

Statws/Status:
Cyfrinachol / Confidential



Adroddiad Adolygu Dylunio: 13 March 2006
Design Review Report:

Dyddiad Cyfarfod / Cyflwyno'r Deunydd: 01 March 2006
Meeting Date / Material Submitted:

Lleoliad/Location: Port Talbot

Disgrifiad o'r Cynllun Primary Care Centre
Scheme Description:

Cleient/Asiant: Neath Port Talbot
Client/Agent: Local Health Board
[Hilary Allman, John Pilcher]
Welsh Health Estates
[Nigel Davies,
Mallory Armstrong]

Developer/Datblygwr: Haven Health Properties
[Michael Luckley]

Pensaer/Architect: Holder Mathias
[Iestyn Wyn Jones,
Terry Morely]

Cynllunio: Hoare Lea [Richard Dalley]
Consultants:

Awdurdod Cynllunio: Neath Port Talbot CBC
Planning Authority: [Allan Stonehouse]

Statws Cynllunio: Pre-planning
Planning Status:

Y Panel Adolygu Dylunio/Design Review Panel:

John Punter (cadeirydd/chair)

Paul Vanner

Cindy Harris (swyddog/officer)

Ed Colgan

Lyn Owen

Douglas Hogg

Ewan Jones

Lead Panellist:

Ed Colgan

Sylwedyddion/Observers:

Charlie Deng

Design Review assistant

Cyflwyniad/Presentation

The quality of health estates in Neath Port Talbot is generally poor and they are ranked 12 out of the 22 Welsh Local Authorities. Two workshops were held to discuss the way forward and the outcome of these informed the current strategy. It was determined that Neath Port Talbot needed two primary care resource centres, of which this is the first. Haven Health Properties was appointed as the preferred developer and undertook a comprehensive site search. A steering group was formed to oversee the development of the bid, representing all users and stakeholders. The group has researched design options and has been to Sweden to view similar developments. It has worked to secure the active engagement of all partners and full patient consultation. The proposed design has won wide approval, as a landmark building which complements the new Baglan hospital, and as a facility which will meet the future needs of the community.

The architects were appointed after the site had been chosen, and their analysis of the site established little in the way of built context. The potential for solar access was good, with main views to the north. They were concerned to address Moor Road to the north, to pull back from the residential development to the west, and to provide a strong visual marker at the site entrance. The staff required a private parking area away from the public entrance.

The built form was resolved into two curved elements linked by a glazed street. The southern block was configured lower to allow daylight into the street through a clerestory. The northern curved block addresses Moor Road. Public and private external spaces are separated by the building, with staff parking to the north and public parking adjacent to the main entrance to the south. Two levels of windows for each floor give views, daylight and ventilation, while retaining patient privacy. The elevations themselves do not require much articulation, given their shape. Windows appear randomly distributed with a horizontal emphasis, but give the same level of light into each room. Different coloured horizontal bands of brickwork and render give interest to the facade.

Ymateb y Panel/Panel's Response

The Panel accepted the lack of context for this site, and the appropriate response of a bold dramatic building design. We thought that the provision of 'generous free car parking facilities' somewhat contradicted the healthy living emphasis of the development, as well as the need to develop more sustainable transport options. Bus stops are not conveniently located and there is no provision for cycle access or storage. The proposed pedestrian link to the south crosses the Care Centre's car park and leads into a supermarket car park.

The design team pointed out that many elderly or frail patients would need to be transported by car and this had been the subject of public representation. Currently 70% of patients arrive by car. The Highways department has agreed to a new cycle route on the main trunk road entering Port Talbot and it was agreed that linking it to this facility was a priority. A green transport plan is being prepared and a more direct bus access route will be discussed with the operators. The local Community Transport Forum is also involved. The Panel welcomed these initiatives.

The Panel thought that the site chosen was not a particularly sustainable location, although we accepted that there was limited choice available. The site had been chosen after a full options appraisal and fitted in with the Development Plan status. There is the possibility of a rehabilitation centre being built on the adjacent site to the north west.

The Panel was pleased to see the commitment to a NEAT Excellent rating. The biggest energy demand will be for hot water and solar thermal panels will be installed on the roof of the south facing block. Space heating will be by gas boiler; the design team stated that a biomass heating system would be uneconomical and inappropriate in a residential area. Solar shading will be provided to the ground floor facing south and to the glazed street. There is room for future expansion to the north of the site and within the envelope of the building, although it was accepted that the form of the building did not readily lend itself to adaptation.

The Panel pointed out that placing the taller element to the south would provide natural shading, but the architects felt that this might make the building dominating and intimidating for users. Deciduous planting could be used to give summer shading and allow solar access in the winter. We would like to see the roof plant relocated into the central red tower, even if this had to be made higher. Any remaining roof plant or solar panels should follow the curve of the roof.

The elevational mix of brick and render is designed to reflect the distinction between private and public respectively. Brickwork will be in blue / green engineering type bricks. We urged the team to consider rainwater runoff from eaves which could lead to staining. Horizontal banding in the brickwork will be profiled and the brickwork will turn the corner into the 'street' at the eastern end, to reinforce the blending of public and private space at this point. The Panel was informed that there will be full public access to the internal street, which in fact will be more of a public square in terms of its function.

The Panel considered that the site needed a stronger landscape treatment, especially at the boundaries. We thought that a separate vehicular staff entrance to the north east would allow a better site layout and would take more advantage of the well-landscaped southern boundary of the site, with the building moved slightly to the north to accommodate this. This would have the added advantage of allowing uninterrupted pedestrian access to the main entrance, as well as strengthening the front / back distinction. It would also encourage any cars crossing the main desire line to negotiate a sharp corner and thereby reduce speed. Failing that, there should be a shared surface where the footpath crosses the road, with pedestrian priority.

We noted that the design team will meet with the police to discuss security issues. It was confirmed that the pharmacy will be open 24 hours. Security lighting will need to be designed so as to have minimum impact on nearby housing.

Crynodeb/Summary

The Panel welcomes the innovative design response and the decision to pursue a bold, contemporary approach. We recognise that the site is not ideal, but we understand the constraints. The importance of achieving a high quality development here is that it will hopefully generate a similar response in future neighbouring developments. We consider the current proposal to be an acceptable response to the site and the brief, requiring only minor revisions. In particular:

- We applaud the key commitment to sustainability, the achievement of an Excellent NEAT rating, the inclusion of solar water heating, and the green transport plan. We disagree that biomass heating would be more expensive in the medium term.
- We find the architectural treatment interesting and we urge the designers to persist with the pristine shape through design development.
- We suggest a new vehicular entrance to the north east of the site, and the re-positioning of the building towards the north west to improve the pedestrian access and priority into the building. This would also allow the building to make maximum use of the trees on the southern boundary and create a more therapeutic setting.
- The landscape strategy needs to be developed much more fully.

Diwedd/End

NB A Welsh language copy of this report is available upon request.