# **STATES OF JERSEY**



# ISLAND PLAN 2022-25: APPROVAL (P36/2021) – EIGHY-FOURTH AMENDMENT

## **AMENDMENT TO POLICY CI3**

Lodged au Greffe on 7th February 2022 by Senator K.L. Moore

**STATES GREFFE** 

2021 P.36 Amd.(84)

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After the words "the draft Island Plan 2022-25" insert the words "except that –

- (a) on page 229 of the draft Island Plan 2022-25, at the end of the third paragraph under the heading 'Delivery of Our Hospital', there should be inserted the words
  - "Provision is made within policy, however, for the eventuality that the Assembly amends its decision.";
- (b) in Policy CI3, after the words "Our Hospital Development Site" there should be inserted the words "(including the alternative use of an existing health and social care facility as approved by the States Assembly)" and after the word "site" in the final paragraph, there should be inserted the words "(or sites)";
- (c) within Policy CI3, after the words "will not be supported" there should be inserted the words ", except where it can be demonstrated that the site, or any part of it, is no longer required to support the delivery of Our Hospital"; and
- (d) the draft Island Plan 2022-25 should be further amended in such respects as may be necessary consequent upon the adoption of paragraphs (a)-(c)."

#### SENATOR K. L. MOORE

Note: After this amendment, the proposition would read as follows –

### THE STATES are asked to decide whether they are of opinion –

to approve, in accordance with Article 3(1) of the Planning and Building (Jersey) Law 2002, as amended by the Covid-19 (Island Plan) (Jersey) Regulations 2021, the draft Island Plan 2022-25, "except that –

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  - "Provision is made within policy, however, for the eventuality that the Assembly amends its decision.";
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#### **REPORT**

Section 6 of the Planning Inspectors' report identifies the contentious nature of policy CI3. The job of the Planning inquiry which will consider the planning application for the Our Hospital project will be to weigh up the appropriateness of the design against the policies set out in the draft Bridging Island Plan.

In particular, it will be interesting to understand the Planning Inspectors' views in relation to policies SP3 - Placemaking, SP4 - Protecting and promoting island identity and GD8 - Green Backdrop zone.

A considerable number of representations have been made to the draft Bridging Island Plan process and it would only be right to ask the Assembly to ensure that there are alternatives available to Ministers should the Inspector find against the Our Hospital plans. Particularly, in light of the high-level comments Mr Staddon made when considering Overdale as a site in a previous hospital planning inquiry in 2018:

Whilst this is an existing hospital location and within the built-up area, it is physically separated from the main town and the topography makes it inaccessible, [particularly by walking and cycling modes of travel]. The intensification of development required to accommodate the hospital, combined with the elevated ridge location within the Green Backdrop zone, would result in very significant adverse visual impacts. There could also be adverse residential amenity and biodiversity impacts. This option would create significant challenges with the Island Plan.

When he was asked to conduct the previous Planning Inquiry, Mr Staddon was specifically asked not to give consideration to the potential for a dual site option, as that had been ruled out during earlier political considerations.

Following the revelations of the issues regarding rehabilitative care on Plemont Ward and the Assembly's almost unanimous decision on 19th January to re-open Samares ward. It is clear that a new approach to care delivery is required.

Under the plans for the Our Hospital project, clinicians face the additional burden of delivering services from a dual site, 6 miles away, albeit for a 6-year period during construction.

On Thursday 3rd February the Planning Committee refused permission to demolish the existing, serviceable buildings on the Overdale site, due to the policies that surround the demolition of buildings that are for purpose.

It would appear wise for the consideration of a dual site to be undertaken at this point and for alternative uses for the Overdale site to be available for consideration should the planning application fail.

Despite the Assembly's supportive vote for the Overdale site, Scrutiny has highlighted the flaws in the site selection process and the outline business case. These issues are considerable and should be taken into account when considering this proposition.

To quote Mr Staddon's 2018 conclusions again:

Based on the evidence before me, I assess that there is no stand out alternative site option that would be clearly superior in Planning terms. However, there are realistic alternatives that could deliver the hospital and avoid most of the construction related impacts, but each would come with different adverse environmental effects and consequences

The time has come to think about the potential solutions in a logical and cost-effective manner in order to best serve the public. This amendment serves to enable that process and not bind the site to a fate of being left semi-derelict and without further purpose if the Inspectors finds against the Our Hospital plans.

#### Financial and manpower implications

There are no direct financial impacts of this amendment.

## **Child Rights Impact Assessment review**

This amendment has been assessed in relation to the **Bridging Island Plan CRIA**.