

**Statws/Status:**  
**Cyfrinachol / Confidential**



**Adroddiad Adolygu Dylunio:** 17 January 2006  
**Design Review Report:**

**Dyddiad Cyfarfod / Cyflwyno'r Deunydd:** 11 January 2006  
**Meeting Date / Material Submitted:**

**Lleoliad/Location:** Ystrad Mynach, Caerphilly

**Disgrifiad o'r Cynllun** New Hospital  
**Scheme Description:**

**Cynllunio:** Davies Langdon,  
**Consultants:** [Iwan Davies]

**Cleient/Asiant:** Gwent Healthcare NHS Trust  
**Client/Agent:** [David Jones, Alex Howells,  
Sue Rodway, Glenn Evans]  
Welsh Health Estates  
[Nigel Davies]

**Pensaer/Architect:** Capita Percy Thomas  
[Christopher Jones]

**Awdurdod Cynllunio:** Caerphilly CBC  
**Planning Authority:**

**Statws Cynllunio:** Pre-planning  
**Planning Status:**

**Y Panel Adolygu Dylunio/Design Review Panel:**  
Richard Parnaby (cadeirydd/chair) Phil Roberts  
Cindy Harris (swyddog/officer) Kieren Morgan  
Elfed Roberts Lyn Owen  
Ann-Marie Smale

**Lead Panellist:**

**Richard Parnaby**

**Sylwedyddion/Observers:**

**Charlie Deng**  
**Design Review assistant**

### **Cyflwyniad/Presentation**

The site lies close to the junction of the A469 and A472 at Ystrad Mynach, with the more minor Caerphilly Road forming the western border of the site. Current access is from Caerphilly Road and the site accommodates Caerphilly CBC offices, a Register Office and a Victorian fire station, all of which will be demolished under the current proposals. It is surrounded by playing fields, recreational areas and the River Rhymney to the south and east. A new police station has recently been constructed immediately to the north. The site is level and has been designated a C1 flood risk zone. Two options have been prepared to meet this risk, both of which involve raising and reinforcing the existing bund. As part of this proposal, the main site access will be moved to the east via a roundabout off the A469, because of flooding issues and the need for high level access. Parking will be located underneath the building at lower ground level.

The sports and recreation uses of the surrounding site will be retained and are seen as part of a health giving environment. In-patient wings will be positioned to give views to the sports field and dog racing track. The building layout is centered round a glazed concourse, which forms the hub for circulation and orientation. Courtyards and gardens surround the building and open out to the river. A public space and garden will be created in front of the main entrance, relating back to the town, and a former lake will be reinstated. Public art will be incorporated throughout the project.

### **Ymateb y Panel/Panel's Response**

The Panel recognised that this project was still at a very early stage. The choice of site has now been confirmed and the client will proceed towards lodging a planning application within the next six months. We also acknowledged that the drawings as presented were diagrammatic and did not give sufficient information about the context of the site. In particular, the relationship with the police station to the north, and the houses across the street to the west, will be the subject of future design development.

The Panel accepted that the new access would be from the A469, but we thought that the access road should not then have to track across the site to get to the car park entrance. Delivery and service vehicles would presumably also have to use this route. The position of the main entrance may have to be reconsidered to ensure that it is fully legible and accessible to all those arriving on site. The site is well served by a bus route along Caerphilly Road and pedestrians approaching from the west should also be able to identify the main entrance without difficulty.

The Panel welcomed the underground parking solution, but recognised that as a consequence the wards would be at higher levels. The therapeutic courtyards should also be raised, to be at patient level and avoid shading.

The Panel look forward to receiving more information on ways in which a NEAT Excellent rating will be achieved. We would like to see a commitment to the AEDET assessment

process and the ASPECT toolkit, and DCFW would be willing to be involved in the AEDET evaluation process.

There has been a debate on the percentage of single bed rooms to be specified and a report on this is awaited. There will probably be a recommendation for 70-80% single bed rooms and the Trust recognises that it is important to get agreement on this issue at an early stage.

The Panel were told that half of the site of the old hospital across Caerphilly Road will be used for a new rugby field and changing/club facilities; the other half may be used for a new GP surgery. It is unlikely ever to be used for residential because of the flood classification.

The Panel questioned what benefits the curved form brought to the design of the building. We thought that the same effect and contextual response could be achieved with more rectilinear forms. The architect was not fully committed to the curve but emphasised that it was important for all departments to relate well to the main concourse. The Panel had further concerns about the plan depth and its implications for energy efficiency but the architect pointed out that the central atrium space will admit daylight. While recognising that these drawings were largely indicative, the Panel was anxious to avoid the possibility of the design concept as portrayed being allowed to continue without rigorous interrogation.

We thought there was the same danger of the indicative plan being allowed to predetermine environmental considerations. It was confirmed that the atrium and other appropriate areas will be passively ventilated. The Panel were pleased to note that combined heat and power [CHP] and building integrated photovoltaics [BIPV] were being evaluated. The ecology and biodiversity of the site will be assessed by an environmental impact assessment [EIA] and measures for protecting it will be identified. It is important to ensure that these considerations are supported by the brief and inform the design.

The space between the building and the river requires a good landscape strategy which will enable the building users to engage with the high quality natural environment. Some early ideas involving a footbridge and high level of patient access have had to be abandoned because of the flooding analysis. This strengthens the case for ensuring easy patient access to the enclosed courtyards. Another possibility would be to have protected external zones exclusively for patients and staff. The Panel thought that it would be possible to ensure a strong and interactive relationship with the landscape, even without direct access.

The procurement method will be a partnering agreement, as part of the all Wales procurement initiative. The shortlist will be limited to UK firms with offices in Wales. It is intended that the procurement be a collaborative process and that selection and appointment will be made primarily on design grounds. The Panel emphasised the importance of establishing and supporting local supply chains.

### **Crynodeb/Summary**

The Panel welcomes engagement with the project team at this early stage. We consider the proposals to be an acceptable response to the brief, with major revisions necessary, as a reflection of the present stage of development. In particular:

- Future design development should include the site context and particular relationships with adjacent buildings

- Access routes within the site should be reconsidered
- The site and building layout should ensure that the main entrance is fully legible and accessible to all visitors
- The curved form should either be reconsidered or fully justified, including the implications for future expansion or adaptation
- The plan depth should be revisited and again, either reduced or justified
- We look forward to seeing more detailed information on energy efficiency, maximising daylight levels and the potential use of renewable and low-carbon energy generation
- A landscape strategy for the whole site should be prepared, which enables a high level of interaction between the building and the green open areas to the south and east
- The enclosed courtyards should be raised to the level of the inpatient wards.
- The assessment methods of NEAT, AEDET and ASPECT should be used to evaluate the design solution
- We welcome the collaborative nature of the procurement process and the importance accorded to design
- We would encourage the Trust to continue this dialogue as more detailed proposals come forward, and to ensure that all design assumptions are fully interrogated and justified, and respond to the spirit of the brief.

**Diwedd/End**

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