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**From:** STYLES, Rachel (UNIVERSITY COLLEGE LONDON HOSPITALS NHS FOUNDATION TRUST) [REDACTED]  
**Sent:** 20 June 2022 14:31  
**To:** Planning Planning  
**Cc:** BEXSON, Robert (UNIVERSITY COLLEGE LONDON HOSPITALS NHS FOUNDATION TRUST); CHURCHWARD, Laura (UNIVERSITY COLLEGE LONDON HOSPITALS NHS FOUNDATION TRUST)  
**Subject:** Planning Application 2022/2255/P - Consultation Objection - FAO Patrick Marfleet  
**Attachments:** Consultation Response Planning Application 2022-2255-P.pdf

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Dear Sir

**Great Ormond Street Children's Hospital, Frontage Building Great Ormond Street London WC1N 3JH (application reference: 2022/2255/P)**

University College London Hospitals NHS Foundation Trust (UCLH) operate two hospitals immediately to the west of the site of the above proposals, separated only by the jointly owned Powis Place, a private roadway. The two UCLH hospitals are:

- National Hospital for Neurology and Neurosurgery. This is the UK's largest dedicated neurological and neurosurgical hospital; and
- Royal London Hospital for Integrated Medicine, which support those with chronic and complex medical conditions to live well and feel better.

UCLH **objects** to the planning application for the above property (application number 2022/2255/P) as it currently stands.

Our objections are centred around the use of and access to Powis Place as the main GOSH public entrance during the proposed three year demolition and construction period. We consider that the proposals for this will result in significant risk of harm to patients, particularly arrivals needing urgent and immediate treatment. There are also material concerns relating to the safety of ambulant GOSH and UCLH patients using Powis Place.

The Design and Access Statement (Section 6) states "During the deconstruction and construction period the main public entrance of GOSH will be relocated to a side access within Powis Place. These proposals will be subject to a separate application." The need for GOSH to alter the main public entrance is driven solely by the delivery of the scheme that is the subject of this planning application. As such, it is our view that it should form part of this application, given the impact on our adjacent hospitals and their patients. Without this the Demolition and Construction management plan and related application documents are incomplete and we cannot be sufficient assured as to the effect on our patients and smooth running of our hospital.

Our specific objections are as follows:

- A high volume ambulant patient entrance on Powis Place will conflict with the emergency, blue-light route for critically ill patients for both the National Hospital for Neurology and Neurosurgery (NHNN, operated by UCLH NHS Foundation Trust), and Great Ormond Street Hospital (GOSH)

- Given the frequency of access being required, and the fact that many times we do not receive sufficient notice to warn ambulant visitors on Powis Place of an impending ambulance entrance, it would not be safe for this entrance to be used for ambulant patients and their visitors or families
- Due to the clinical presentation of the patients in ambulances arriving at NHNN, critically ill patients have to be offloaded by ambulance teams and UCLH staff often have to provide urgent treatment outside of the hospital. Under the current proposal, this would be in full view of visitors and patients using GOSH's planned ambulant entrance. We do not believe that this is the best interests of either Trust's patients and has implications for the privacy and dignity of patients of both Trusts.
- A safe route for pedestrians should allow no interaction with vehicles, except in extreme circumstances. The current proposals do not provide safe passage for pedestrians due to conflict with emergency vehicle access.
- Installing a barrier at the entrance of Powis Place as a proposed solution to some of the above issues would create a number of challenges:
  - GOSH patients/families/visitors in cars will likely use this entrance as a drop-off which will cause congestion at the entrance of the road and jeopardise the ability for blue light ambulances to reach their destination creating unnecessary delays to patient treatment. This may lead to clinical harm to patients of the NHNN, or GOSH
  - It will need to be manned 24 hours a day, 7 days a week, in order to ensure the barrier can be removed on arrival of a time-critical patient arriving at the entrance. The entrance would not be able to be unmanned at any point
- The proposal to make Great Ormond Street a one-way street during the construction process is of great concern and will mean delays to treatment for critically ill patients. This is also likely to increase confusion and congestion on Great Ormond Street and the surrounding roads (including Queen Square) which will have other detrimental impacts on patient access to the NHNN and Royal London Hospital for Integrated Medicine.
- Construction traffic entering the site from the highway, and subsequently leaving the site and joining the one way system will create delays with vehicles travelling down Great Ormond Street, particularly of concern for the emergency ambulances attending NHNN. It will be impossible to keep clear access for blue-light route ambulances into Powis Place, even with traffic marshals, putting patients at risk. We are concerned as to how these challenges will be managed during temporary road closures to ensure continued access for NHNN.
- The construction phase is due to continue to 2026 and will create much noise, nuisance, vibration and dust (potentially containing aspergillus spores) impacting surrounding occupiers. We would like to know how this will be mitigated? What communications procedure will be in place to give adequate notice of noisy works to neighbours?

We have requested that GOSH reconsider the use of their hospital entrances on Guilford Street or Lamb's Conduit Street/Guilford Place as suitable alternative entrances for ambulant patients (thus preserving the separation of emergency and ambulatory flows for GOSH). GOSH have not yet provided a formal response to this request, but it should be noted that they are engaged with us to resolve the issues we outline here, although we are yet to find a clear resolution.

Our hope is that continuing constructive dialogue with GOSH will address our concerns and allow us to withdraw our objection. However as things stand we must object to the current application, given the impact on our patients.

**Rachel Styles**  
**Senior Property Services Manager – UCLH NHS Foundation Trust**



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