Statws/Status:

Cyfrinachol / Confidential

DESIGN COMISIWN COMMISSION DYLUNIO FOR WALES CYMRU

Adroddiad Adolygu Dylunio: Design Review Report:	2 March 2007
DyddiadCyfarfod/Cyflwyno'r Deunydd: Meeting Date / Material Submitted:	14 February 2007
Lleoliad/Location:	Treharris, Merthyr Tydfil
Disgrifiad o'r Cynllun Scheme Description:	Primary Care Centre
Cleient/Asiant: Client/Agent:	Merthyr Tydfil LHB [Stephen Davies]
Developer/Datblygwr:	Haven Health [Michael Luckley]
Pensaer/Architect:	Holder Mathias Architects [lestyn Wyn Jones]
Ymgynghorwyr Cynllunio: PlanningConsultants:	CPC Ltd [Daniel Worth]
Awdurdod Cynllunio: Planning Authority:	Merthyr Tydfil CBC
Statws Cynllunio: Planning Status:	Pre-application
Y Panel Adolygu Dylunio/ Design Review Panel: Alan Francis (cadeirydd/chair) Cindy Harris (swyddog/officer) Charlie Deng(swyddog/officer) Richard Parnaby	Ann-Marie Smale Ashley Bateson Jonathan Hines Ewan Jones

Lead Panellist:	Jonathan Hines
Sylwedyddion/Observers:	Carole-Anne Davies, DCFW Mallory Armstrong, WHE
Declaration of interest:	Jonathan Hines declared a connecton to a director of Holder Mathias who is a cousin. Jonathan has no direct interest or commercial relationship to this project. The presenting team were content with this declaration.

Cyflwyniad/Presentation

An extensive site analysis has been carried out, resulting in the main design concepts:

- To continue the existing streetscape of Fox Street
- To create a landmark building which will help to increase the footfall along Fox Street
- To enhance pedestrian links across the site
- To orientate the building to take advantage of views to the north and • east, and solar access and daylight to the south.

Entrances will be sheltered from prevailing winds and a new east/west pedestrian route across the site will link the two entrances to each other and back to the town. Dentistry functions and [mainly staff] parking are located at basement level to the south of the site, taking advantage of the sloping ground. Main clinical uses will be located on the ground floor, with the main reception and patient waiting area facing south behind a tripledouble height atrium. Consulting rooms line the curved north facing perimeter with high level glazing to provide daylight and views but with security and privacy. First-and second floor accommodation is for staff only. An internal vertical rotunda provides legibility and communication. A pharmacy and health food cafe are located in a separate single storey block fronting Fox Street, the cafe benefitting from views to the east. Patient parking and four disabled spaces are provided across Fox Street to the North, with a raised crossing linking the two.

The building will be primarily naturally ventilated and solar shading will be used on the atrium. The architect acknowledged that some issues remained to be resolved, including the massing in relation to site levels. Materials will be stone, timber and render. The 'in' and 'out' access to the basement car park has been agreed with local authority highways officers, including the required visibility splays.

Ymateb y Panel/Panel's Response

The Panel appreciated the standard and logic of the presentation, and welcomed the intention to express the communal nature of the building and the provision of quality public space and facilities.

However, we thought that the current resolution of the overall form was not as strong as that promised by the initial analysis. The connection with the existing terrace form on Fox Street appeared weak, and we thought that a stronger connection could be achieved by increasing the height of the pharmacy/cafe block to two storeys. The four <u>[three?]</u> storey, stone clad, south west elevation seemed rather overbearing and its monumentality should be reduced and softened. The Panel questioned the pitched roof solution [which at 15° would not lend itself to a slate finish], and suggested a more varied section be developed, with some element of flat roofs and green roofs, stepping down the site to follow the topography. We thought the form could become more linear with a narrower plan but the architect was concerned that this would make internal communication and circulation more difficult. We thought a pitched slate roof would be more appropriate for the commercial block.

The Panel agreed that the curved plan form was an appropriate response to the site, although the curved elevations appeared too monolithic from the road. Internally, non-rectangular spaces would not work well with suspended ceilings and the architect agreed that these would be avoided. We noted that staff at <u>firstsecond</u> floor level would not have views out and the architect agreed to consider lowering the rooflights. We thought that the north facing staff terrace was redundant and would not be well used, and suggested a south facing terrace away from the main road. This could be part of the solution to reducing the scale of the south west elevation.

The Panel considered that it was important to control the quality and detailing of the glazing system, especially with such a large amount of glazing proposed, and to make provision for regular maintenance and cleaning. A thermal modelling study should be undertaken to show the degree of solar gain and the means of ventilating hot air from the top of the atrium. A venting solution capable of operating in wet weather would be recommended.

The Panel was concerned that the split parking arrangement, at different levels and opposite ends of the site, would create difficulties with legibility and accessibility. The architect pointed out that the building was vertically integrated, and that patients arriving would be directed towards different functions and access points.

The Panel was informed that the 5.5 metre high retaining wall would be stone faced. We thought this would be oppressive and suggested a cradle or gabion wall which could support pockets of vegetation. In any event, this would be an expensive item and we thought there would be benefit in making the cafe double height, to address both levels and entrances, and to animate the car park. As part of the cut and fill operation to create the two levels, the intention is to minimise materials taken off site for disposal. We were told that no

foliage higher than 250mm would be allowed on the green boundary strip to the north and north west.

The Panel advised that a vertical strategy for servicing, deliveries and patient access should be developed, in the event of any failure in operation of the single lift. We were informed that an upper level service yard exists for the commercial element, accessed from Fox Street.

In our view, there was insufficient detail on the sustainability strategy in the presentation material and this urgently needs to be developed further to inform the design development. We noted that the specification for the minor operations room required mechanical ventilation.

Crynodeb/Summary

The Panel was pleased to see an intelligent analysis of and response to the site and design issues. The introduction of daylight into the heart of the building, and the provision of a health food cafe, are particularly welcomed. This strategy now needs to be developed into a detailed resolution of the main outstanding issues. We think this proposal would be acceptable if the following were addressed satisfactorily:

- The roof form and massing need to be reconsidered in relation to the different levels. The scale of the south west elevation should be reduced.
- The sense of arrival at the lower car park is poor and we would like to see an innovative approach to this, such as extending the cafe down to the lower level, or installing pockets of planting on the retaining wall
- We were disappointed by the restrictions placed by highway engineers on planting around the perimeter of the site, and we urge that a landscape consultant is appointed as soon as possible to explore options.
- We would have expected to see a more detailed and convincing sustainability strategy at this stage, and advise that this should be incorporated into all future design decisions. Ventilation and shading provision should be based on thermal modelling.
- We have doubts about the height and scale of the upper slot of glazing in the consulting rooms, in relation to the floor area.
- The detailing of the glazed atrium should be controlled and a high quality ensured. Arrangements should be made for maintenance and cleaning.
- The servicing and delivery arrangements should be tested in the event of lift failure.

A further assessment of the proposal will be made, on receipt of revised drawings [3 hard copies and 1 electronic copy], prior to a planning application being submitted.

Diwedd/End

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