

DATE	TIME	VENUE
30 April 2024	6pm-8pm	Government of Jersey Studio

NHFP Programme Director	JH
NHFP Programme Healthcare Lead	PHL
NHFP Programme Delivery Lead	PDL
NHFP Programme Engagement Lead	PEL
ARUP – Engineering Lead	MO
LDA – Landscape and Ecology	DP
Arup - Transport Lead	AW
Llewelyn Davies – Healthcare Architect	AC

**A discussion took place following a presentation of the Overdale concept design and masterplan**

1	Welcome, and actions from previous forum (March, 2024)	Actions
	<p>PHL advised that the number of ambulance visits are approx. 18 emergency cases in a 24-hour period which is broken down to an average of 12 transfers between 8am-8pm, and an average of 6 transfers between 8pm-8am.</p> <p>PCL noted that the service had reconfirmed that the use of the sirens is only permitted as a warning during peak hours.</p> <p>AC provided a size comparison and overlay of NHFP and OHP, noting that OHP main building was 61k sqm (with overall development of 70k sqm including a multi-storey car park, energy centre and knowledge and training centre). NHFP is now 47 to 48k sqm.</p> <p>PDL advised that demolition contractor (JDC) has reduced the height of the rubble heaps, explaining that as additional space is created from demolition, the rubble heaps locations will be reviewed and consolidated, where possible to the centre of the site.</p> <p>PDL advised that signage has been improved following feedback that carparking signage for the Crematorium needed to more visible.</p>	

2	Acute Hospital at Overdale concept designs and site master plan	Actions
	<p>A resident asked who would be using the Active Travel Route. AW explained that the route could be used by pedestrians and cyclists. The resident asked if the route could be extended to include access for emergency vehicles.</p> <p>AW advised that due to ecological impacts and cost benefit analysis, the number of transfers (approx. 18 in a 24-hour period) would not justify the costs it would require to make the route accessible to emergency vehicles.</p> <p>A resident raised a query around the impact of adding additional traffic lights on the flow of traffic in the St.Aubin's/Cheapside area.</p>	

	<p>AW advised that an impact assessment will be conducted, assessing both the impact with and without traffic lights but reminded the resident that the scheme could not remedy the wider network capacity issues that already exist, advising that 95% of the trips associated with the new facility will have already been on the network. AW added that the programme has however developed improvements where possible and necessary owing to the redistribution of flows from the JGH to the new acute hospital.</p> <p>The resident questioned why the network issues do not come under the Programme's remit.</p> <p>JH advised that the team have been liaising with Infrastructure and Environment as well as Parish of St Helier working with transport teams to mitigate impacts from the Acute hospital. However, the New Healthcare Facilities Programme's remit is to deliver the new facilities that desperately need to be delivered.</p> <p>A resident asked if there will be a solid boundary on the south of the site.</p> <p>PDL advised that this had not been part of the concept design, however a fence could be introduced.</p>	
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<b>3</b>	<b>Demolition progress</b>	<b>Actions</b>
	<p>A resident asked if the Crematorium was being relocated.</p> <p>PDL advised that this is not within the Programme's remit, and the plans have been designed with the Crematorium remaining in place.</p> <p>A resident asked about the possibility of re-opening pedestrian access routes once demolition completes.</p> <p>PDL advised that this is still the plan and is expected to re-open in approx. 6 weeks however could not guarantee how long the route would remain open once construction begins. PDL advised that, if possible, an alternative route will be investigated.</p> <p>PDL added that if the route takes longer than 6 weeks to reopen, this will be communicated to residents.</p>	

<b>4</b>	<b>Questions</b>	<b>Actions</b>
	<p>A resident asked about the possibility of re-routing the road around in a straight line on the south-east side of the bowling club to reduce the hairpin bend of the road.</p> <p>JH added that the current scheme has been agreed on a do minimum basis in relation to Westmount Road, leaving the Bowling Scheme in-situ therefore it would not be feasible to reroute the road.</p> <p>A resident raised safety concerns around the already busy junction at the top of Tower Road and Westmount Road, once the Programme moves into delivery phase.</p>	

	<p>PDL assured the meeting that safety is paramount, and the team will review and make improvements to junctions and pedestrian routes where possible.</p> <p>JH asked the resident if the existing concerns with the junction have been communicated to the Parish Roads Committee since this may provide improvements sooner. It could also provide additional weight to scheme proposals for junction improvements.</p>	
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