



## **Essex County Hospital campus, Lexden Road**

**Draft Development Brief Adopted as Guidance following consideration  
by the Local Plan Committee on 16 December 2014**

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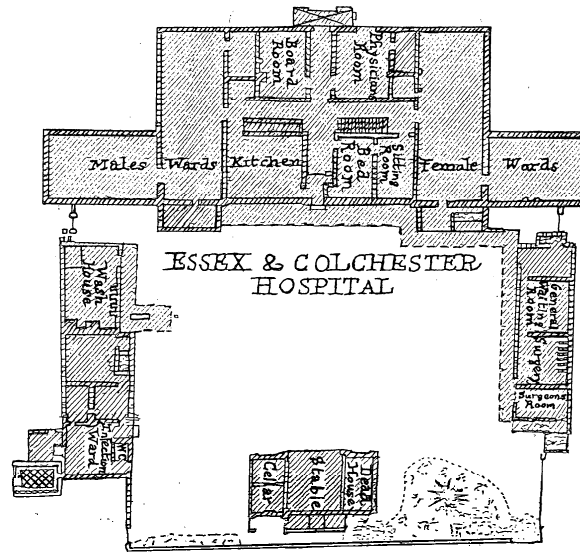
## 1.0 Introduction and Site Context

- 1.1 The Essex County Hospital occupies a site of 1.72 hectares (4.2 acres) in a rectangular block framed by highways. The site is prominently set on the south side of Lexden Road with direct street frontage to Oxford Road on the west side, Gray Road to the south and Hospital Road to the east. The site is within the Colchester No.2 (Lexden) Conservation Area and is currently in use as a general hospital (use class D1) in the ownership of the NHS. The Council has received notice of the Health Trust's intention to dispose of the site in 2015 for redevelopment, as the remaining functions are transferred to other sites; including the District General Hospital rendering the existing complex of buildings functionally redundant. The purpose of this brief is therefore to provide a framework against which development proposals may be evaluated. The brief provides a general overview regarding the adopted planning policy context and guidance regarding the retention of buildings, relevant material considerations and suggestions regarding the possible arrangement of new development within the site and scale/massing.
- 1.2 The site is densely developed currently with buildings of variable architectural quality. The principal frontage block is a Neo-Classical building with a portico dating from the late Georgian period (1820) and designated as a grade II listed building. Under section 1(5) of the Planning (Listed Buildings & Conservation Areas) Act 1990 the remainder of the complex benefits from protection as curtilage listed status with the former Nurses Home fronting Oxford Road, having been included in the 'local list'. The inclusion of the main block within the statutory list of buildings of special architectural or historic interest imposes a duty to pay '*special regard*' to the desirability of preserving the building together with its setting and any features of special interest which it may possess (s.66(1) PL (Lb & Ca( Act 1990)). Furthermore, the inclusion of the site within the designated conservation area imposes a duty on the decision maker to pay '*special attention to the desirability of preserving or enhancing the character or appearance of the area*'. This duty equates to keeping the area from harm.
- 1.3 The hospital complex comprises buildings of variable quality and heritage significance. With the exception of the Nurses Home, the southern third of the site generally contains buildings of lesser architectural quality dating from the post war period. It could be argued that these buildings nevertheless have evidential value as they illustrate the evolution of public health care following the formation of the NHS in 1948.

- 1.4 The complex is contained within a perimeter wall of varying height and age on the west, south and east street frontages. This walling is generally set on the back edge of the footway except on the Hospital Road (east) frontage where it defines the edge of the carriageway. The Hospital site is experienced as a self contained campus with little interaction with the surrounding residential streets except on the main frontage to Lexden Road. The street frontage to Lexden Road presents the main block centrally within the site and flanked by subordinate wings in the manner of a Georgian or Palladian villa. In front of the building is an important landscaped forecourt area. Whilst ad hoc development in the later twentieth century has eroded a degree of this formality by disrupting the balance and intentional symmetry, redevelopment of the site provides the opportunity to reinstate this formal setting and uninterrupted views from the street.
- 1.5 The conservation area does not have an adopted character statement or management plan to inform this brief. Nevertheless, the majority of the existing structures read as a functional campus complex and make a positive contribution to the character and appearance of the wider conservation area designation. A general presumption exists in favour of the conservation of designated heritage assets in terms of relevant statute, local and national planning policy. The importance of the hospital to the town's social history is reflected in the weight that should be given to the conservation of the complex.
- 1.6 The Hospital site is nevertheless significantly different in character to the leafy suburbia of the neighbouring conservation area being dominated by built form and having few significant trees. It should be considered as a distinctive character area within the conservation area designation.

## Brief summary of the development of the Hospital site

Plan of the Essex and Colchester Hospital, 1876 (scale 1:333)  
From: 'Hospitals', A History of the County of Essex: Volume 9: The  
Borough of Colchester (1994), pp. 284-290



- 1.7 The hospital site is aligned to the south of the Roman road to London (present day Lexden Road). Roman law required the burial of the dead outside of the town walls and both sides of Lexden Road are lined by cemetery plots containing cremations, inhumations and the remains of stone and brick tombs. Although many of these were destroyed by the ribbon development that took place in the nineteenth century, when the Victorian villas that line Lexden Road were constructed; the very nature of this development (grand houses in very large building plots) served to preserve much of the archaeology. These cemeteries have produced significant archaeological finds, some of national importance such as the tombstones of Longinus and Marcus Facilis and the Colchester Sphinx itself, found beneath the hospital in 1821.
- 1.8 In recent years excavations in the vicinity of the hospital have further proved the high level of preservation of Roman funerary archaeology. Work at 3 Oxford Road opposite the nurses' home revealed evidence of cremations, inhumations and a potential cremation site constructed from tile and stone, along with the remains of workshops and gravel roads/yards. Excavations at Colchester Royal Grammar School to the west of the site revealed the foundations of a Roman temple-tomb and a hitherto unknown confluence of roads. Prior to the early nineteenth century the site remained undeveloped and this explains the high potential for onsite survival of significant Roman archaeology.

- 1.9 The hospital was launched in 1818 as the Essex and Colchester Hospital as a general infirmary for the poor; funded by public subscription. In 1819 three acres of land was purchased. The hospital was funded charitably until it became part of the National Health Service in 1948. Income consistently exceeded expenditure until the mid 1860's.
- 1.10 The main block (now a grade II listed building) opened in 1820 and was built in a classical style with an operating theatre and 80 bed spaces. In 1825 a tetra style portico was added to designs of William Lay. In 1839 two wings were added by J Hopper, County Surveyor. An Isolation Block of two wards was added to the west side (rear) of the hospital in 1847.
- 1.11 Major alterations were undertaken in 1879-80 to the designs of London architect J H Wyatt. These comprised the enlargement of the existing windows of the main block and the addition of a further storey with corner pavilions to provide bathrooms and WC's. In 1897 further works were undertaken to commemorate the Diamond Jubilee of Queen Victoria. These included a new Laundry and Nurses Home releasing the existing accommodation within the main block to create a Children's and Isolation Ward. In 1924-6 a new block was built for out patients, including dental surgeries, casualty and X-ray departments with private patient's rooms and doctor's accommodation over. In 1948 the hospital joined the NHS and new operating theatres were built in 1955 A new radiotherapy block opened in 1964 and in 1969 a post graduate medical study centre was built in Gray Road and the out-patients, pharmacy and x-ray wards were enlarged. A new children's wing opened in 1972. Finally in 1992, the postgraduate medical study centre relocated from the site in Gray Road to a site adjoining the District General Hospital.

Information sourced from: 'Hospitals', A History of the County of Essex: Volume 9: The Borough of Colchester (1994), pp. 284-290

## **2.0 Policy Context**

- 2.1 Any development at the site should have regard to the adopted local plan and other material considerations including the National Planning Policy Framework (NPPF) and allied guidance (PPG).
- 2.2 The following policies of the local policy framework are relevant for the future development of the site, and should be noted.
- 2.3 Within the adopted Core Strategy (December 2008 with selected policies revised July 2014) policy SD1 identifies the Town Centre as a strategic area for new development. The site lies within 400 metres of the Central Area of the Town Centre. Policy H1 confirms that housing development will be focused on broad locations (including the Town Centre), to meet the Borough's housing target of at least 19,000 new homes to be provided up to 2023. The policy confirms that the Borough will promote high quality design and will focus on enhancing the character and quality of the Town Centre (inter alia). The Proposals Maps (October 2010) indicate that the site falls within a predominantly residential area. Under policy SD2, new development will be required to provide relevant infrastructure, community facilities, and open space, as appropriate.
- 2.4 Policy UR2 of the Adopted Core Strategy confirms the Council's commitment to high quality design informed by context appraisals. The policy also reaffirms the Borough's commitment to Colchester's historic environment and the protection afforded from inappropriate development. The policy requires archaeological assessments will be undertaken where there are known archaeological deposits of a high potential for such deposits to exist.
- 2.5 In addition to the overall strategic objectives of the Core Strategy, the following policies (Selected policies revised July 2014) are also relevant to consideration of this site:
- H2 – confirms that new development must make efficient use of land and relate to context;
  - H3 – developments should provide a mix of housing types to suit a range of different households;
  - H4 – seeking to secure 20% of new dwellings as affordable housing for sites of 10 or more
  - PR1 – access to private/communal areas of open space for new homes;
  - TA1 – locating new development in accessible areas;
  - TA2 – promoting walking and cycling;
  - TA5 – Parking provision to reflect the accessibility of the area; and
  - ER1 - incorporating measures to reduce carbon emissions

2.6 Within The adopted Development Policies DPD (October 2010 and updated July 2014) the following policies are relevant for this site:

- DP1 - all development to be designed to a high standard, with regard to social, economic and environmental sustainability;
- DP2 – Health Impact Assessments required for all residential development in excess of 50 units;
- DP3 – Implementation of a CIL Levy to fund infrastructure or alternatively that planning obligations will be sought where appropriate, in accordance with details set out in SPD;
- DP4 – confirms that support will be given to the retention of existing community facilities and provides criteria to support the loss of existing facilities. These include the provision of alternative facilities, lack of economic viability, no demonstrable wider interest in continuation of the use or an excess of provision and the site is not required for any other community use;
- DP12 - housing development to be of high standards of design, construction and layout;
- DP14 - historic environment assets shall be conserved and in all cases there will be an expectation that new development will enhance the historic environment. Heritage statements and/or archaeological evaluations will be required where an impact is identified;
- DP16 - provision of private amenity space for all new dwellings;
- DP17 - developments are required to seek to enhance accessibility for sustainable modes of transport;
- DP19 - minimum parking standards for residential development of 1 space for every 1-bed dwelling and 2 spaces for every 2-bed or more dwellings with 0.25 visitor spaces per unit (lower standards may be accessible in highly accessible locations); and
- DP25 - applicants are encouraged to incorporate renewable energy technologies into all development where viable.

2.7 In addition to the above policies, the following adopted supplementary planning guidance/documents are relevant:

- Affordable Housing SPD (August 2011);
- External Materials Guide for New Development SPG (July 2004);
- Vehicle Parking Standards SPD (November 2009);
- Provision of Open Space, Sport and Recreational Facilities SPG (July 2006);
- Provision of Community Facilities SPD (September 2009);
- Sustainable Construction SPD (June 2011).

### **3.0 Site and Area Analysis**

- 3.1 The application site is located in a sustainable location within 300 metres of the Town Centre. The site is located within a predominantly residential area with residents on-street parking scheme operational in the surrounding streets. The surrounding area does include a number of schools including premises in Hospital Road to the immediate east of the site and a further school at the north end of Oxford Road. There are also health related uses in Gray Road.
- 3.2 The site contains a substantial number of buildings that variously contribute positively both to the setting of the listed building (and may also be classed as curtilage or locally listed buildings) and to the wider conservation area designation. The principal listed building that addresses Lexden Road demands the retention of a formal setting that respects its historic significance and its relationship to the wider conservation area. There are currently a series of vehicular and pedestrian access points that serve the site from all of the surrounding streets. These openings are formed in the red brick perimeter boundary wall that is a distinctive feature with its cream brick half round copings.
- 3.3 The surrounding townscape is variable in scale and architectural style of between two and three storeys. The surrounding area was developed in the later nineteenth century (with twentieth century infill) in a combination of large detached villas (Oxford Road) and terraced housing of two modest storeys. It is important that development on the Hospital site responds to site context positively by establishing an appropriate dialogue across the neighbouring streets in terms of scale and compatible uses.
- 3.4 There are few trees of significance within the site (on the Lexden Road frontage). The development of the Hospital site presents opportunities to enhance the environmental quality of the site through the introduction of appropriate tree planting and new green spaces to enhance the attractiveness of the campus as a place to live and work. The introduction of tree planting around the perimeter of the site would help to soften the external; aspect of the campus and help to meld the site with the surrounding predominantly residential area.

### **Movement & Accessibility**

- 3.5 The site is located in an inherently sustainable location close to the town centre with pedestrian access to services within a 15 minute walk time. In the Adopted Core Strategy, Lexden Road is shown as a key cycle route between the town centre, schools and education establishments and the residential hinterland to the west. The site is also located on a high frequency corridor for bus services. The site has the potential for safe vehicular access from all of the surrounding access roads subject to detailed visibility considerations.



## **Land Use and Activity**

- 3.6 The existing health related uses are subject to a continuing process of relocation and the NHS has demonstrated that the site is functionally redundant for their purposes. The process of decanting will be completed in 2015. A new use is therefore urgently required to be found for the site and the listed buildings in particular. The existing use is arguably a community facility under adopted policy DP4. This policy contains criteria for the assessment of whether the existing community use may be lost to an alternative use. In this case it is considered that these conditions have been met given that the health care use has been replaced by new facilities elsewhere and there is no demonstrable need for a community use(s) requiring the quantum of floor area extant within the site. It is noted that local residents have concerns regarding the loss of the existing health care facility from this location. However, this is a business decision that has already been taken by the NHS to vacate the site and no other healthcare operator is likely to come forward with funding to convert and renovate the obsolete historic buildings.
- 3.7 A mixed use solution for the reuse and part redevelopment of the site would be considered acceptable in this location. Discussions with the NHS have suggested that a wholly residential solution is favoured by their advisors. Experience gained in recent comparable developments in the Garrison Conservation Area (Flagstaff – B1B) has suggested that the costs of conversion predicates in favour of residential uses as preferable to business uses (B1 use class) It is considered that any scheme would be considered on its merits having regard to adopted policy considerations, the impact of any scheme on the both character of the conservation area and the fabric/setting of the listed buildings. It is noted that the reuse of the retained buildings alone generates a substantial parking requirement (see paragraph 4.7) and a key consideration will therefore involve the degree of relaxation of adopted standards that the Council is prepared to support.

## **Constraints/Viability**

- 3.8 The retention of the existing buildings and Roman archaeological remains are a significant constraint. The loss of existing buildings will require clear justification including a Heritage and Viability Assessment. The impact upon the Archaeological resource will need to be quantified and mitigated. Any viability-based justification put forward by the developer for reduced developer contributions will require an open-book scrutiny by the Council. The site has been considered by the Council's Development Team and a range of relevant contributions are set out below in 5.0 The Development Process.

## **Heritage – Built & Archaeological**

- 3.9 The site is located within the Lexden Conservation Area designation and retains important listed buildings (and locally listed buildings) these issues carry statutory weight as material considerations that will need to be appropriately addressed. The Roman archaeological resource is believed to be significant based on a history of important finds. A scheme of investigation and mitigation will be an essential requirement.

## **4.0 Key Development Principles and Design Response**

### **Development Principles**

- 4.1 All new development should preserve or enhance the character and appearance of the site and its contribution to the wider conservation area designation through:

- retaining a sense of openness and key views to the principal listed building on the Lexden Road frontage;
- maintaining the primacy of the historic hospital buildings as the dominant built form;
- retaining the historic buildings that contribute positively to the significance of the hospital complex, in terms of architectural, historical and group value;
- introducing new built forms and uses that complement the existing in terms of character, layout, scale, massing and architectural treatment;
- maintaining/reinstating the historic layout and arrangement of key communal spaces within the site together with the creation of new public open spaces that serve to reinforce the established character and better reveal the significance of the place;
- special regard shall be paid to preserving and enhancing the setting of the statutorily listed building(s) and locally listed building to ensure that new development preserves those aspects of setting that contribute positively to the significance of the heritage assets;
- introduce appropriate levels of affordable homes, parking, amenity space, privacy and servicing to create an effective place; having regard to adopted standards and viability considerations;
- maintaining the integrity of the overall site as a distinctive character area within the conservation area designation. In particular the distinctiveness derived from the campus layout and strong sense of enclosure derived from perimeter walling and the arrangement of blocks to frame spaces internally, must be retained and enhanced by any development scheme.

## Design Response

- 4.2 Inevitably there will be different approaches to the development of the Essex County Hospital site. This brief does not seek to be prescriptive but rather to identify the key planning issues that any proposal needs to successfully address. These issues include alternative uses, the retention of buildings, new built forms and car parking/servicing.

### The retention of existing buildings

- 4.3 The retention of buildings within the site is inevitably an issue that may be seen as contentious. The retention of buildings needs to be based on a robust heritage assessment of significance. A presumption exists in favour of the conservation of buildings within the conservation area where these are considered to have intrinsic architectural, historic or contextual significance. Furthermore, the inclusion of the principal block in the statutory list of buildings of special architectural or historic significance results in the remaining buildings and structures that were extant at the time of listing and ancillary to the main block having curtilage listed status. This means that they are effectively subject to the same protection as the principal listed building. Drawing ECH1 below provides an indication of the buildings that the council believes must be retained and converted to new uses. In some cases, this may involve the reversal of later alterations that detract from their current appearance.

Drawing ECH1 Buildings required to be retained



## The potential for new development to complement existing buildings

- 4.4 The listed buildings within the site require that special regard be paid to the desirability of preserving their setting. In addition, a similar duty exists with regard to the conservation area designation to ensure that special attention is paid to the desirability of preserving or enhancing the character or appearance of that area. The selective removal of buildings (shown in pink in drawing ECH1 above) releases potentially developable area within the site. This needs careful consideration to preserve the setting of the listed buildings and the character of the wider conservation area.

Drawing ECH2 illustrates this potential and drawing ECH3 identifies the key views and open spaces that need to be respected.

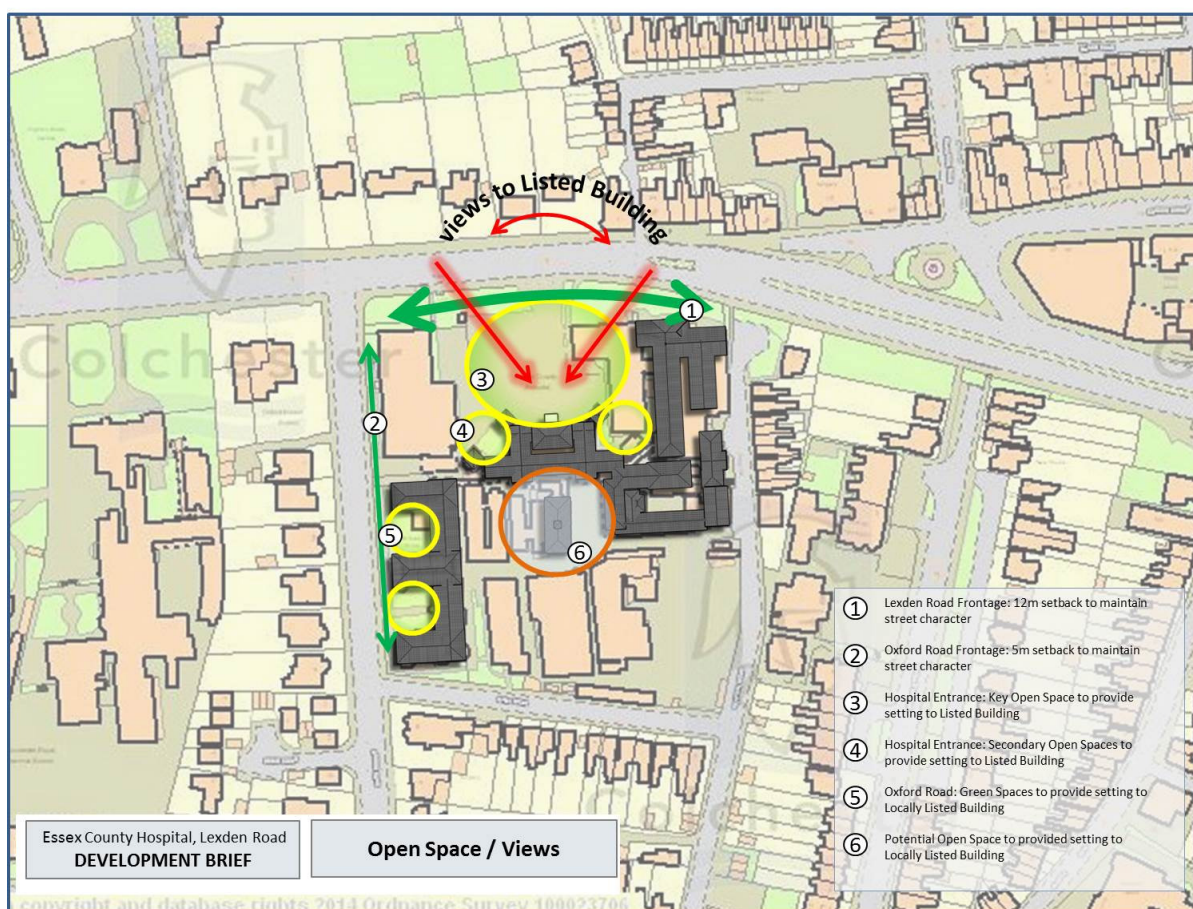
### Drawing ECH2 – Potential block arrangement



- 4.6 The openness of the Lexden Road frontage should be retained as part of any scheme. The scaling of blocks also needs to respect the established hierarchy through the introduction of subordinate forms. It is also important that the architectural treatment of blocks reflects the architectural rhythm of adjacent buildings and the proportion of solid to void.



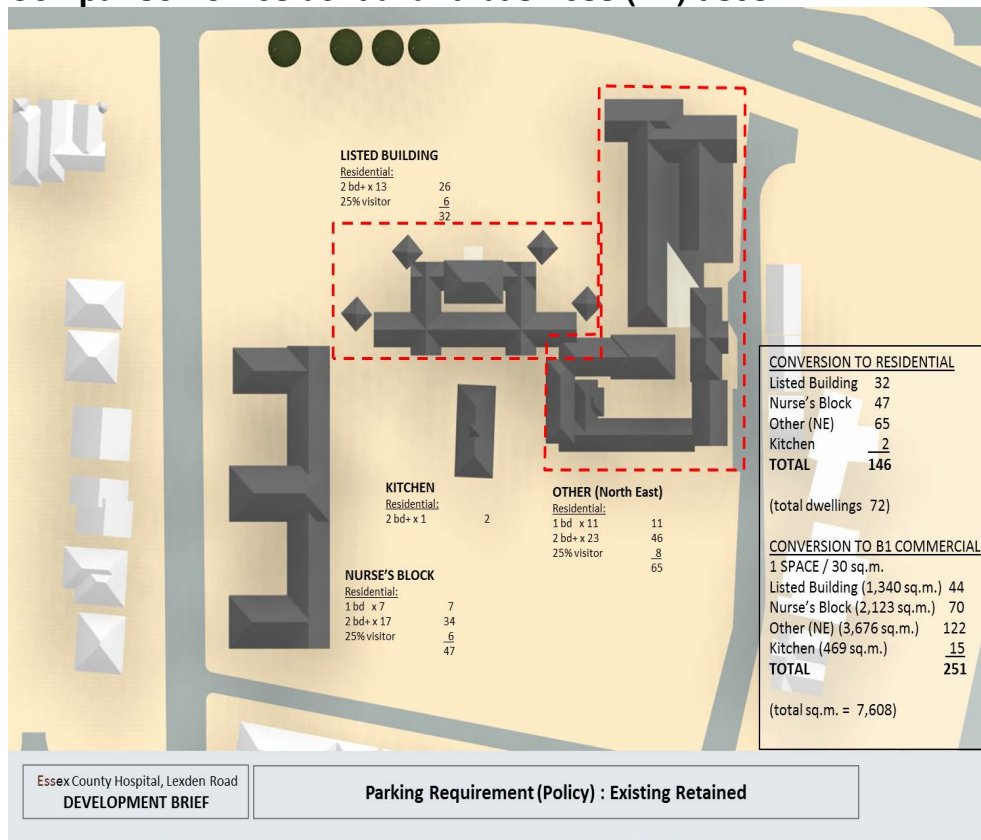
## Drawing ECH3 Key views and open spaces



### The provision of on site parking

4.7 The quantum of development that is currently extant within the site creates a considerable parking requirement. The site is located in a highly sustainable and accessible location where a relaxation of the adopted standards may be justified in conformity with Policy DP19. Nevertheless, the site is surrounded by streets that are subject to residents parking restrictions. Representations received have suggested that parking is a significant issue in the locality and a strategy to mitigate any shortfall in parking should be investigated. This could include leasing spaces within existing car parks e.g. St Mary's. The creation of additional floor area through new build will exacerbate any short fall in parking and a balance will need to be struck between achieving a workable level of on-site (and off-site) provision and the creation of an attractive and sustainable development with adequate amenity space. The site will need a resident's only parking scheme within the site given the scarcity of parking in the locality.

## The existing parking situation: Comparison of residential and business (B1) uses

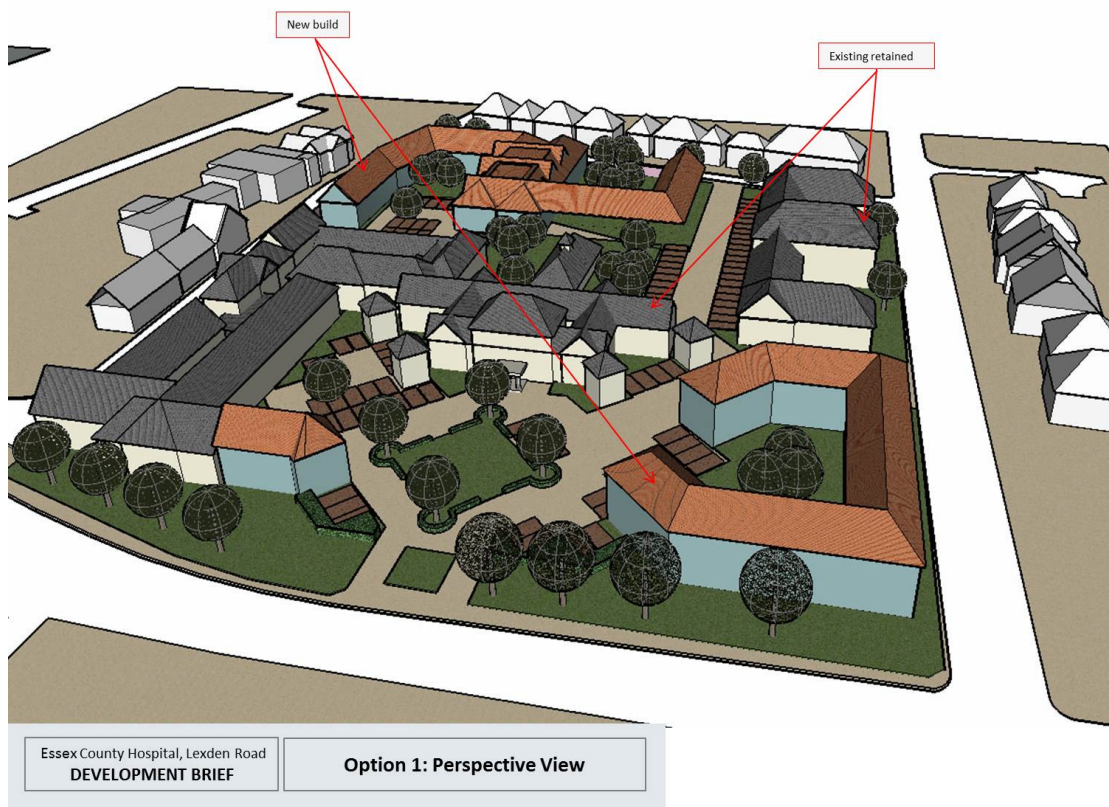
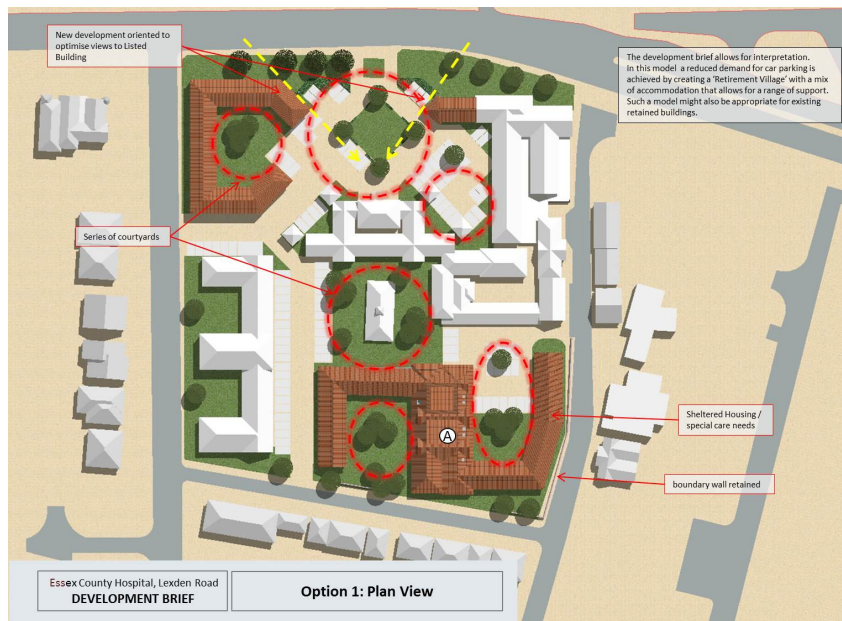


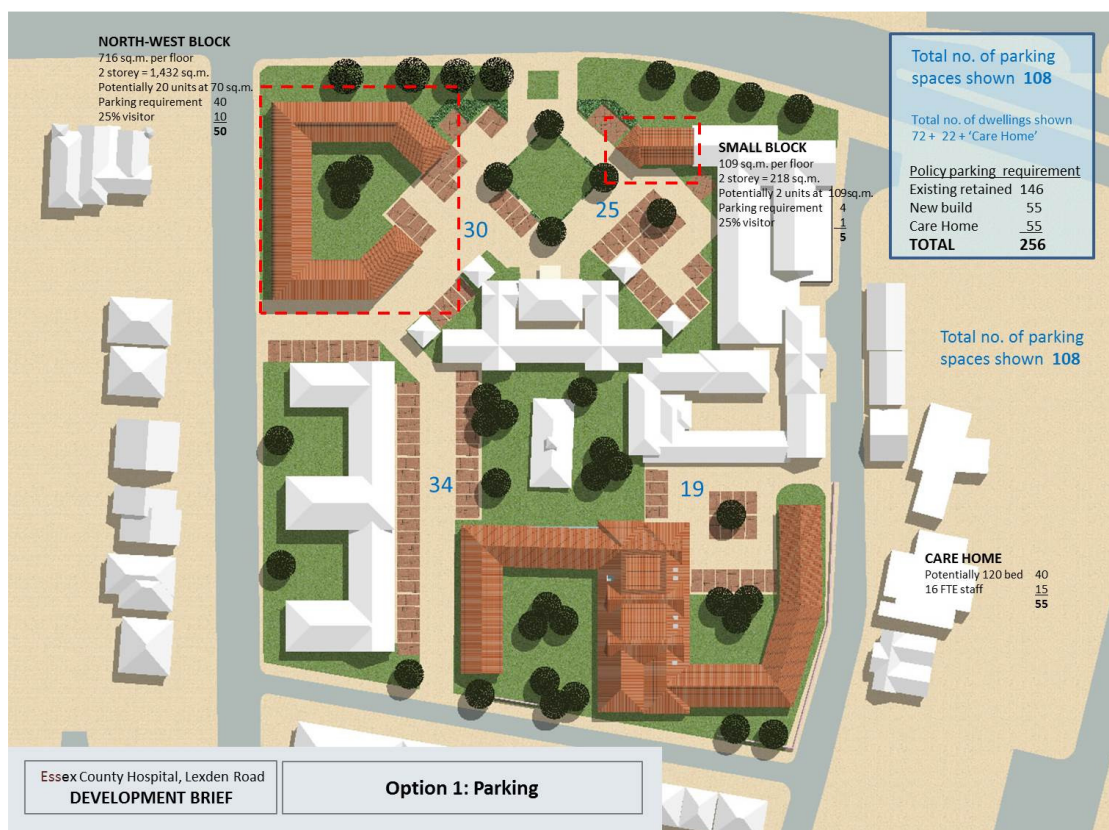
## Alternative design solutions

- 4.8 Inevitably, the site has potential for a variety of alternative design solutions. These generate differing parking and amenity space requirements. The following options examine different potential approaches and set out an indication of the relevant parking requirements. This Brief does not intend to be prescriptive but simply to identify alternative approaches that could be investigated. In each case an illustrative plan is shown that is simply intended to provide a basis for further discussion.



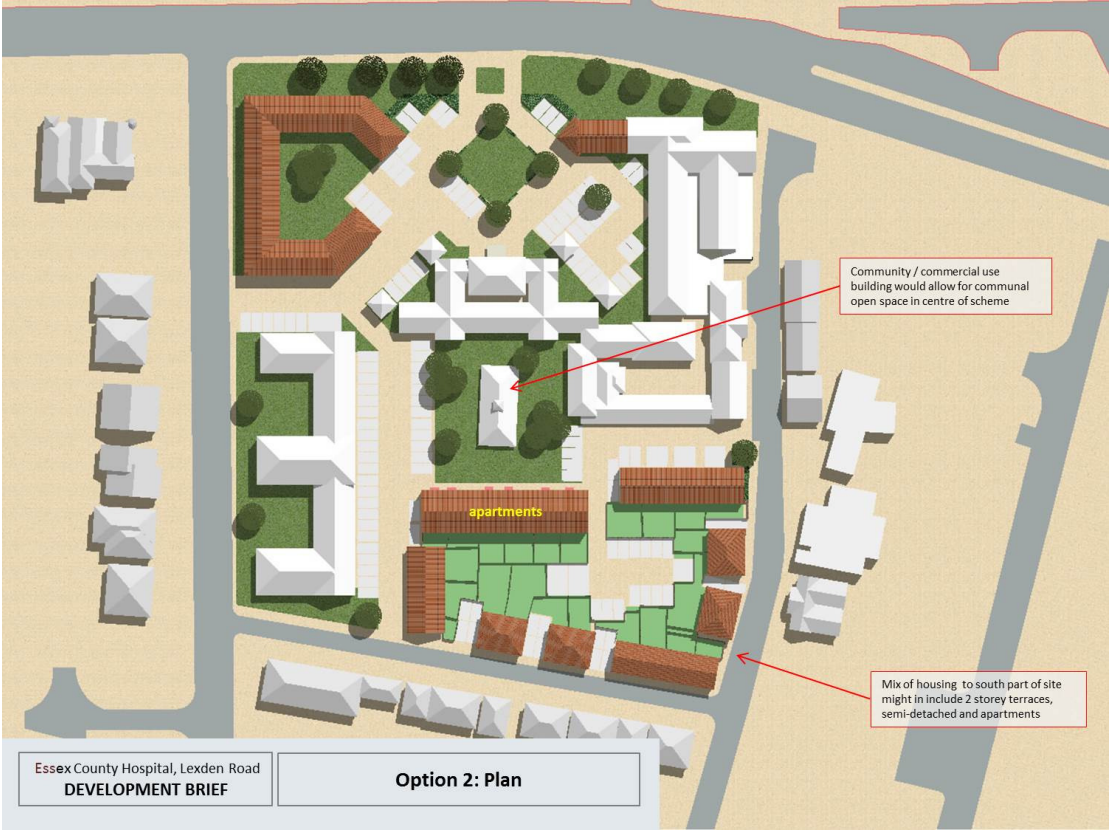
**Option 1: Conversion of existing buildings to residential, complemented by new build apartments and a sheltered housing scheme to the rear (s)**







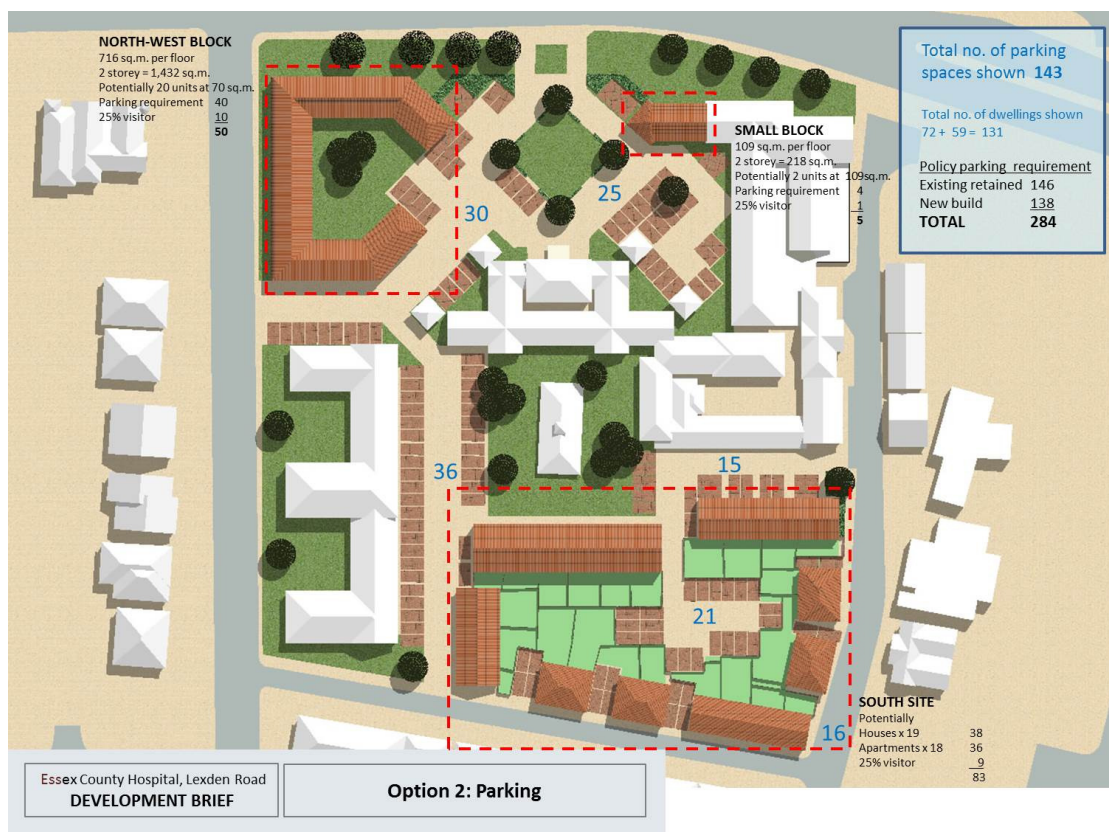
**Option 2: A residential solution with a mix of housing types**





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Option 2: Axonometric

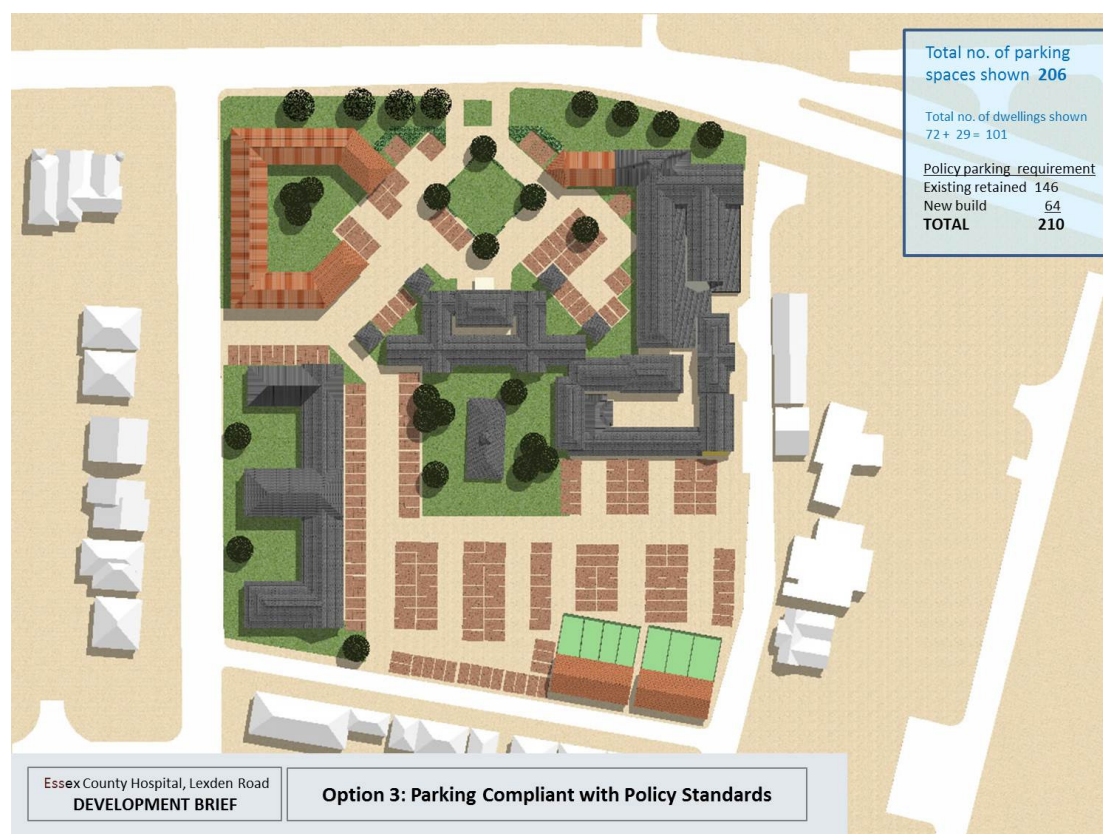


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Option 2: Parking



### Option 3: A mixed residential solution that satisfies adopted parking standards



**Option 3** is intended to illustrate the inefficient use of space that results from strict compliance with adopted parking standards. This solution would still fail to satisfy adopted amenity space standards having regard to policies DP11 and DP12. The creation of a large car park that dominates the southern quarter of the site would fail to preserve the character of the conservation area and would be unsympathetic to the setting of listed buildings. An off-site parking solution could enable a more efficient use of land in this sustainable location. Furthermore, the fragmented townscape that results from a fully compliant parking solution would create an unsatisfactory environment for residents.

## 5.0 The Development Process

### Application Process

- 5.1 The detailed proposals and the scope of the application as well as the realistic level of contributions towards social and physical infrastructure will be discussed and agreed with CBC at the pre-application stage.
- 5.2 This detailed scope will confirm the documents required for any application submission, but these will include: Affordable Housing Statement; Travel Plan, Daylight and Sunlight Assessment, Contamination survey, Health Impact Assessment, Viability Appraisal, Heritage Appraisal (including assessment of significance of individual existing buildings) Archaeological Desk Based Assessment and WSI.

Please refer to the local validation check list on the website: [Link to validation Local Check List](#)

## **Planning Obligations**

- 5.3 Future developments will be required to make a financial contribution towards the provision of additional local infrastructure facilities in accordance with adopted policy DP3. Potential contributions include: Community Facilities (as per adopted SPD), Urban Archaeological database (UAD) £5k, the provision of travel packs for new residents, the provision of a 2 m footway around the perimeter of the site, Public Open Space contribution (as per adopted SPD), Play space, Sport and Leisure contribution (as per adopted SPD with projects including the West End Sports Ground) and education. Affordable housing will be required to be delivered at 20% of the overall mix of house types in accordance with policy H4 of the Adopted Core Strategy (2008 Revised July 2014)
- 5.4 The precise details will be negotiated between the future developer/applicant and the Council's planning and housing officers, taking into account the economic and site circumstances at the time of the application.

## **6.0 Conclusion**

- 6.1 The Essex County Hospital site is located in a highly sustainable location close to the town centre of Colchester. Whilst proposals incorporating elements of community use will be favoured in accordance with policy DP4; mixed use schemes will be encouraged. It is acknowledged that wholly residential uses may also be acceptable where justification can be provided to demonstrate that mixed uses are undeliverable.
- 6.2 Whilst a relaxation of parking and amenity space standards may be justified in this accessible location, given the existing shortage of parking in the locality, developers will be encouraged to provide off-site parking in mitigation. Details of the proposed solution should accompany any application and preferably be discussed with the Council prior to submission.
- 6.3 Any scheme will be expected to maximise the retention of historic buildings within the site and to respect their setting(s) through the introduction of development of a sympathetic scale, form and contextual relationship. The wider relationship of the development with the surrounding conservation area is an important consideration in terms of built forms and uses.
- 6.4 The provision of affordable homes and other developer contributions will be sought in accordance with relevant adopted SPD. Where any relaxations are proposed these will require clear justification through 'open book' viability appraisal.

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