representatives to listen to their views, and we welcome people contacting us to share their thoughts on the project.

The planning team have worked to process all the feedback we have been given, both during the development of and formal consultation process for the last application and from the meetings, wider public engagement work, and comments received since. This information has been carefully considered to ensure that the community's views have been taken into account in the formation of our new set of proposals.

Finding a workable solution appropriate to the site and the area is a key priority for the Trust, as the need to regenerate Springfield remains urgent. Local people have been very clear with us on what your key issues of concern are, which has been very helpful. Most of these are concerns shared by the Trust – we don't want to overload the site or local transport networks, or see any damage done to the community we have been an important part of for over 150 years. We believe we have now developed a plan that will work well as part of our shared community, providing significant benefits both for mental health service users and for other local people. Details of this scheme are set out in the following pages.

Overall development and residential element

You said . . .

We have . . .

The proposed development was too big

Reduced the number of residential units from 1,200 to 850. Almost half will be family houses with gardens. The number of apartments in the converted listed buildings has also been reduced from 300 to 262. There will also be supported living flats for people with learning disabilities and a replacement elderly care home with enhanced facilities.

Building heights were too tall

Limited the heights of buildings to a maximum of four storeys, down from the previous maximum of eight to twelve. Most will be two to three storeys high and none will be any taller than existing buildings on site. Buildings at the boundaries will not be taller than their off-site neighbours.

The proposed mix of accommodation was out of keeping with the local area and need

Revised the mix. Many more family houses with gardens will now be provided. The two listed buildings will be converted into apartments, and up to 56 supported units for people with learning disabilities will also be included. Commercial and retail space has also been reduced significantly and will provide local services and facilities.

The amount and type of affordable housing was not appropriate

Provided up to 30% of the new-build homes as affordable. This comprises a mix of shared ownership and some socially-rented accommodation. Most will be in two-, three- and four-bedroom houses with gardens. It also includes the learning disabilities facility.

The design of the buildings was out of character with existing buildings in the local area

Reduced the heights of buildings so that they are in keeping with those neighbouring the site, as well as increasing the number of units that will be family houses, reflecting the surrounding area.

Considered the way houses and buildings will look, although as this is an outline planning application, detailed design work comes at a later stage.



Architect's impression

Residential accommodation: mews houses (with College Gardens in the background)

Traffic, transport and access

You said . . .

The road network would be adversely affected and pollution would increase

We have . . .

Implemented a travel plan to reduce immediately the hospital's impact on local traffic by limiting parking and encouraging use of car sharing, public transport, walking and cycling. 49 marked and 280 unmarked bays have now been removed from the site through formally marking parking bays, placing signs on site and the introduction of parking enforcement.

Developed a new travel plan which significantly reduces NHS car journeys over the life of the development to allow for journeys generated by new residents.

Proposed to improve car access to the site, to take the pressure off Glenburnie Road, by allowing car access to the 80 units to the southeast corner of the site from Hebdon Road.

Included additional pedestrian access through Streatham Cemetery and along the Burntwood Lane boundary, and pedestrian/cycle access through St George's Grove and Hebdon Road, to encourage people to leave their cars at home.

Included a car club, car pooling scheme and an electric car charging point in the proposals.

Agreed with Transport for London that we will pay for junction management systems at a range of key local intersections to improve the flow of traffic in the local road network.

Reduced the size of the development, thereby reducing its overall impact.



Vehicle access plan

Traffic, transport and access *continued*

You said . . .

The site is poorly served by buses and other public transport would be overloaded

Parking would spill out into local streets

Drivers would use the site as a rat run

We have . . .

Improved local connectivity and public transport, including the provision of at least one new bus route to the site and surrounding area and layover facilities.

Agreed in principle a new access point for buses through St George's Grove.

Improved facilities for cyclists with safe and secure parking and a link to the Mayor of London's Cycle Superhighway.

Altered the ratios of parking available to new residents. There will be one space for every house and 0.6 for each apartment (where previously it was 0.6 per unit across the whole development).

Considered how the route through the site is currently used. Evidence collected in our traffic surveys shows that local people who know the site and the local area drive through the site from time to time to avoid traffic in Burntwood Lane in order to get to local schools and the bottom of Trinity Road. Whilst the future development will not encourage this, this use probably does have the impact of taking some pressure off Beechcroft Road, and we are therefore reluctant to block access through the site as long as this use of the site remains at the current low level.



Architect's impression
Glenburnie Road entrance

Environmental impact

You said . . .

Construction would have a negative impact environmentally, both in terms of pollution and with disruption and noise for neighbours

The development would place strain on existing infrastructure and have an adverse environmental impact

We have . . .

Reduced the construction timescale from up to ten years to a maximum of seven.

Limited access hours for construction traffic to minimise the impact on the road network at peak times.

Limited the number of lorries that will be on site each day.

Minimised the amount of waste and the number of journeys needed to dispose of waste materials by re-using earth excavated during construction for landscaping, as well as ensuring bricks and any other recyclable materials from buildings being demolished are reused.

Set a target for all new-build homes to reach Sustainable Homes Code Level 4, which means a significant reduction in CO₂ emissions. Sustainability and waste reduction are important parts of the proposals.

Agreed to construct the hospital buildings to the latest standards of energy efficiency, based on BREEAM standards.

Proposed to renew Springfield's ageing infrastructure and introduce more sustainable elements, including a combined heat and power plant to serve every unit on the site, a Sustainable Urban Drainage System, re-use of grey water for landscape irrigation and the provision of green/brown roofs.

Introduced improvements to the Metropolitan Open Land with a range of different landscaped elements, which will encourage biodiversity.

Agreed to protect wildlife already on site.

Community benefits

You said . . .

The proposed community benefits were not appropriate for the development

We have . . .

Allocated space for community facilities, to be determined by local need.

Retained the provision of land for a much-needed new primary school.

Improved the quality of the outdoor space in response to feedback from local people, service users, and other statutory consultees, to make best use of our Metropolitan Open Land as a readily-accessible park.

Included public transport improvements for the benefit of new as well as existing residents.

Examples of the kind of facilities people have told us they would like include a community hall, doctor's surgery, library, cinema, and youth club.



Architect's impression
Main square

Green space

You said . . .

Green space would be lost and the proposed use of the remaining green space was not appropriate

We have . . .

Increased the amount of Metropolitan Open Land (MOL) by removing buildings that currently sit within it and proposed that a large car park is removed and reallocated as MOL, increasing it by 4,700m².

Included a range of green spaces including private gardens, public squares, the formal lawn immediately in front of the 1840 building, and 13 hectares of public parkland.

Improved the quality of the large public park, which could include play and seating areas, open parkland, a wetland area, orchards, and playing fields. The proposed landscaping scheme responds to the historical use of the land surrounding the hospital and will promote biodiversity and wellbeing.



*Architect's impression
Metropolitan Open Land*



Green space plan

Heritage

You said . . .

The impact on the listed buildings would be detrimental

We have . . .

Reduced the internal interventions on the listed buildings by significantly reducing the number of converted accommodation units that will be made within them from 300 to 262.

Reduced the external impact on the setting of the listed buildings with the reduction in building heights and revised distribution of building sizes and layouts. Smaller-scale buildings will have minimal visual impact on the listed buildings, which will not be overwhelmed by the surrounding new development.

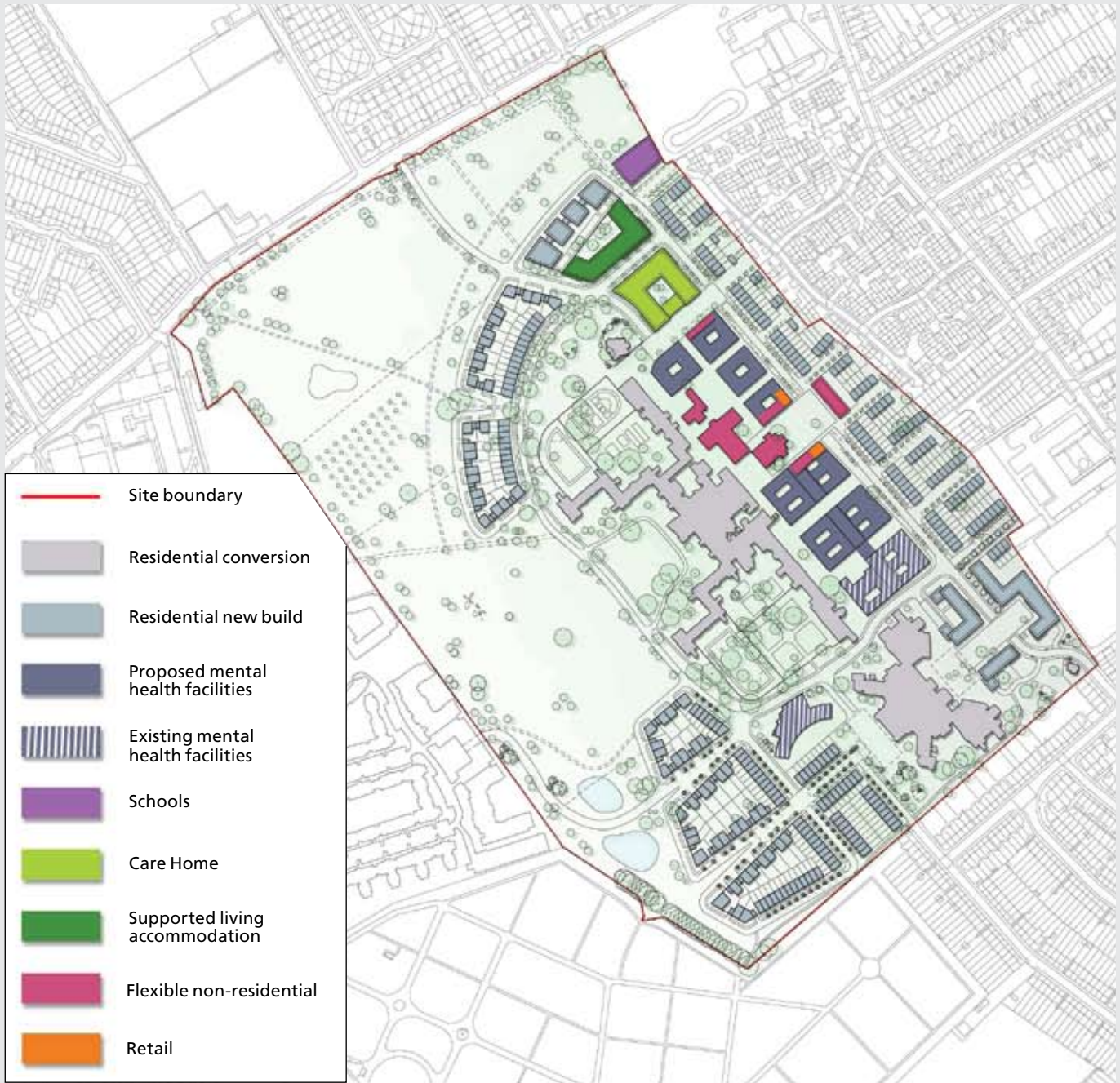
Improved the landscaping strategy to ensure that it is much more sympathetic to the historic buildings. Whereas today a large car park dominates the main building's frontage, the plans show an uninterrupted view out from it over the parkland, the layout of which responds to its historic use.

Agreed to retain the historic Gate Lodge at the Glenburnie Road entrance.

Parts of Springfield's main listed building is currently on English Heritage's 'At Risk' register. The regeneration of the site and the listed buildings' sympathetic conversion to residential use will ensure that they are preserved and maintained for posterity.

Historic trees should be protected

Ensured that all key species and iconic trees will be preserved. The improvements to the landscaping plan will ensure that these trees sit comfortably in an environment which responds to their architectural qualities.



Uses plan

Mental health element

You said . . .

Security would be insufficient

Development of this scale would not be in the patients' interests



*The Wandsworth Recovery Centre
Award-winning design*

We have . . .

Improved site security with a much more welcoming and coherent layout and enhanced lighting, paths and access.

Improved the security of the hospital facilities by proposing modern mental health buildings with internal activity and garden spaces which are fit-for-purpose, therapeutic, safe and secure by design, based on the award-winning Wandsworth Recovery Centre.

Provided a range of spaces to offer patients choice between respite and privacy and activity, inclusion and integration, as there is a clear need for a balance between these. Patients will have access to both the public open space and facilities and private space and facilities within the hospital buildings which are reserved for their use. Those of our patients who are detained under the Mental Health Act will still have access to high-quality outdoor spaces within the perimeters of the hospital facilities. These buildings will be designed to maximise the therapeutic quality of their environment and offer privacy, safety and security for all, whilst being integrated physically with the surroundings.

These facilities will be a huge improvement on most of those we currently operate out of, which unfortunately are no longer fit for purpose and are often uninviting, uninspiring places. Our new facilities will offer patients a much better experience, with welcoming, light rooms, purpose-built therapy areas and activity spaces, and internal gardens that afford them ready access to outdoor space, natural light, fresh air and room for exercise around the clock. The Wandsworth Recovery Centre, the Trust's most recently-opened building, already demonstrates the effectiveness of these improvements in assisting people's recovery, and has won awards and commendation for its accessibility and mental health design. We aim to provide and improve upon this high standard of environment across the site.

Developed this plan working closely with staff and service users to ensure that their needs are met at every level.

Managing the scheme

We recognise that this is an ambitious scheme to bring about much-needed improvements to this wonderful site.

In order to ensure that the work is done with minimum disruption to local residents, we propose to establish a site management company that will control the entire development over its whole life and will probably retain the management of the site once the development is completed. This company will include representatives of all those who have an interest in the site, including local residents, to ensure that as the development proceeds it meets the needs of those who will most benefit from it.

This mechanism will allow the most effective management of the development process, delivering the new buildings and landscapes and the upgrade of the listed buildings without interfering with the lives of people around the site or those who are already using it.



Consultation on these proposals

Contact us

You are invited to submit questions and comments on the proposals contained in this brochure before we finalise the details of our plans ready for formal submission after the summer.

We are particularly keen to know of any remaining concerns you may have about our plans and whether there are any further benefits you would like to see from this development for the local community. We would also like to hear from you if you think we have addressed your concerns.

Please send any questions or comments in writing to:

FREEPOST RSHR-HERK-KUGK
Springfield Regeneration Programme
Springfield Hospital
Glenburnie Road
LONDON
SW17 7DJ

or regeneration@swlstg-tr.nhs.uk

All feedback received by Friday 30th July 2010 will be taken into consideration by the planning team as we work to finalise the proposals.

Next steps

We are currently planning to hold a final detailed exhibition of our plans in early September before the Council's formal consultation period during the autumn. Full details of the exhibition will be published in due course.

This leaflet is available in audio, braille and other languages on request.