SUMMARY OF PLANNING APPLICATION FOR OVERDALE ACUTE HOSPITAL





Application reference: P/2024/1025

3rd February 2025



CONTENTS





- 1 INTRODUCTION
- **2 ENGAGEMENT**
- 3 THE PROPOSED DEVELOPMENT
- 4 KEY FACTS AND PROJECT DETAILS
- 5 RELATIONSHIP WITH PLANNING POLICY
- 6 THE KEY BENEFITS OF THE SCHEME
- 7 APPENDIX 1

Summary List of Submission Documents EIS Navigation

8 APPENDIX 2

Summary of Environmental Impact Statement



1 INTRODUCTION





The Government of Jersey is proposing a new Acute Hospital at Overdale, Westmount Road. It is included in the first phase of the New Healthcare Facilities Programme (NHFP). The facility will replace outdated and inadequate healthcare infrastructure, addressing Jersey's immediate and future healthcare needs. The proposed hospital will improve health outcomes, increase patient capacity, and provide Jersey with a high-quality, sustainable healthcare facility.

From a planning policy perspective, it aligns with the highest priority of the Bridging Island Plan (BIP) and will provide a significant, island-wide public benefit. The proposed hospital is a plan-led development and the principle of a new hospital on the site is established by its site allocation and extant Planning Permission for the Our Hospital Programme (OHP).

The Applicant, the Minister for Health and Social Services and the Department of Health and Care Jersey, has sought to achieve the best possible design relative to the needs of the hospital and the land available. The proposals have achieved this whilst respecting its physical context, especially its neighbouring properties, whilst also enhancing the environmental qualities of the surrounding area and the site itself. The design has been developed following comprehensive dialogue with clinical and non-clinical hospital staff and building on feedback from the previous proposal. There has also been extensive consultation with statutory and non-statutory stakeholders, most importantly allowing the Islanders to 'have their say' on theemerging proposals.







Clinical and healthcare, regulatory and public feedback has been critical to the development of the proposals presented in the Planning Application

Clinical and Healthcare Engagement

Stakeholder engagement with colleagues in Health and Care Jersey (HCJ) has been ongoing since the Programme's inception in 2023 to guide the design of the New Acute Hospital at Overdale. Engagement methods include Clinical User Groups (CUGs), Strategic User Groups (SUGs), governance meetings, drop-in sessions, ward visits, and internal communication.

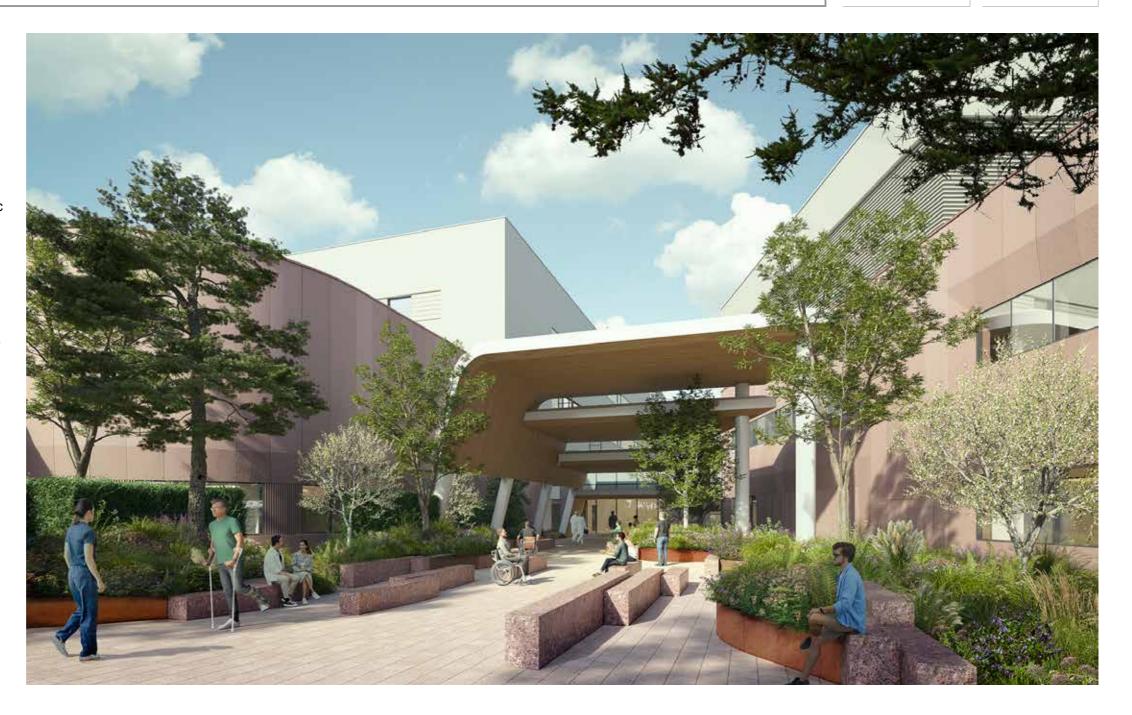
CUGs and SUGs provide clinical and non-clinical teams a platform to shape the design of areas within the Acute Hospital, ensuring workplace flows, adjacencies and departmental needs, fundamental to the design of healthcare buildings, are met. From these sessions, the design team has incorporated feedback, adjusting plans where necessary.

Initial HCJ engagement focused on service clustering, resulting in a split between Acute and Ambulatory services. Workshops and meetings held between April and November 2023 supported the development of Functional Briefs, finalising service locations by the end of that year. In total, more than 190 User Group sessions have been conducted, refining plans from 1:500 clinical adjacencies to 1:50 detailed layouts. In addition, there has been more than 30 clinical governance meetings since the Programme's inception. Further HCJ engagement will continue through the design phase and beyond.

Regulatory Engagement

Since the Programme began, regular meetings with key regulatory stakeholders, including Government departments, directorates and the Parish of St. Helier,, have ensured alignment with regulations, standards, and policies. Stakeholders include, but are not limited to: Operations and Transport (including Liquid and Solid Waste), Jersey Fire and Rescue Service, States of Jersey Police, States of Jersey Ambulance Service, Economy, Natural Environment, Building Control, Utilities, Regulation and Land Resource.

These departments or directorates represent specific regulatory areas where it is important for stakeholder views to be heard and considered in the development of the scheme since in some cases, they may administer the assets created through this project.



2 ENGAGEMENT





Public Engagement

There has been consistent public engagement and consultation from the beginning of 2023, initially aimed at developing understanding about the clustering of clinical services and re-engaging key stakeholder groups. Following the Feasibility Study's publication in June 2023, engagement expanded to include Neighbourhood Forum meetings, Programme website updates, briefings and, where relevant, media updates. Between January and April 2024, targeted engagement was held with stakeholder groups directly impacted by the proposals, such as regulatory stakeholders, in the area, arm's length organisations and advisory groups, as well as environmental groups. Feedback from these sessions informed the subsequent public consultation on the Acute Hospital, which ran from May to June 2024.

The public consultation, completed by 225 respondents, revealed broad support for the project, with many Islanders expressing the desire for swift action to prevent further delays. A comprehensive communications strategy included traditional and digital media, public events, inclusive and accessible content, and innovative tools like virtual reality and fly-throughs of the Acute Hospital to enhance public understanding. Feedback from the consultation highlighted key priorities such as accessible parking, sustainable design elements, and integrating Jersey's identity into the hospital's interior. Concerns, including construction impact, traffic management, and consultation fatigue, were also noted, emphasising the desire of Islanders to see tangible progress on the project.



3 THE PROPOSED DEVELOPMENT





Following on from the OHP Planning Permission for the Overdale site, the existing, predominantly healthcare buildings, on the site have been demolished. Aside from some minor works of demolition which will be needed if this application is approved, a planning permission could deliver construction works without delay.

The proposed scheme is of smaller scale than the approved OHP and includes a single main building. It comprises less parking and no significant changes to Westmount Road are required owing to the separation of clinical services and reduced vehicle movement. The Bowls Club will remain and there is no loss of residential properties. Westmount Terrace, Hillcrest, and Castle View will remain. The Jersey Water building is also retained and re-used.

The Acute Hospital building, on the west side of Westmount Road comprises up to five floors of accommodation (one lower ground and four above), plus plant, with a total of approximately 47,729 sq.m. Gross Internal Floor Area (GIFA). The building is designed to sit within the local landscape, with upper floors setback to reduce visual impact and 'wings' of the building pushed back to reduce proximity to residential properties, as far as possible. The design further responds positively to its environmental factors, ensuring daylight, sunlight and wind are positive contributors to the building and its occupants.

Clinical Services

The hospital will offer a range of essential services including clinical services designed for modern day healthcare, including infection control considerations and optimum adjacencies:

- **Emergency Department:** With direct and separate ambulance access.
- Radiology and Diagnostics: Equipped for advanced imaging and testing.
- Women's and Children's Services: Covering maternity, obstetrics, neonatal, and paediatric care.
- Inpatient Wards and Surgical Facilities: For both emergency and overnight planned procedures providing privacy and dignity in 75% single rooms.
- Support Facilities: Key support services, including a pharmacy, pathology, catering, administrative offices, and staff wellbeing and welfare areas, will streamline hospital operations and enhance patient care.
- **Endoscopy:** For both emergency and planned procedures.











The development and design strategy is informed by:

- Achieving the optimum hospital design (more than 190 clinical user and more than 30 senior hospital user meetings) and adherence to 'what the best hospital looks like'
- Ensuring the best use of the site and land available (acknowledging sensitivity to adjacent uses and distant views), supported by a connected and extensive, landscaped environment
- Embracing environmental drivers (specifically passive design measures to support sustainability objectives)
- Acknowledging the Jersey context of the highway network whilst ensuring the delivery of safe and sustainable access and egress for all modes of transport

Indicative timeline for delivery

The funding was secured for the new Acute Hospital as part of the Budget and consequently, with a successful Planning Determination, there is a route to starting construction this year with all the economic benefits that this will bring to the construction industry and affiliated organisations.

Currently, there are procurement activities for the Facilities Management (FM) Hub. Development Works and the Main Acute Hospital Delivery Partner.

The high-level timeline below will be confirmed as procurement progresses.

	Start Date	End Date
Development works phase 1 and 2	Q4 2024	Q4 2025
Substructure (inc. piling)	Q3 2025	Q4 2026
Super-structure	Q2 2026	Q2 2027
Facades	Q4 2026	Q4 2027
Fit out, testing and commissioning	Q4 2026	Q2 2029
Landscaping / Public realm	Q1 2026	Q4 2028
Active travel route	Q4 2025	Q1 2027
Highways works	Q3 2025	Q2 2026

Access, Parking, and Transport Enhancements

Parking

The scheme includes 343 parking spaces (including accessible and EV spaces), 20 motorbike spaces, and secure bicycle storage for both staff and visitors. There are 90 long-stay cycle parking stands for staff and ten short-stay secure and sheltered Sheffield style stands for patients and visitors.

Public Transport and Drop-Offs

Vehicular drop-offs benefit from multiple access points into the pedestrian entrance concourse. Dedicated drop-off points for patients and an accessible car park are located close to the south entrance. There will also be a new bus terminal and patient transport services located close to the north entrance. A new single direction loop directly off Westmount Road to the east will provide direct and dedicated access for Ambulances to the Emergency Department.

Active Travel Corridor

An Active Travel Route will allow pedestrians and cyclists to access the hospital through Val Andre and West Park, connecting it to surrounding areas and improving overall connectivity. It is a significant public benefit as it increases accessibility to Westmount Gardens for the public as well as hospital users and links to Westmount Road, Tower Road and Old St John's Road for Overdale residents.

Highway Improvements

The proposed scheme requires significantly less highways mitigation than the previous scheme given the reduction in trip generation resulting from its designation as an Acute Hospital, compared to OHP which provided for both Ambulatory and Acute facilities. Minor works to improve the horizontal and vertical alignment of Westmount Road will provide suitable access for ambulances, buses, operational and private vehicles. Footways will also be improved as well as pedestrian crossings to; Victoria Avenue, Inner Road, St Aubin's Road and Westmount Road.









Other betterment over the approved OHP Scheme

Reduced Scale

The proposal (five floors of accommodation plus plant) comprises a significantly more compact design (47,729 sq.m. GIFA) in comparison to the permitted OHP scheme which was 61,629 sq.m in relation to the main building and circa 71,000 sq.m. in regard of the overall proposed development (i.e. one third smaller in development area). As the required internal capacity is substantially smaller, this has allowed the building to be crafted and sit more comfortably within the surrounding context and landscape.

The building is significantly smaller in volumetric terms, particularly on its upper floors, being also lower in height with set-backs on the upper floors that respond sensitively to its physical context.

Reduced basement

There will be significantly less excavation required compared to Our Hospital and the excavated material can be re-used, the figures below show the direct comparison of the two schemes.

OHP

Surplus (inc. site clearance): 113,806 m³

NHFF

Surplus (inc. site clearance) - Site Waste Management Plan will prioritise re-use on site for; filling/landscaping: 32.564 m³

Service Yard

Operational vehicles will be separated from other flows into the service yard. For the current proposals, the yard is surrounded by buildings reducing any of its potential impact on neighbours.

Height

The hospital is 3.4 m lower in height (measured from the lowest floor) than OHP and 2.74 m by datum, effectively a floor lower, represented by the omission of a full, intermediate plant floor. Further, the building volume at its upper levels is substantially less than the approved OHP scheme, resulting from the design strategy to step the building, achieving a series of setbacks which respect existing, adjacent uses and minimise impact on long distance views.

Reduced trips

OHP sought to consolidate a larger number of services in one location, whilst NHFP distributes services across multiple locations, reducing the scale of Overdale Acute Hospital and focusing on acute care while separating Ambulatory, Mental Health, Rehabilitation and other services to other sites.

No loss of residences

The NHFP scheme retains the Bowls Club, Westmount Terrace Properties and Hillcrest residencies as it doesn't require the realignment of Westmount Road. The former Jersey Water Building is also retained and re-used.

Different service provision

Given the proposed hospital is an Acute Hospital, it will run in a different way to that of OHP. The delivery of Acute services tends to be 'quieter' than a hospital providing both Acute and Ambulatory service.

Agricultural Fields

It is acknowledged that there will be a loss of agricultural fields, however these are an anomaly in this part of St Helier. They are isolated making their use difficult for agriculture and representing a very small proportion of agricultural land. Further, whilst the areas will be used for car parking, it is heavily landscaped and contains sustainable urban drainage to minimise surface water run-off, increasing the area for landscaping east of Westmount Road, over that proposed for OHP.

Heritage/Archaeology

No Listed Buildings are demolished as part of this Planning Application. Some archaeological finds were found by investigations undertaken as part of OHP (and considered by the Planning Inspector). Excavations at the site have continued to have an archaeological watching brief, with no further finds. Further, owing to the stepped nature of the main building, distant views from heritage assets are much improved.

Construction

Construction impacts from this scheme will be less than for OHP owing to the reduced excavations, substructures and basements, infrastructure requirements as well as the reduction in building size. All impacts will be monitored and managed through the Construction and Environmental Management Plan and Construction Transport Management Plan, as they have been successfully through the demolition stage. Moreover, Crematorium services will be temporarily relocated during the construction phase.

Sustainability

Building Research Establishment Environmental Assessment Methodology (BREEAM) scoring is currently ~77% against BREEAM International Version 6, so is achieving an Excellent rating, in line with the project target.

Sustainability Targets

The project has set out a series of sustainability targets beyond the planning requirements, the current status is shown in the table below:

Environmental Impact Assessment

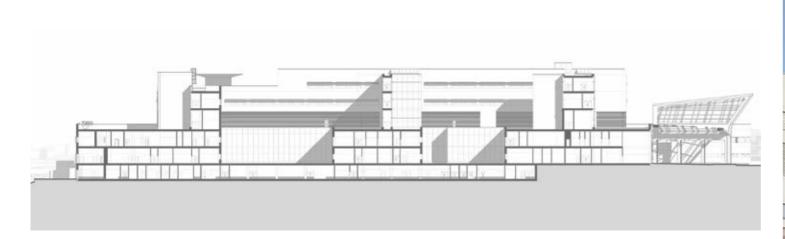
Article 13 of the Planning and Building (Jersey) Law 2002, as well as Planning and Building (Environmental Impact) (Jersey) Order, 2006 have set out the criteria for the Environmental Impact Assessment (EIA) to be undertaken. Overdale Acute Hospital falls within schedule 1 of the EIA Order – urban development projects with a total building floor area exceeding 10,000m² are development which requires EIA. The EIA was undertaken to an agreed set of topics, agreed through the scoping exercise with Planning, and concluded within the cumulative assessment that the hospital, in its operational state, is considered to have no adverse affects. For a non-technical summary of the EIA findings refer to Overdale Acute Hospital Non-Technical Summary submitted within the planning application, for more detailed information refer to the wider EIA documents, refer to Appendix 3.

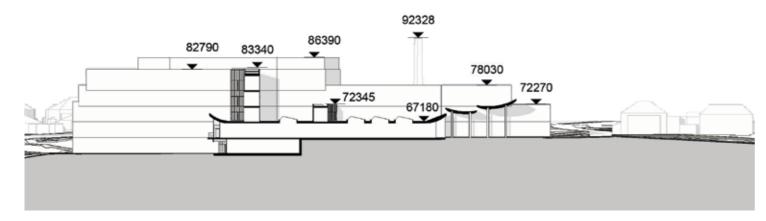
Scenario	Project Target	Status
BREEAM	Excellent rating	77% target score (Excellent)
Building Regulations Energy Compliance	Achieve UK Part L (2021) performance	+10% achieved
NZC (Operational)	All-Electric heating	Included as well as Photo Voltaic generation ~2-3% generation
NZC (Embodied)	Will measure embodied carbon using RICS Methodology	Whole Life Carbon Assessment (WLCA) modelling measuring performance against initial 1,000kgCO2e/sqm target
Passive Design	Adopt Passivhaus principles as appropriate	Included and Building Regulations UK Part L (BRUKL) scoring showing improvements
Biodiversity	Biodiversity Net Gain +10% Urban Greening Factor 0.30	16% area & 10% Liner UGF at Stage 4
	Note: Whilst not mandatory, the targets established are considered beneficial to the project	Je. at Stage 1

4 KEY FACTS AND PROJECT DETAILS









Indicative Comparative Sections of OHP (above) and NHFP (below) Illustrating the benefit of the stepped massing adopted for NHFP





4 KEY FACTS AND PROJECT DETAILS







Public Concourse



Inpatient Ward Circulation with Single Rooms

Note: Interior CGIs for illustrative purposes only, subject to further design development.



Concourse Cafe Area - looking towards Le Val Andre



Inpatient Ward Arrivals

4 KEY FACTS AND PROJECT DETAILS







Single Inpatient Room



4-bed Inpatient Bay

Note: Interior CGIs for illustrative purposes only, subject to further design development.



Maternity Ward Birthing Room



Staff Wellbeing Area

5 RELATIONSHIP WITH PLANNING POLICY





The scheme is consistent with both Policy CI3 and the new Bridging Island Plan as a whole. It is a plan-led scheme, providing a significant island-wide community benefit.

The current (live) planning permission is also a very significant material consideration in relation to this application. This is because it has set in place a planning permission for a new hospital on the site of a significantly greater extent than the scheme that is now proposed, along with car parking, landscape and alterations to the highway. That planning permission was determined against the same planning policies against which this planning application will be considered.

Notwithstanding the current planning permission, the development proposals respond to an unprecedented, urgent and clear requirement for a new hospital, in a resilient and flexible scheme that will adapt to changing circumstances. The new hospital will be a significant step in replacing an existing deteriorating healthcare estate.

The application site has been allocated in BIP Policy CI3. Though there are some policy tensions with that allocation and other policies in the plan, that is not unusual in seeking to deliver major development- the scheme is visible and some impacts would be adverse- but the BIP is clear: the application site is suitable for a new hospital and affords it the 'highest priority'. It also follows that the proposed development is in a sustainable location within the designated area of 'Town'. Even if it were not allocated, it is in an appropriate location because it is in a location to which the scheme would otherwise be directed, in other policies.

The scheme is of a significantly lesser extent than the approved OHP scheme and significantly 'quieter'. The proposed scheme is the best design option for site, relative to the need for it and the land that is available (again, to accord with BIP Ppolicy CI3). It is reasonable to conclude that this application is of a lesser overall impact than the already approved scheme, while complying with the BIP.





6 THE KEY BENEFITS OF THE SCHEME





- The scheme is smaller than OHP, which already has planning permission. It is also in a location required by planning policy: the Bridging Island Plan allocates the site for hospital development, has made it the 'highest priority' of the plan and the principle of development here (and of a larger scale) has already been thoroughly tested through public inquiry.
- Design optimised to provide a modern, fit-for-purpose hospital facility, which as part of the wider NHFP, will help meet the current and future needs of patients, clinicians, healthcare staff and visitors.
- High quality architecture, is smaller scale and with 'less impact' than OHP, adhering to salutogenic and biophilic design principles, connected to an enhanced landscape to benefit recovery and wellness.
- High quality landscape design which reflects
 Jersey's character and includes multi-function,
 green spaces for children's play, therapeutic
 gardens, fitness and general enjoyment by staff,
 patients, and visitors alike.
- Addition of significant onsite planting and greenery to enhance biodiversity and landscape quality.
- Enhancement of publicly accessible open space across the hospital site, including the creation of an Active Travel Route through Val Andre, West Park and Westmount Gardens.
- A sustainable design, which seeks to minimise carbon emissions resulting in this first phase of the NHFP being significantly more sustainable than the existing healthcare estate. Significant operating carbon reduction (of circa 85%) in comparison to the existing equivalent hospital estate
- Planned to be flexible and able to adapt to future clinical change.
- Significant improvement to the existing transport network through localised widening of Westmount Road, junction improvements and new traffic management.
- Integrated arts strategy to deliver art for the hospital and the public, maximising opportunities for the Jersey arts community.
- Creation of direct and indirect jobs throughout the construction period and in non-clinical roles.
- The application meets the planning policy test of being the best design option relative to the needs of the hospital and the land available. It is much needed given the condition of the existing facilities as well as the increased need for capacity. Most importantly, with planning permission, building works can start in 2025.



7 APPENDIX 1 – SUMMARY LIST OF SUBMISSION DOCUMENTS





- · Planning Statement
- Design and Access Statement
- · Statement of Community Participation
- Therapeutic Arts Strategy
- Sustainability Report, and BREEAM Report
- Outline Landscape Maintenance and Management Plan
- · Landscape and Ecology Management Plan
- Tree Survey
- Architectural, Landscape and Engineering drawings
- 3D Model
- Environmental Impact Statement (including Non-Technical Summary and associated appendices and figures) as outlined in Appendix 3.

7 APPENDIX 1 – EIS NAVIGATION





EIS Chapter	Document Reference
Chapter 1: Introduction	
Chapter 2: Approach to the EIA	NHFOV-ARP-XX-XX-RP-EN-000013
Chapter 3: Project Description	
Chapter 4: Traffic and Transport	NHF0V-ARP-XX-XX-RP-TP-000003
Chapter 5: Noise and Vibration	NHFOV-ARP-XX-XX-RP-EN-000015
Chapter 6: Air Quality	NHFOV-ARP-XX-XX-RP-EN-000016
Chapter 7: Hydrology and Flooding	NHFOV-ARP-XX-XX-RP-EN-000083
Chapter 8: Ground Conditions	NHFOV-ARP-XX-XX-RP-EN-000084
Chapter 9: Biodiversity	NHFOV-ARP-XX-XX-RP-EN-000019
Chapter 10: Landscape and Visual	NHFOV-ARP-XX-XX-RP-EN-000020
Chapter 11: Socioeconomic	NHFOV-ARP-XX-XX-RP-EN-000021
Chapter 12: Health and Wellbeing	NHFOV-ARP-XX-XX-RP-EN-000022
Chapter 13: Material Assets and Waste	NHFOV-ARP-XX-XX-RP-EN-000023
Chapter 14: Climate Change	NHFOV-ARP-XX-XX-RP-EN-000024
Chapter 15: Cultural Heritage	NHFOV-ARP-XX-XX-RP-EN-000025
Chapter 16: Wind	NHFOV-ARP-XX-XX-RP-EN-000026
Chapter 17: Cumulative Effects	NHFOV-ARP-XX-XX-RP-EN-000027
Non Technical Summary	NHFOV-ARP-XX-XX-RP-EN-000082

EIS Chapter	Appendix	Document Reference	
Chapter 2: Approach to the EIA	Appendix 2.1: Competency Statement	NHFOV-ARP-XX-XX-RP-EN-000028	
Chapter 3: Project Description	Appendix 3.1: Outline CEMP	NHFOV-MCE-ZZ-ZZ-RP-ZZ-000001	
	Appendix 3.2: Outline SWMP	NHFOV-MCE-ZZ-ZZ-RP-ZZ-000003	
Chapter 4: Traffic and Transport	Appendix 4.1: Transport Assessment Part 1	NHFOV-ARP-XX-XX-RP-EN-000097	
	Appendix 4.1: Transport Assessment Part 2	NHFOV-ARP-XX-XX-RP-EN-000098	
	Appendix 4.1: Transport Assessment Part 3	NHFOV-ARP-XX-XX-RP-EN-000099	
	Appendix 4.1: Transport Assessment Part 4	NHFOV-ARP-XX-XX-RP-EN-000100	
	Appendix 4.1: Transport Assessment Part 5	NHFOV-ARP-XX-XX-RP-EN-000101	
	Appendix 4.2: Construction Traffic Management Plan	NHFOV-MCE-ZZ-ZZ-RP-ZZ-000002	
Chapter 5: Noise		NHFOV-ARP-XX-XX-RP-EN-000030	
	Appendix 5.1: Baseline noise survey (split into 3 parts)	NHFOV-ARP-XX-XX-RP-EN-000031	
		NHFOV-ARP-XX-XX-RP-EN-000032	
	Appendix 5.2: Construction plant assumptions and results	NHFOV-ARP-XX-XX-RP-EN-000033	
	Appendix 5.3: Traffic noise assessment		
Chapter 6: Air Quality	Appendix 6.1: Air Quality Assessment Methodology	NUIFOV ADD VV VV DD EN 000004	
	Appendix 6.2: Operational traffic model results	NHFOV-ARP-XX-XX-RP-EN-000034	
Chapter 7: Hydrology	Appendix 7.1: Drainage Strategy	NHF-ARP-XX-XX-RP-CD-000001	
and Flooding	Appendix 7.2: Flood risk technical note	NHF-ARP-XX-XX-RP-CG-000002	
Chapter 8: Ground	Appendix 8.1: Geotechnical desk study	NHFOV-ARP-XX-XX-RP-EN-000062	
Conditions	Appendix 8.2: New Healthcare Facilities Ground Investigation Report_2024	NHFOV-ARP-ZZ-ZZ-RP-GE-000001	
	Appendix 8.2: OHP Ground Investigation Report_2022	NHFOV-ARP-XX-XX-RP-EN-000078	
	Appendix 8.3: Draft Factual Report	NHFOV-ARP-XX-XX-RP-EN-000064	
	Appendix 8.3: OHP Factual Report Phase II GI	NHFOV-ARP-XX-XX-RP-EN-000065	
	Appendix 8.3: Part 1 OHP Factual Report - Phase I GI	NHFOV-ARP-XX-XX-RP-EN-000066	
	Appendix 8.3: Part 2 OHP Factual Report - Phase I GI	NHFOV-ARP-XX-XX-RP-EN-000067	
	Appendix 8.3: Part 3 OHP Factual Report - Phase I GI	NHFOV-ARP-XX-XX-RP-EN-000068	
	Appendix 8.4: Soil Classification Report	NHFOV-ARP-XX-XX-RP-EN-000069	

7 APPENDIX 1 – EIS NAVIGATION





EIS Chapter	Appendix	Document Reference
Chapter 9: Biodiversity	Appendix 9.1: Baseline Ecology Report. Published August 2024	NHFOV-ARP-XX-XX-RP-EN-000070
	Appendix 9.2: Bat Survey Results Report for Briez Izel (garage).	NHFOV-ARP-XX-XX-RP-EN-000071
	Appendix 9.3: Bat Survey Results Report for Thorpe Cottage.	NHFOV-ARP-XX-XX-RP-EN-000072
	Appendix 9.4: Ecological Survey Results.	NHFOV-ARP-XX-XX-RP-EN-000073
	Appendix 9.5: Preliminary Ecological Appraisal (PEA)	NHFOV-ARP-XX-XX-RP-EN-000074
	Appendix 9.6: Bat Survey Results Report.	NHFOV-ARP-XX-XX-RP-EN-000075
	Appendix 9.7: Initial Ecological Assessment (IEA) and Preliminary Roost Inspection (PRI) of Thorpe Cottage.	NHFOV-ARP-XX-XX-RP-EN-000076
	Appendix 9.8: Biodiversity Net Gain Report.	n/a
Chapter 10: Landscape	Appendix 10.1: Methodology	NHFOV-ARP-XX-XX-RP-EN-000036
and Visual	Appendix 10.2: Visualisations and ZTV Studies	
	Appendix 10.3: 2024 comparative photography	
Chapter 12: Health and Wellbeing	Appendix 12.1: Health evidence base	NHFOV-ARP-XX-XX-RP-EN-000037
Chapter 13: Material Assets and Waste	Appendix 13.1: Materials and waste quantities	NHFOV-ARP-XX-XX-RP-EN-000038
Chapter 14: Climate	Appendix 14.1: GHG Assessment	NUIFOV ADD VV VV DD EN 000000
	Appendix 14.2: Climate Change Resilience Assessment	NHFOV-ARP-XX-XX-RP-EN-000039
Chapter 15: Cultural Heritage	Appendix 15.1: Archaeological Desk-Based Assessment	NHFOV-ARP-XX-XX-RP-EN-000040
	Appendix 15.2: Geophysical survey of fields H1550 and H1551	NHFOV-ARP-XX-XX-RP-EN-000080
	Appendix 15.3: Watching brief on geotechnical test pits in fields H1550 and H1551	NHFOV-ARP-XX-XX-RP-EN-000079
	Appendix 15.4: Watching brief on geotechnical test pits in fields H1542, H1550 and H1551	NHFOV-ARP-XX-XX-RP-EN-000081

8 APPENDIX 2 – SUMMARY OF ENVIRONMENTAL IMPACT STATEMENT





Article 13 of the Planning and Building (Jersey) Law 2002, as well as Planning and Building (Environmental Impact) (Jersey) Order, 2006 have set out the criteria for the Environmental Impact Assessment (EIA) to be undertaken. Overdale Acute Hospital falls within schedule 1 of the EIA Order – urban development projects with a total building floor area exceeding 10,000m² are development which requires EIA. The EIA was undertaken to an agreed set of topics, agreed through the scoping exercise with Planning, and concluded within the cumulative assessment that the hospital, in its operational state, is considered to have no adverse affects.

The following tables show the most significant adverse and beneficial affects, for the full details refer to the full EIS suite of documents reference in Appendix 3.

Topics	Significant effects (Construction)	Significant effects (Operation)
Cumulative	No significant effects	No significant effects
Traffic and transport	 Driver and bus passenger delay (short term, adverse) Travelling on Westmount Road, St Aubin's Road, Kensignton Street, Peirson Road, Cheapside, Elizabeth Place, Gloucester Street and The Parade. Travelling on A1 St Aubin's Road and A2 Victoria Avenue. 	 Severance (permanent, positive) Pedestrians and cycles crossing the A1 Aubin's Road, A2 Victoria Avenue, St Aubin's Road, Kensington Street, Peirson Road and Westmount Road Pedestrian and cycle delay (permanent, positive) Pedestrians and cycles crossing the A1 Aubin's Road, A2 Victoria Avenue, St Aubin's Road, Kensington Street, Peirson Road and Westmount Road Pedestrian and cycle amenity (permanent, positive) Pedestrians and cycles through West Park Pedestrians and cycles travelling on Westmount Park
Noise and vibration	 Temporary, adverse noise effects at: Dwellings on Old St John's Road that are adjacent to the site, and St Joseph's Care Home Jersey Crematorium Dwellings off Westmount Road south of the hospital site that are adjacent to the site Dwellings on Westmount Terrace Ocean Apartments Rear of upper floors of apartments on St Aubin's Road (during the minor road improvement works) Apartments on Westmount Road and Westmount Day Nursery (during the minor road improvement works). 	 Permanent, adverse noise effects at: Pierson Road – due to the introduction of new traffic signals which may cause increase of more than 1dB at a residential building. Maybe mitigated by introduction of traffic signal.
Air quality	 Temporary, adverse effect from use of generator used to power on-site concrete batching plant 	No significant effects
Hydrology and flooding	No significant effects	No significant effects
Ground conditions	No significant effects	No significant effects
Biodiversity	No significant effects	No significant effects
Landscape and visual amenity	No significant effects	 Permanent, adverse effect on UCA 10: Town Centre Edges and slopes (landscape effect) Permanent, adverse effect on Overdale Hospital Area visual receptor group (visual effect) Permanent, adverse effect on Jersey Crematorium and Mont a l'Abbe Cemetery visual receptor group (visual effect)
Socio-economics	 Short-term, positive effect on construction employment and training opportunities Short-term, positive effect on supply chain and procurement opportunities Short-term, positive effect on induced spend by construction workforce 	Permanent, positive effect from provision of new hospital facilities
Health and wellbeing	Short term, adverse effect in relation to neighbourhood amenity (combined health effects related to noise, air quality, traffic levels and crime) – particularly in relation to users of Crematorium and Garden of Remembrance.	 Permanent, positive effect from improved access to health and social infrastructure Permanent, positive effect from access to healthy food for patients and staff Permanent, positive effect from improved social cohesion and inclusive design
Material assets and waste	 Short term, adverse effect on supply of primary materials (sand) in Jersey Short term, adverse effect on landfill capacity in Jersey 	Scoped out – no significant effects
Climate change	No significant effects	No significant effects
Cultural heritage (Archaeology)	No significant effects	No significant effects
Cultural heritage (built heritage)	 Permanent, positive effect on setting of Grade 3 listed place (Westmount Gardens and Lower Park) – restoration to parts of original park layout and incorporation of interpretive history. 	 Permanent, adverse effect on setting of: Grade 2 designated heritage asset (Mont a l'Abbé Cemetery) Grade 1 designated heritage asset (Elizabeth Castle) Grade 1 designated heritage asset (Fort Regent and South Hill Battery) Grade 1 designated heritage asset (St Aubin's Fort)
Wind	Scoped out	No significant effects