

Built Heritage, Townscape and Visual Addendum Report

Great Ormond Street Hospital
Children's Cancer Centre (GOSH)

October 2022

Turley

Contents

1.	Introduction and Purpose of the Report	1
2.	Further TVIA Commentary on LVMF Impacts	5
3.	Assessment of the Heritage Significance of St Paul's Cathedral	10
4.	Review of Conclusions of Impact Assessment of HTIVA Report	14
5.	Summary and Conclusions	15
Appendix 1: Hayes Davidson – Accurate Visualisations		18
Appendix 2: Trust Report on Functional Matters of Rooftop Elements		19
Appendix 3: Updated Accurate Visual Representations		20

1. Introduction and Purpose of the Report

- 1.1 This Addendum Report has been prepared on behalf of the Great Ormond Street Hospital for Children NHS Foundation Trust ('the Applicant') to accompany revised material submitted in support of the determination¹ to deliver a new Children's Cancer Centre (CCC) at Great Ormond Street Hospital.
- 1.2 The focus of this Addendum Report is to reflect on the matters identified in Historic England (HE) representations² dated 10th June 2022, including architectural design and the perceived impacts on London Views Management Framework ('LVMF') Views from Assessment Points 4A.1, 5A.2, and 6A.1.
- 1.3 This Addendum Report focusses on the LVMF and related built heritage considerations and is supported by a report from the Trust explaining the operational requirements for the proposed accommodation at roof level (**Appendix 2**). A response to architectural quality and contextual design forms part of the revised and supplementary application material.
- 1.4 The Applicant has carefully considered HE's representations and undertaken further detailed assessment work, informed by accurate visual representations and technical assessment prepared by Hayes Davidson. That further assessment work further considers the perceived impacts of the Proposed Development, as submitted. The Applicant has considered means by which any perceived impacts, particularly in LVMF View 4A.1

(where the Proposed Development is located within the foreground of the view and partly within the associated landmark view corridor) can be minimised while still ensuring the delivery of maximum public benefits, via the clinical brief.

- 1.5 The Proposed Development, as originally submitted, incorporates some architectural elements, which would extend above the threshold height of the Landmark Viewing Corridor from Assessment Point 4A.1 (**Figure 1.1**):
 - 1. Perforated screen concealing external plant.
 - 2. Externally mounted Air Source Heat Pumps.
 - 3. Acoustic wall separating plant from roof garden.
 - 4. Covered fire escape stair enclosure (Level 10-Level 9) – part of the 'Eastern Core' for the purposes of this report.
 - 5. Eastern lift core and lobby incorporating smoke clearance shaft and garden store.
 - 6. Perimeter edge railings (protection).
 - 7. Chimneys containing building services.

¹ Application ref.: 2022/2255/P

² Ref.: P01500553

8. Pergola structures.
 9. Planters / Tree planting (to note - the final height and detail of these elements to be confirmed).
- 1.6 As explained in **Appendix 2**, these elements are required to optimise delivery of the clinical brief and maximise the associated substantial public benefits of the Proposed Development.
 - 1.7 As confirmed in the Hayes Davidson technical analysis at **Appendix 1**, the eastern lift core and lobby, covered fire escape stair enclosure and acoustic wall are the most significant elements (in relative terms) in the LVMF views, albeit they are not readily legible in terms of the panorama view. They are, however, more apparent in the 600% zoomed in version of those visualisations. The eastern lift core and lobby and the covered fire escape stair enclosure elements have been the focus of revisions to the Proposed Development.
 - 1.8 All other roofscape features are slender and/or very minor elements in the roofscape context of the view, such that they would be barely discernible and would not impact on the appreciation of the landmark qualities of St Paul's Cathedral in these strategic views. They are located away from the dome.
 - 1.9 This Addendum Report provides a considered view of the impacts and implications for the following scenarios:
 - **Original Scheme:** The Proposed Development as submitted for the sake of completeness (**Figure 1.2**).

- **Revised Scheme:** the revised Proposed Development incorporating amendments to the proposed roofscape that reduces the perceived impacts on LVMF views, with a focus on View 4A.1, through a re-design of the eastern core whilst maintaining the optimum functionality of the roof garden (**Figure 1.2**).
- 1.10 Having carefully considered the pros and cons of the **Original Scheme** in the round, the Applicant believes that the **Revised Scheme**, makes the balance between optimising public benefits and delivering the clinical brief, while minimising and mitigating any perceived visual impacts on strategic views and the significance of heritage assets.
 - 1.11 The Applicant has engaged with officers at Historic England to discuss the revised scheme and have addressed their feedback in preparing this Addendum Report and the revised application submission.
 - 1.12 In addition, for the sake of completeness, the Applicant has prepared updated accurate visualisations for relevant viewpoint locations identified in the original HTVIA report to review the conclusions of the impact assessment in **Section 4**.
 - 1.13 The structure of this Addendum Report comprises:
 - **Section 2:** further TVIA commentary on LVMF impacts of the 2 options following additional modelling by Hayes Davidson.

- **Section 3:** a proportionate assessment of the significance of St Paul's Cathedral, including the contribution made by setting to significance, and the impact of the two options on that significance.
- **Section 4:** summary and conclusions.

1.14 This Addendum Report is supported by the following appendices:

- **Appendix 1:** Hayes Davidson modelling of Original Scheme and Revised Scheme.
- **Appendix 2:** Trust report on need and functional requirements of the rooftop elements.
- **Appendix 3:** Updated accurate visual representations to reflect the changes of the revised scheme.

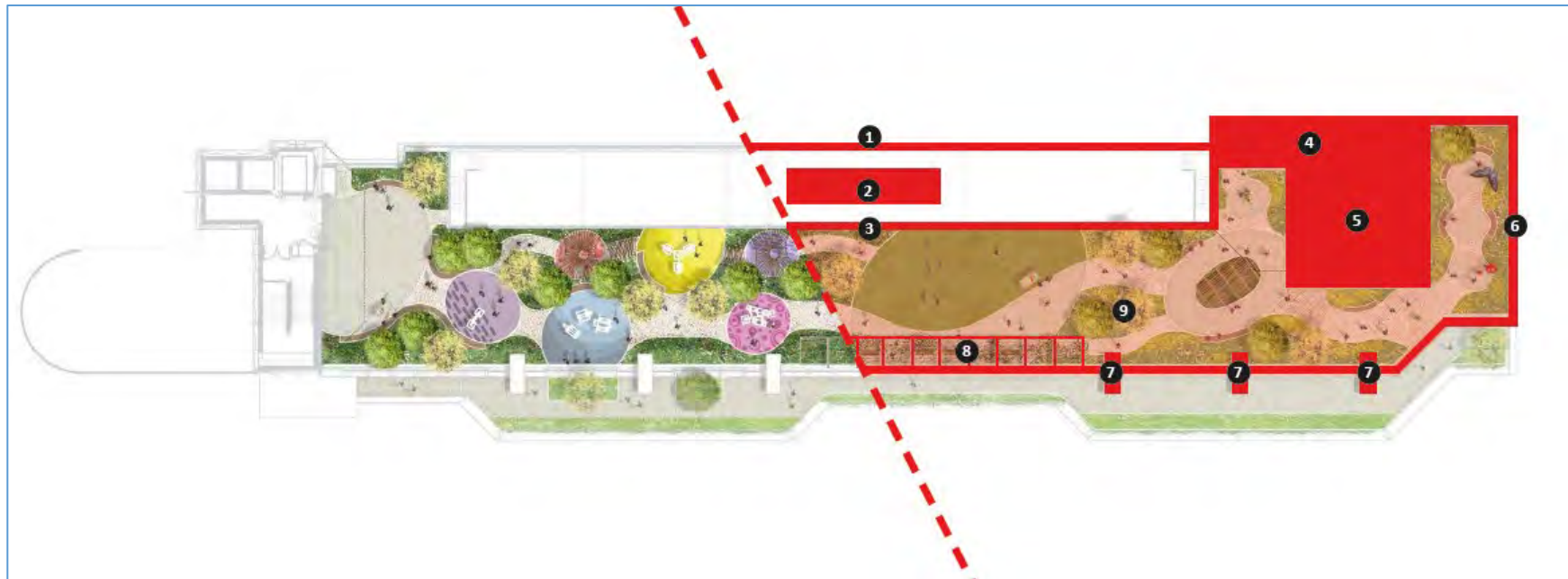


Figure 1.1: Illustrative diagram showing estimated extent of roofscape elements extending above Landmark Viewing Corridor from Assessment Point 4A.1

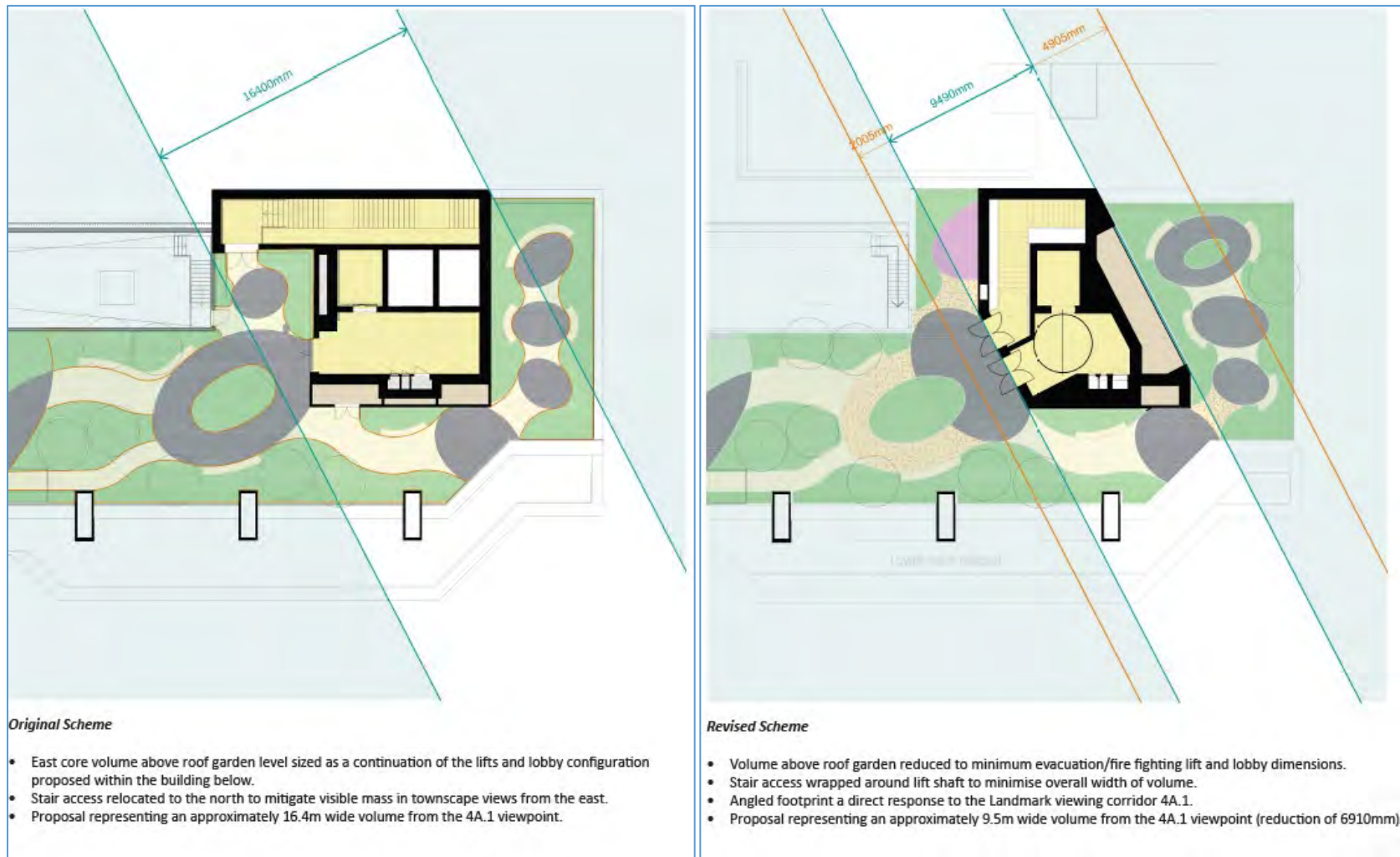


Figure 1.2: Original Scheme (Left) and Revised Scheme (Right)

2. Further TVIA Commentary on LVMF Impacts

- 2.1 Three LVMF views have the potential to be affected by the Proposed Development. The views, and the Site's location within these views is as follows:

Within the Background Wider Setting Consultation Area ('BWSCA'):

- LVMF 5 London Panorama: Greenwich Park.
- LVMF 6 London Panorama: Blackheath Point.

Within the Middleground Landmark Viewing Corridor and Wider Setting Consultation Area:

- LVMF 4 London Panorama: Primrose Hill.

- 2.2 The commentary below first provides an overview of the Visual Management Guidance for the specific view, which sets out the general principles of managing development within the foreground, middle ground and background.

Viewing Distance and Image Enlargement

- 2.3 Hayes Davidson have produced high resolution accurate visualisations of the Proposed Development, based on the guidance set out within the Landscape Institute Technical Guidance note TGN 06/19 and within Appendix C of the London Views Management Framework (2012), with the document for On-Site Views Assessment showing the proposed and LVMF corridor images. These are 100% reference images, which when printed and viewed at A3 provide the closest representation of how the view would appear when seen on site with the naked eye.

- 2.4 As described within the TGN 06/19:

'Whilst mathematical viewing distances have historically been quoted alongside visualisations, it is generally regarded that viewing distances of between 500mm – 550mm (approximately arm's length) are the most practical and widely used.'

- 2.5 The features shown in the Accurate Visual Representations (AVRs) in the On-Site Views Assessment document, (when held at a viewing distance of 50cm and when viewed on an A3 page), would have the same apparent scale on the paper as they would in the real scene.

- 2.6 Due to the scale of the Proposed Development and long distance from each of the LVMF viewpoints, it is difficult to discern it in the images produced at 100% reference scale. Further images were, therefore, produced by Hayes Davidson, which provide a magnified version of the views with a 600% zoom. These are included in **Appendix 1** and enable the reader to interrogate the images in greater detail. Informed by Landscape Institute

guidance³, the assessment of impacts is based on the true representation (100% reference scale) of what would be seen by the naked eye (i.e. neither magnified (zoomed) nor reduced). These images are contained within the On-Site Views Assessment document and included in **Appendix 1**.

LVMF View 5: London Panorama (Greenwich Park)

- 2.7 The Visual Management Guidance for Viewing Location 5A as set out within LVMF SPG states that:

“Background

The dome (above the peristyle) and the upper parts of the western towers of St Paul’s Cathedral are well defined against their background in this view. Development that exceeds the Wider Setting Consultation Area in the background of this view should preserve or enhance this level of definition.”

- 2.8 For the purposes of this assessment, the Site is located within the BWSCA for Assessment Point 5A.2. The orientation of Assessment Point 5A.1 is in a northerly direction and would, therefore, be unaffected by the Proposed Development.

Visual Impact of Original Scheme

- 2.9 The Site is located approximately 9km from Assessment Point 5A.2 and 1.7km beyond the Strategically Important Landmark of St Paul’s Cathedral. Most of the proposed building, including all the

lower parts would be screened by built form within the foreground including St Paul’s Cathedral and part of Tower Bridge.

- 2.10 The threshold for the BWSCA is set between 52.5m and 53m AOD at the point where the Site is located within the viewing corridor. A few elements of the Proposed Development (taken as the FFL of the Roof Garden at +57.620) would extend above this level by 4.62m, with smaller elements, including slender features, such as the east and west cores, acoustic walls and tops of chimneys, also extending above this plane. As illustrated within the proposed view (**Appendix 1**), at a distance of approximately 9km from the viewpoint, the Original Scheme, would not be discernible and the resultant effect on the view would be negligible.
- 2.11 The form and silhouette of St Paul’s Cathedral, as the Strategically Important Landmark from this assessment point would be maintained, and the Proposed Development would not change the appearance or appreciation of it in the view. In this context, the key attribute of the view from this assessment point, identified by the LVMF, and as relevant to the Proposed Development and in relation to St Paul’s Cathedral – i.e., the fact that the dome (above the peristyle) and the upper parts of the western towers are well defined against their background – would not be adversely affected by the Original Scheme.

³ ‘Guidelines for Landscape and Visual Impact Assessment’ third edition, 2013, (Landscape Institute and IEMA) and ‘Visual Representation of Development Proposals’ TGN06/19 (Landscape Institute)

Visual Impact of the Revised Scheme

- 2.12 Due to the reduced scale of various roof elements of the Revised Scheme would further reduce the extent of the Proposed Development, which is visible above the plane of the Background Wider Setting Consultation Area.

LVMF View 6: London Panorama (Blackheath Point)

- 2.13 The Visual Management Guidance for LVMF Viewing Location 6A as set out within LVMF SPG states that:

“Background

Development in the Wider Setting Consultation Area should preserve or enhance the viewer’s ability to recognise and appreciate St Paul’s Cathedral and its western towers. It should generally not be taller than the base of the peristyle of the Cathedral although the effect of colour, scale, reflectivity and distance from the landmark of new development should be understood and tested.”

Visual Impact of Original Scheme

- 2.14 The Site is located approximately 9km from Assessment Point 6A.1 and 1.7km beyond the Strategically Important Landmark of St Paul’s Cathedral within the BWSCA of the view. Most of the Proposed Development, including all the lower parts of the building would be screened by interposing built form within the foreground, which comprises the urban townscape context to the south east of St Paul’s Cathedral.

- 2.15 The threshold for the BWSCA is set between 53m and 54.2m at the point where the Site is located within the viewing corridor. The main structure of the building (taken as the FFL of the Roof Garden at +57.620) would extend above this level by 3.42m, with elements such as pop-up, slender features, such as the east and west cores, acoustic walls and tops of chimneys also extending above the plane. As seen within the proposed view (**Appendix 1**), at a distance of approximately 9km from the viewpoint, the Original Scheme, would not be discernible and the resultant effect on the view would be negligible.

- 2.16 The form and silhouette of St Paul’s Cathedral, as the Strategically Important Landmark in the view from this assessment point would be maintained, and the Original Scheme, would not change the appearance or appreciation of it in the view. In this context, the key attribute of the view, identified by the LVMF, and as relevant to the Proposed Development and in relation to St Paul’s Cathedral – i.e., the fact that the dome (above the peristyle) and the upper parts of the western towers are well defined against their background – would not be adversely affected.

Visual Impact of Revised Scheme

- 2.17 Due to the reduced scale of the Revised Scheme would further reduce the extent of the Proposed Development visible above the plane of the BWSCA.

LVMF View 4: London Panorama (Primrose Hill)

- 2.18 The Visual Management Guidance for LVMF Viewing Location 4A as set out within LVMF SPG states that:

“Foreground and Middle Ground

It is an important characteristic of the view that the viewer’s ability to recognise and appreciate the peristyle, drum, dome and western towers of St Paul’s Cathedral in the panorama is preserved or enhanced. Development between the Assessment Point and St Paul’s Cathedral is subject to a Protected Vista.”

Visual Impact of the Original Scheme

- 2.19 The Site is located approximately 1.6km in front of the St Paul’s Cathedral, 3.4km from Viewing Location 4A.1 The majority of the Original Scheme, including all lower parts of the building would be screened by built form within the foreground of the view, which makes up the interposing urban townscape context between the viewing place and Site.
- 2.20 The threshold for the Landmark Viewing Corridor is set between 56m and 58m as it passes the Site. The main structure of the building (taken as the FFL of the Roof Garden at +57.620) has been designed so it would not exceed this threshold. As identified in **Section 1**, there are some minor elements of the proposed roofscape of the Original Scheme that would exceed this threshold, including the eastern core, which would extend approximately 3.6m above the threshold, plus smaller features including acoustic walls and tops of chimneys.
- 2.21 When viewed with a magnification of 600% it is possible to see more clearly these elements, which exceed the threshold plane. Some of these would extend above the Protected Silhouette of the Landmark Viewing Corridor, with the eastern core and acoustic wall creating the greatest change. These elements would

obscure a small part of the silhouette of St Paul’s Cathedral in this view, infilling part of the gap between the drum that supports the main dome and north western tower and obscuring a small part of the peristyle of the drum. These features are identified as an ‘important characteristic’ of the Foreground and Middle Ground of the LVMF View 4A as set out within the Visual Management Guidance for this view.

- 2.22 While these changes are visible on a magnified image of 600% they would be barely discernible when viewed in situ with the naked eye (at 100%). As demonstrated in **Appendix 1** the Original Scheme, would introduce a minor element into the view, which would not be readily perceptible to the naked eye. Moreover, the Original Scheme, would be seen within the layered townscape, which makes up the urban area to the foreground of St Paul’s Cathedral, and would form a further layered piece of this townscape. The colouring of the proposed building is muted and would blend with the surrounding built form so that, at a distance of 3.4km away, it would be very difficult to distinguish it from other buildings in the foreground of the view.
- 2.23 Notwithstanding, the Original Scheme has some conflict with London Plan policies HC3 and HC4 where there are rooftop elements extending above the threshold plane in the strategic view from Assessment Point 4A.1 and having a material impact on some elements of the view towards the Strategically Important Landmark when seen in the context of a highly magnified image. Accordingly, the Applicant has identified means by which those impacts could be significantly reduced through the Revised Scheme to ensure that there is no material conflict with the

aspirations of London Plan policy i.e. to maintain the legibility of the composition of St Paul's Cathedral as the Strategically Important Landmark in the view.

Visual Impact of Revised Scheme

- 2.24 The Revised Scheme includes a much reduced eastern core, which pulls this element away from the peristyle of St Paul's Cathedral in the view from Primrose Hill, with the geometry aligned with the viewing corridor. In the magnified image at 600 % zoom (**Appendix 1**), the Revised Scheme would reveal a greater proportion of the silhouette of the western towers of St Paul's Cathedral. The acoustic wall would still extend above the threshold, marginally, but would not result in a perceptible impact on the silhouette of St Paul's Cathedral (Strategically Important Landmark).
- 2.25 The magnified image at 600% zoom confirms that the Revised Scheme would maintain a gap between the drum and north western tower by moving the massing away from the front of the peristyle of the drum in the view, thereby maintaining the legibility of the peristyle and drum as separate elements within the overall composition.
- 2.26 Aligned with the function of the proposed building, consistent with the continuing legacy and function of Great Ormond Street Hospital as a place of medical excellence in the treatment of children, it will be a new special building in the townscape context that comprises the middle ground of this view, particularly when experienced in the 600% zoom image. In those terms, the Revised Scheme has the potential to add a positive new element in the overall composition of the view.

- 2.27 In overall terms, the visual impact of the Revised Scheme on the appreciation of the composition of St Paul's Cathedral would be materially reduced when compared to the Original Scheme. The Revised Scheme would, therefore, better align with the purpose of London Plan Policies HC3 and HC4 i.e. to maintain the composition of the view and the legibility of the Strategically Important Landmark within this view. To note, these changes are only appreciable in the highly magnified (600% zoom) version of the proposed view, as they are too minor to see at 100% (with the naked eye).
- 2.28 The form and silhouette of St Paul's as seen in this view would be maintained, and the proposed development would not compete with the landmark building or affect its appearance or appreciation. The changes arising from the proposed development in this view would be **Very Low to Negligible Magnitude of Neutral Effect**.

3. Assessment of the Heritage Significance of St Paul's Cathedral

- 3.1 The significance of St Paul's Cathedral is well documented and extensively researched. This assessment of significance is proportionate to the significance of the listed building and the nature of the impacts of the Proposed Development on that significance in accordance with NPPF policy⁴ and best practice guidance/advice⁵.

Historic Interest

- 3.2 St Paul's Cathedral is a Grade I listed building⁶ and of exceptional heritage significance. It is an emblem of London and is located on a site that has been used for Christian worship for over 1400 years and, today, is one of the primary places of Christian worship in the UK. It has historic interest as the first post-Reformation cathedral, as well as the only cathedral built in the classical style in Britain and completed under the guidance of a single architect during his lifetime. It is a seminal building in the history of English architecture and the fine arts, playing a key role in the establishment of a strong classical building tradition. As the *St Paul's Cathedral – Conservation Plan* (March 2003), produced by M. Stancliffe and K. Judge states:

'It employed the grammatical rules of details of the newly understood classical architecture with such an assurance and

unsurpassed mastery as to provide an impetus to general adoption of classical forms in England'.

- 3.3 St Paul's Cathedral is also the final resting place for many significant figures in the history of the UK, including Lord Nelson and the Duke of Wellington and this association is embodied within the building's physical fabric. The contents, collections and archives of the cathedral provide a tangible means to trace the history of use and evolving purpose of the building and are of substantial artistic and cultural merit.
- 3.4 In addition, the existing building stands on the site of considerable archaeological potential, extending from the Roman period to the present day, with potentially the most significant remains being those of Old St Paul's Cathedral.

Architectural Interest

- 3.5 St Paul's is the masterpiece of one of England's most admired architects, Sir Christopher Wren. It displays virtuoso architecture and exhibits many ingenious construction techniques and solutions. For example, the brick cone that supports the outer dome and the great chain construction of the peristyle entablature. The fabric contains some of the best craftsmanship

⁴ Paragraph 194

⁵ Historic England Advice Note 12: Statements of Heritage Significance: Analysing Significance in Heritage Assets (2019)

⁶ <https://historicengland.org.uk/listing/the-list/list-entry/1079157>

of the late 17th and early 18th century and this strong tradition of craftsmanship and care has continued throughout its life. Today it remains an extraordinarily fine, well-constructed and well-maintained building.

- 3.6 The building's architectural interest is not just invested in the main cathedral space but in the other, ancillary spaces of the upper levels. The library is a critically important space in the history and reputation of St Paul's as a centre of Christian thinking and liturgy and was intentionally elegant in design. Other spaces are a by-product of Wren's original and bold architectural engineering and provide well thought out and essential maintenance areas.

Contribution of Setting to Overall Heritage Significance

- 3.7 The overall heritage significance of St Paul's Cathedral is enhanced and has group value with its surrounding precinct, which, today, is formed of parts of various dates, construction types, architectural styles and functions. Together the precinct makes an important contribution in helping to inform the overall understanding of the history and development of St Paul's and this has been recognised formally through the designation of the St Paul's Conservation Area.
- 3.8 Within the surrounding area there was historically a precedent of buildings creating an enclosure to the cathedral. This continues today and, although the surrounding modern development (i.e., Paternoster Square) helps control noise levels from the surroundings streets, these building do dominate the cathedral's local setting and medium-range views.

- 3.9 Historically, as demonstrated by sources such as Claes Jansz Visscher's 1616 Panorama of London, St Paul's would have dominated the London skyline. This reflected its prestige as the main, ancient place of Christian worship for the historic City of London and, as the tallest building, it would have been used as a navigational landmark in everyday life. Today, this primacy has been undermined by recent tall development, particularly within the City itself. Notwithstanding, the cathedral's historic and cultural landmark status, and important views of it from key points, has been recognised and formally protected through a series of key views identified in the LVMF, in which the cathedral is identified as a Strategically Important Landmark.

- 3.10 The views identified in the LVMF document that relate to St Paul's Cathedral contribute to its overall heritage significance, as they aim to maintain the legibility of its silhouette against open sky in specific views (generally from elevated assessment points), illustrating the historic and architectural primacy of St Paul's within the City of London, which can still be somewhat appreciated, albeit in a taller and modern townscape context.

Assessment of Impacts of the Proposed Development on Heritage Significance

Original Scheme

- 3.11 The Proposed Development, as originally submitted, has the potential to impact marginally on St Paul's Cathedral's overall heritage significance through a change in a part of its setting, but it would not affect the main elements of its special historic and architectural interest as identified above.

- 3.12 As confirmed earlier in this report, the Original Scheme would have a negligible impact on the ability to appreciate the silhouette and composition of St Paul's Cathedral in views from Assessment Points 5A.1 and 6A.1 (and related Assessment Points from the same Viewing Place). The Original Scheme, would, in overall terms, have no impact on an appreciation of the significance of the listed building in these strategic views.
- 3.13 From Assessment Point 4A.1, the Original Scheme, would, be seen within the layered townscape of the urban area to the foreground of St Paul's Cathedral. In highly magnified views, the Original Scheme, will infill some of the perceived gap between the drum that supports the main dome and the north western tower and would obscure a small part of the peristyle of the drum. These features are identified as an '*important characteristic*' of the Foreground and Middle Ground of the view, as set out within the Visual Management Guidance.
- 3.14 These are architectural elements that contribute to St Paul's Cathedral's overall heritage significance. Whilst such a visual impact would be very minor and experienced only in very magnified views (such as when using telephoto lens), it would reduce the overall legibility of the listed building's landmark qualities in the protected vista.

Revised Scheme

- 3.15 The Revised Scheme includes a narrower eastern core, which pulls the Proposed Development away from the peristyle of St Paul's Cathedral and reveals a greater proportion of the silhouette of the western towers when viewed at 600% zoom. The gap between the

drum and north western tower would be maintained, as would the appearance of the peristyle and drum. The proposed acoustic wall would extend above the identified threshold plane but would be barely discernible at the 100% reference scale.

- 3.16 In this context, the proposed amendments to the eastern core mean that the visual impact of the Revised Scheme on the appreciation of the composition of the cathedral, and the related architectural and historic values as part of its heritage significance as experienced in this strategic view, would be much reduced when compared to the Original Scheme.

Conclusion

- 3.17 This assessment confirms that the Original Scheme will cause a minor level of less than substantial harm to the heritage significance of St Paul's Cathedral, through a change in part of its setting. Notwithstanding, as a Grade I listed building of exceptional heritage significance, such harm must be given great weight and importance in considering the overall planning balance and requires clear and convincing justification.
- 3.18 In that context, the Applicant has explored further ways, which those elements of the roofscape that have the greatest relative impact on the significance of St Paul's Cathedral could be avoided or minimised while still optimising the delivery of public benefits.
- 3.19 Any perceived adverse impacts would be materially reduced in the Revised Scheme (**Option 2**) to a very minor level.

3.20 The Applicant has provided further application information to demonstrate the clear and convincing justification required, should any perceived slight harm be identified by the revised scheme, including:

- Detailed design analysis to demonstrate measures taken to avoid, minimise and mitigate harm.
- A report explaining the functional and operational requirements informing the need and design of the

proposed roofscape to ensure the delivery of the maximum level of public benefit (**Appendix 2**).

3.21 In accordance with the relevant planning policy, legislation and guidance, including The Planning (Listed Buildings and Conservation Areas) Act 1990 and the National Planning Policy Framework (NPPF, 2021), any perceived harm must be accorded considerable weight and importance and must be weighed in the planning balance against the compelling and powerful public benefits of the Proposed Development.

4. Review of Conclusions of Impact Assessment of HTIVA Report

- 4.1 For the sake of completeness the Applicant has prepared updated accurate visualisations from the relevant agreed viewpoint locations i.e. where the proposed amendments at roof level will be visible to illustrate the proposed amendments in the Revised Scheme.
- 4.2 These updated accurate visualisations are provided at **Appendix 3**.
- 4.3 The updated accurate visual representations confirm that except for the perceived impacts on LVMF View 4A.1 (**Section 2**) the Revised Scheme will not materially change the conclusions of the impact assessment in the original HTVIA, being amendments focussed at roof level.

5. Summary and Conclusions

- 5.1 This Addendum Report has been prepared on behalf of the Applicant to accompany revised material submitted in support of the determination⁷ to deliver a new Children's Cancer Centre at Great Ormond Street Hospital.
- 5.2 The focus of this Addendum Report is to reflect on the matters identified in Historic England (HE) representations⁸ dated 10th June 2022, including architectural design and the perceived impacts on London Views Management Framework ('LVMF') Views from Assessment Points 4A.1, 5A.2, and 6A.1.
- 5.3 This Addendum Report focusses on the LVMF and related built heritage considerations and is supported by a report from the Trust explaining the operational requirements for the proposed accommodation at roof level (**Appendix 2**). A response to architectural quality and contextual design forms part of the revised and supplementary application material.
- 5.4 The Applicant has carefully considered HE's representations and undertaken further detailed assessment work, informed by accurate visual representations and technical assessment prepared by Hayes Davidson. That further assessment work further considers the perceived impacts of the Original Scheme. The Applicant has considered means by which any perceived impacts, particularly in LVMF View 4A.1 (where the Proposed Development is located within the foreground of the view and

partly within the associated landmark view corridor) can be minimised while still ensuring the maximum delivery of public benefits, via the clinical brief.

- 5.5 This Addendum Report provides a considered view of the impacts and implications for the following scenarios:
- **Original Scheme:** The Proposed Development as submitted for the sake of completeness.
 - **Revised Scheme:** the revised Proposed Development incorporating amendments to the proposed roofscape that reduces the perceived impacts on LVMF views, with a focus on View 4A.1, through a re-design of the eastern core whilst maintaining the optimum functionality of the roof garden.
- 5.6 The Original Scheme incorporates some architectural elements, which would marginally extend above the threshold height of the Landmark Viewing Corridor from Assessment Point 4A.1 and, to a lesser degree, the Background BWSCA of LVMF views from Assessment Points 5A.2 and 6A.1:
- Perforated screen concealing external plant.
 - Externally mounted Air Source Heat Pumps.

⁷ Application ref.: 2022/2255/P

⁸ Ref.: P01500553

- Acoustic wall separating plant from roof garden.
- Eastern lift core and lobby incorporating smoke clearance shaft and garden store, including the covered fire escape stair enclosure (Level 10-Level 9).
- Perimeter edge railings (protection) (imperceptible).
- Chimneys containing building services.
- Pergola structures.
- Planters / tree planting (to note - the final height and detail of these elements to be confirmed).

5.7 As explained in **Appendix 2**, these elements are required to optimise delivery of the clinical brief and maximise the associated substantial public benefits of the Proposed Development.

5.8 The Applicant has given great weight to Historic England's representations and careful consideration of the matters raised, including the related matters of perceived impacts on strategic views and the legibility of St Paul's Cathedral in those views, and its heritage significance as a listed building. In advance of formally submitting the revised application material, the Applicant has engaged with officers at Historic England to discuss the revised scheme and have addressed their feedback in preparing this Addendum Report and the revised application submission.

5.9 The further assessment work, including updated and higher resolution accurate visualisations prepared by Hayes Davidson,

confirms that the Original Scheme has no legible impact on the composition of strategic views from Assessment Points 5A.1 and 6A.1, or the legibility of St Paul's Cathedral as a Strategically Important Landmark in those views. Accordingly, there would be no impact on the significance of St Paul's Cathedral as a grade I listed building in those strategic views as a positively contributing element of setting.

5.10 Informed by the further detailed assessment, the Revised Scheme will further reduce the perceived very minor impacts of the Original Scheme on the composition of the strategic view from Assessment Point 4A.1, including the minor impact on the heritage significance of St Paul's Cathedral as a Grade I listed building, particularly as expressed in highly magnified versions of the relevant verified views.

5.11 In overall terms, the assessment contained in this Addendum Report confirms that the Revised Scheme would have a very minor effect on the quality and composition of the strategic view from Assessment Point 4A.1, to the extent that the Proposed Development would not be readily perceptible in the view, except in highly magnified images. The Revised Scheme would also maintain the overall legibility of the silhouette and composition of St Paul's Cathedral in this view, as the focus of the strategic view and allowing for an appreciation of its architectural and historic values as elements of its exceptional heritage significance. Accordingly, any perceived adverse impacts on this strategic view and heritage significance of St Paul's Cathedral, albeit already minor, are materially reduced by the Revised Scheme.

- 5.12 Aligned with the function of the proposed building, consistent with the continuing legacy and function of Great Ormond Street Hospital as a place of medical excellence in the treatment of children, it will be a new special building in the townscape context that comprises the middle ground of this view, particularly when experienced in the 600% zoom image. In those terms, the Proposed Development has the potential to add a positive new element in the overall composition of the view.
- 5.13 In terms of LVMF policy and guidance, while there would still be elements of the Proposed Development that exceed the threshold plane in the view from Assessment Point 4A.1 in the Revised Scheme, these would be very minor elements in the overall composition and would maintain the overall legibility of the Strategically Important Landmark. In those terms, Revised Scheme would, therefore, better align with the purpose of London Plan Policies HC3 and HC4.
- 5.14 If a level of less than substantial harm to the significance of St Paul's Cathedral is identified, it would be to a very minor degree, and the Applicant has provided further information to demonstrate the clear and convincing justification required, including:

- Detailed design changes to demonstrate measures taken to avoid, minimise and mitigate harm.
- A report explaining the functional and operational requirements informing the need and design of the proposed roofscape to ensure the delivery of the maximum level of public benefit.

- 5.15 In accordance with the relevant planning policy, legislation and guidance, including The Planning (Listed Buildings and Conservation Areas) Act 1990 and the National Planning Policy Framework (NPPF, 2021), any perceived harm, however minor, must be accorded considerable weight and importance and must be weighed in the planning balance against the compelling and powerful public benefits of the Proposed Development.
- 5.16 In addition, the Applicant has prepared updated accurate visual representations for the relevant viewpoint locations that confirm that except for the perceived impacts on LVMF View 4A.1 the Revised Scheme will not materially change the conclusions of the impact assessment in the original HTVIA, being amendments focussed at roof level.

Appendix 1: Hayes Davidson – Accurate Visualisations

BD190_Great Ormond Street Hospital

Roof Updates

October 2022



Baseline Photography (Crop)





Original Scheme (Crop)





Revised Scheme (Crop)





Original Scheme with Cumulatives (Crop)



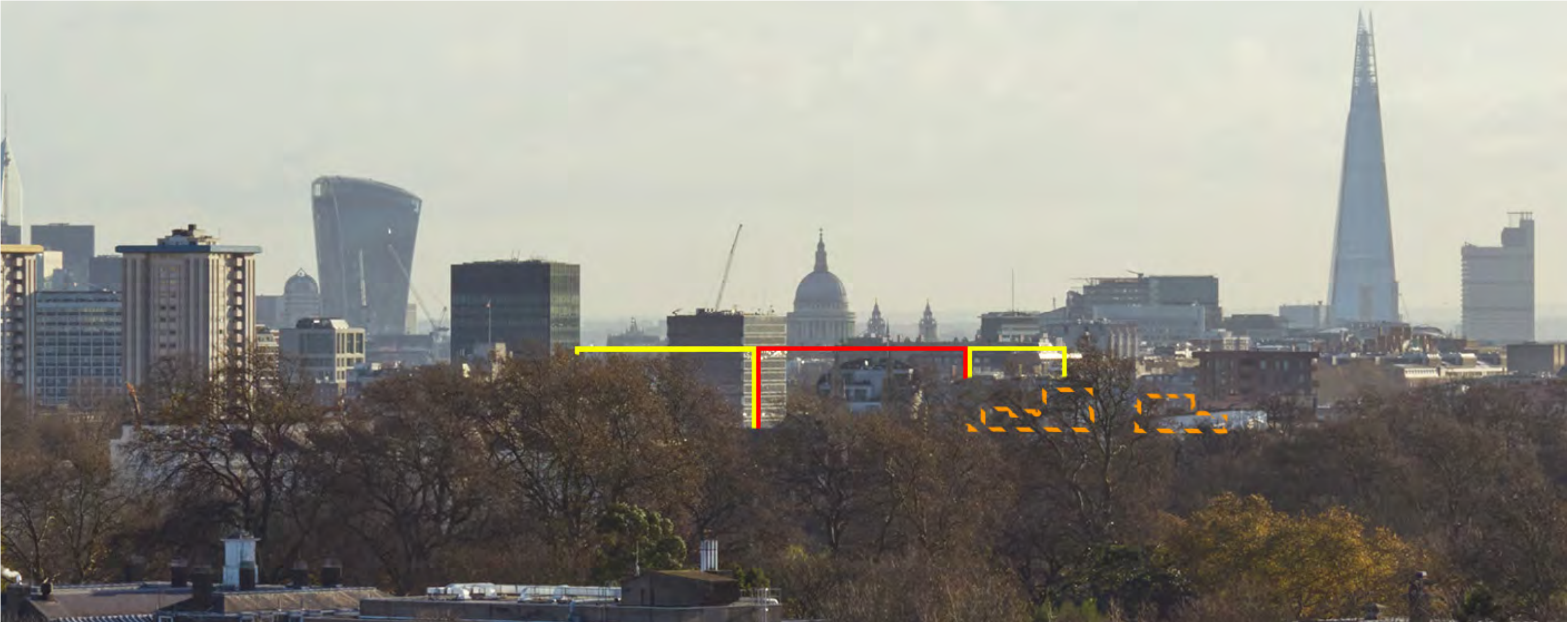


Revised Scheme with Cumulatives (Crop)



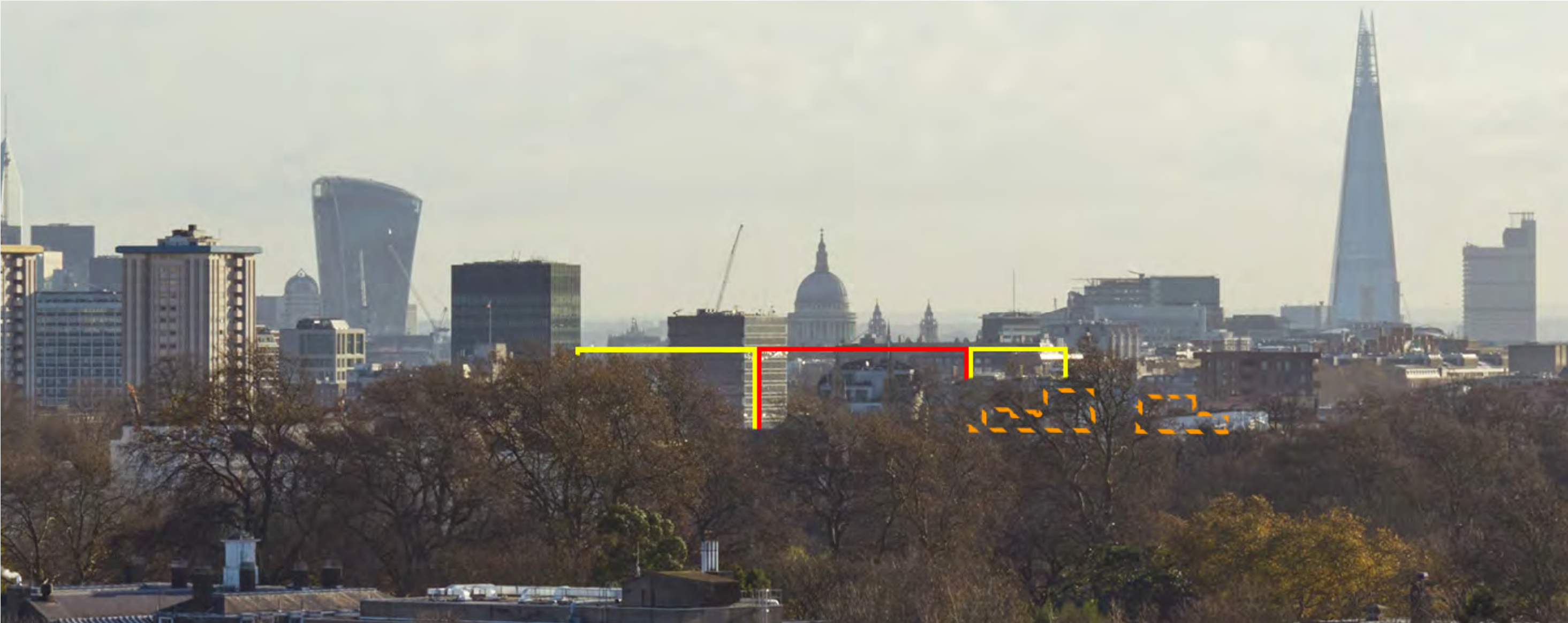


Original Scheme LVMF Threshold (Crop)





Revised Scheme LVMF Threshold (Crop)



HayesDavidson

Appendix 2: Trust Report on Functional Matters of Rooftop Elements

The Children's Cancer Centre: Responding to the Clinical Design Brief

Background

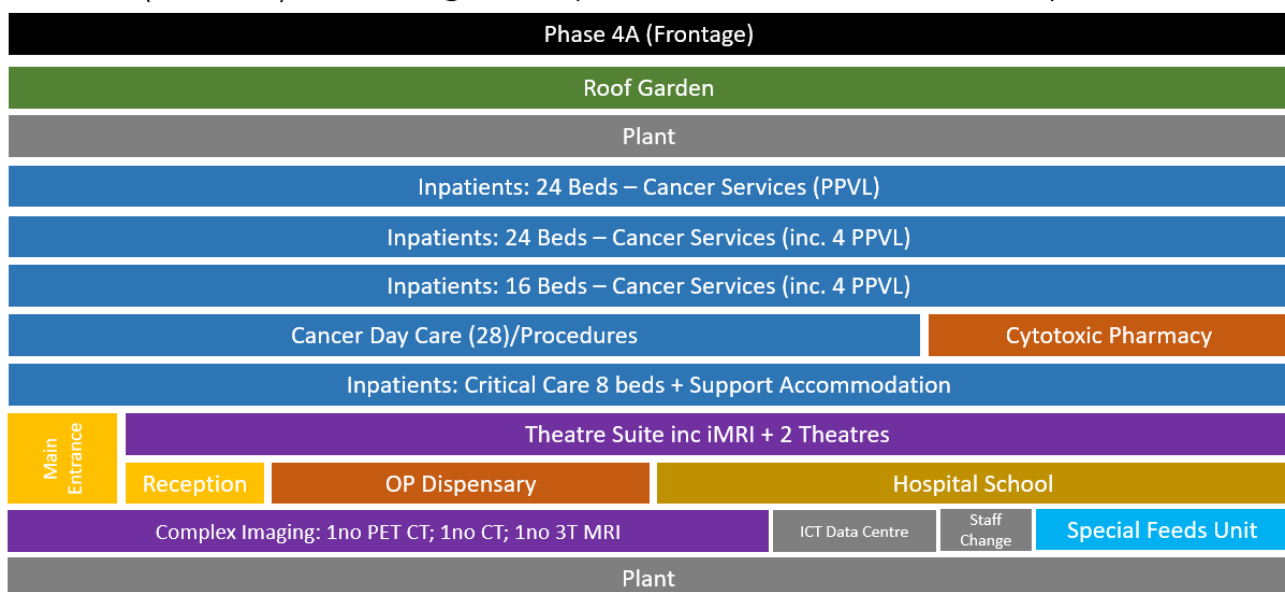
GOSH's Masterplan 2015 describes the optimal sequence of projects on the hospital site, to maximise clinical capacity and to configure and collocate departments for maximum efficiency. Whilst the masterplan doesn't describe each construction phase in detail, it does indicate the potential scale of each building that should be possible, given any known constraints to development. A summary of the Masterplan is set out at the end of this section as Appendix 1.

Phase 4A of Masterplan 2015 is intended to provide all the clinical facilities required for GOSH's Children's Cancer Centre (CCC). The ambition is to provide the best possible environment and standard of care for children with cancer, particularly those cancers that are rare and difficult to treat. In addition, the Phase 4A building will accommodate other departments that support the whole hospital. These departments, which include the hospital school, theatres and imaging will deliver significant improvements in the standard and efficiency of care. The relocation of services into the CCC also facilitates future developments to the GOSH estate.

The CCC Clinical Design Brief

In common with any significant capital investment in a healthcare estate, GOSH provided a clinical design brief to the CCC design team to advise on the functional content required in the building. This functional content is presented in the stacking diagram below:

CCC (Phase 4): RIBA Stage 3 Proposed Functional Content – April 2022



In addition to this high-level presentation of the clinical requirements, detailed schedules of accommodation and a narrative brief are provided within the clinical design brief. These requirements are informed by a number of factors including:

- Demand and capacity modelling that projects future demand for GOSH's clinical services into the medium and long-term;
- Emerging treatments and new therapies that will change the way in which the care of children with cancer is managed;
- GOSH's aspiration to continue to be one of the leading UK children's hospitals, providing an outstanding patient/family experience and improving staff wellbeing.

All of these factors result in an overarching schedule of accommodation that generates a projected total size of the building in square metres. Departmental areas are then combined with other factors to allow for various needs including:

- Facilities management hubs on each floor to facilitate storage and distribution of clinical supplies and management of waste streams;
- Vertical service risers and ICT secondary equipment rooms;
- Internal walls, circulation and communication space.

When all of these factors are taken into account, the total size of building required to accommodate the proposed clinical facilities and functional content has a gross internal area (GIA) of 16,300m².

New healthcare facilities are necessarily larger than those that they replace. Space standards over the years increase the area that needs to be allocated to clinical functions and a number of factors combine to result in an increased total space requirement:

- More and larger engineering plant and critical infrastructure to service and maintain the building, that was not required 40 or 50 years ago;
- Compliance with NHS space standards requiring provision of more space for clinical functions such as bedrooms, sanitary facilities, social spaces and staff support areas;
- Larger medical equipment such as MRI and CT scanners that are larger than the technology previously available.

Outside Space at GOSH

Access to gardens and outside space is proven to benefit children's health. Although GOSH is in a central London location, we benefit from public green space close to the hospital. The garden in Queen Square is particularly popular with staff in the summer months and Coram's Fields, just a short walk away is a great place for our children, young people and their parents to spend time. However, some of our young patients are unable to leave the hospital site to visit these gardens due to their condition or the bulky medical equipment that they depend upon. We therefore need gardens and outside spaces, for play, therapies and respite activities, that are fully accessible and available to as many children as possible, including those who would not be able to leave the hospital to visit green space.

In recent years, GOSH has endeavoured to include gardens in projects wherever possible. Most recently it was possible to create a small garden as part of our project to redevelop the former Italian Hospital in Queen Square as the GOSH Sight and Sound Centre. The garden (right) is fully accessible and provides a valuable outside waiting area for outpatients and their families that are attending appointments in the building.





There is also a roof garden on the Octav Botnar Wing (left), opened in 2005. However, this is primarily a staff facility and access for children in beds and large wheelchairs is not straightforward. The garden was designed as a place of retreat for staff and is a memorial garden for the two GOSH members of staff that were killed in the terrorist bombs in London in July 2005.

GOSH's Masterplan 2015 included an aspiration that all future phases of redevelopment on the hospital island site would include a fully accessible garden on the roof,

which would be available to all and provided for the benefit of patients, families and staff.

The CCC Roof Garden

From the earliest stages of developing the concept for Phase 4 (the Children's Cancer Centre (CCC)), this aspiration was reflected in the Trust brief. Furthermore, the roof garden on the CCC will be a facility and a destination location for the whole hospital, not just the CCC. It is critical that children and families from across the hospital are able to use and enjoy the garden, which will be GOSH's biggest outside space. GOSH's brief for the CCC roof garden is reproduced and attached as Appendix 2

The brief details explicitly that the design should make it possible for children in beds to be brought to the garden, stating:

"GOSH wants all of our staff, patients and families to be able to benefit from this garden so the design must deliver open space that is fully accessible and inclusive... To ensure that the roof garden is fully accessible to all GOSH's patients, it must be possible to bring a child in a full-sized hospital bed up to the space. Therefore, at least one of the bed lifts should reach roof level, preferably one of the lifts at the eastern end of the building, so that inpatients can be brought to the garden without passing through public space."

pp129-130

GOSH wants everybody, regardless of their condition or mobility to be able to visit the roof garden and benefit from this valuable outside space. In recent years, GOSH has closed Great Ormond Street for one day each summer to hold a 'Play Street' event. Our clinicians have demonstrated their commitment to facilitating as many children as possible to attend these events and even children from our intensive care units were able to take part. In 2022, a child on a Berlin Heart¹ even came out into the street to play. But not all children confined to their beds are acutely unwell. A child in traction, for example, may be unable to get out of bed for several weeks but will benefit enormously from visiting outside space for play and recreation.

Journeys for patients being moved around the hospital in beds need to be as short and straightforward as possible, so as not to cause any deterioration in their condition or to make them overtired. Furthermore, if journeys are as easy as possible, more children will benefit from using the

¹ A Berlin Heart is an external pump that takes over the function of the child's own heart when their own organ is unable to function effectively. Children are typically managed on Berlin hearts for many months, whilst awaiting a suitable donor organ. The equipment is bulky, is transported on a trolley, includes a computer and has to be taken everywhere with the child.

outside space. In briefing the CCC project and required access to the roof garden, GOSH has taken account of access for children from inpatient wards across the hospital site, not just those wards that will be in the CCC.

Accessing outside space will benefit children's wellbeing and could positively impact recovery times leading to reduced length of stay. The roof garden will also be beneficial for parents and siblings and will represent a normal environment where families can play and spend time, as they would in a public park or their own garden. We know that hospitalisation of a child, particularly a protracted stay, has a detrimental impact upon family relationships and siblings comment on how they miss their hospitalised brother or sister and normal interactions with them. The roof garden represents an opportunity to address some of these challenges to family life and GOSH wants to ensure that these experiences and benefits are available to everybody.

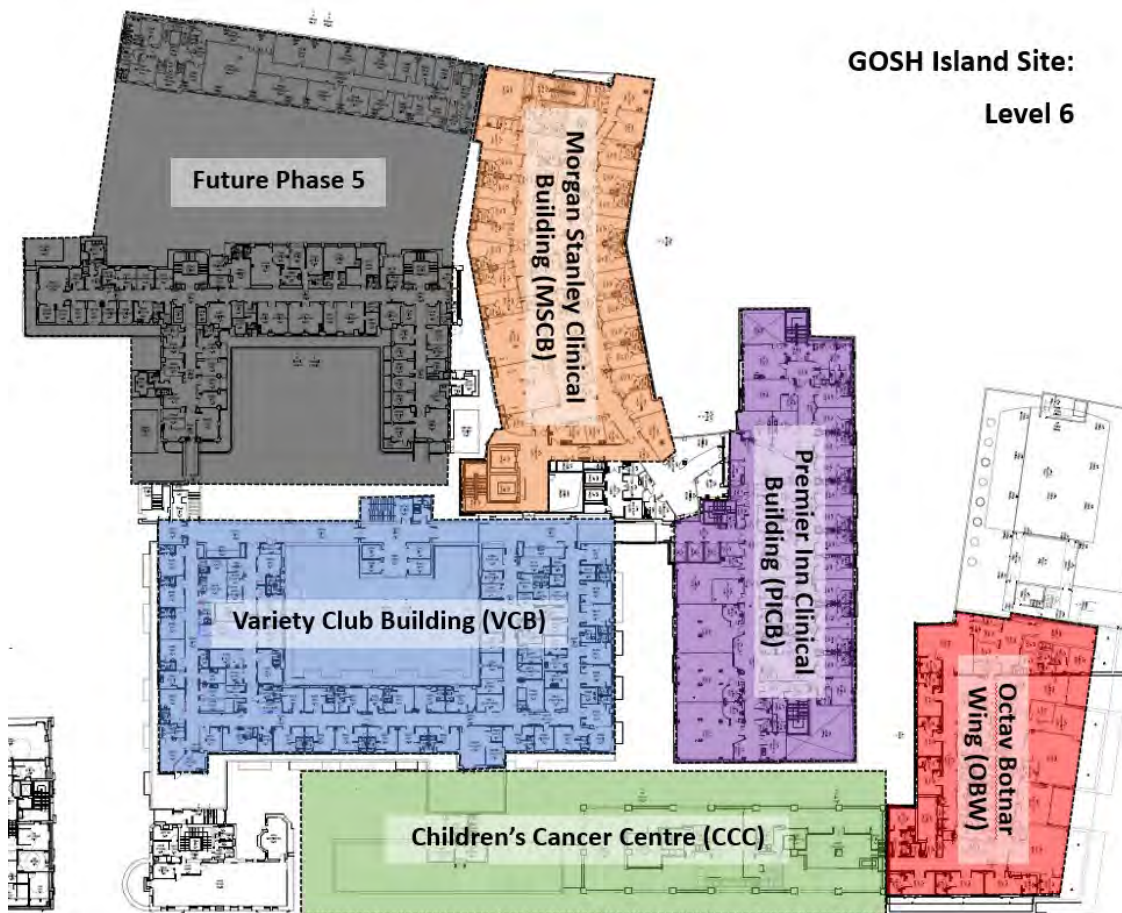
Staff too will be able to enjoy the garden and could use it for breaks and one to one discussions with colleagues. As the design develops, we will work with the landscape architect to create a variety of spaces that include private areas that are more peaceful and secluded.

Additionally, there are benefits to children's education that arise from access to outside space. The GOSH Hospital School, which will relocate to level 2 of the CCC at the eastern end of the floorplate, will make use of the roof garden for education and recreation. This benefit will only be fully realised through ease of access to the outside space and the eastern core provides direct access between the Hospital School and the roof garden.

Bed lift access to the roof garden at the eastern end of the CCC is essential to ensure that children can be brought from all over the hospital, not just from within the CCC, to enjoy the amenity of the roof garden. Only a small number of our inpatient wards will be accommodated in the CCC and GOSH will always have inpatient units across the rest of the island site. These building locations are shown on the sketch below:

GOSH Island Site:

Level 6



Only bed lift access at the eastern end of the CCC will provide access to the roof garden that does not require patients to travel through public spaces or other wards, both of which would be inappropriate for privacy and dignity. It is an underpinning principle of healthcare design to segregate, as far as possible, different flows of patients, visitors and materials. Provision of a bed lift at the eastern end of the CCC will achieve this segregation of patients being brought to the roof garden, ensuring that their dignity and privacy is protected, and they are able to travel by the most appropriate route.

The current design for the CCC meets the GOSH design brief for the roof garden and delivers the clinical functionality that is required.

Roof Garden Access and Maintenance

Appropriate and easy access to all areas of the healthcare estate is a prerequisite for effective maintenance. The proposed roof garden on the CCC will require regular care and maintenance to ensure that it continues to look good and provide the quality of space that GOSH aspires to for many years. GOSH employs a specialist contractor for grounds maintenance and this team bring their equipment with them and remove all rubbish and clippings. These logistics require an appropriate access route that also enables optimal flows of patients and goods/maintenance staff. This will be achieved with the provision of a suitable lift in the eastern core, as well as that in the western core. Depending upon the lifts at the western end of the building alone will lead to mixing of flows and transport of materials and equipment through public areas of the hospital.

Appendix 1 – GOSH Masterplan and Phasing

GOSH - Growth and Masterplan

GOSH has been constantly evolving since it opened in a Georgian townhouse on Great Ormond Street in 1852 and is now more than halfway through an ambitious redevelopment programme (GOSH Masterplan 2015) to rebuild two-thirds of the hospital site.

Upgrading the estate allows the hospital to offer world-class treatment to more children and to care for them and their families in safer, more comfortable environments with new facilities appropriate for world-class paediatric care. It also allows GOSH, together with the UCL's Institute of Child Health (ICH) and Institute of Cardiovascular Science (ICS), to undertake research and develop new diagnostics, treatments and devices that can improve the lives of patients treated at GOSH and children elsewhere in the UK and abroad.

The GOSH Masterplan (2015) is included in Figure 2 below (Note Phase 4B no longer forms part of the proposed Masterplan with the GOSHCCC changing from Phase 4A to Phase 4) and a commentary on each is provided below.

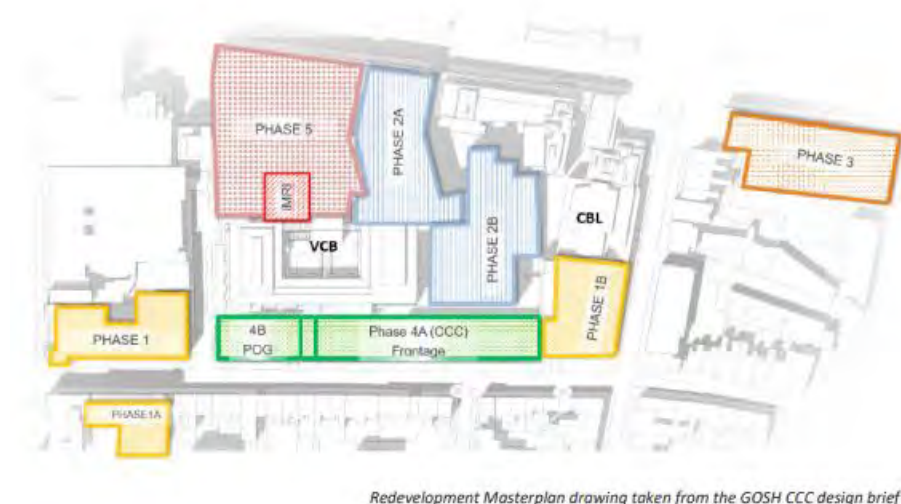


Figure 1: GOSH Masterplan (2015)

Phase 1 (2004-2006) of the redevelopment programme saw a number of changes to the hospital campus:

- New accommodation for patients and families in Weston House, known as the Paul O’Gorman Patient Hotel, along with a staff education and training centre.
- The construction of the new Octav Botnar Wing, which provided a new Medical Daycare Centre, inpatient wards for international and private patients and two additional operating theatres.
- The refurbishment of the Royal London Hospital for Integrated Medicine, which is jointly occupied by GOSH, now houses the new Djanogly Outpatient department.
- The expansion of the UCL Institute of Child Health to create the Wolfson Centre for Gene Therapy of Childhood Disease, allowing research into new gene therapy methods and treatments.

- The Hugh and Catherine Stevenson Centre for Childhood Infectious Diseases and Immunology, bringing together world-renowned infectious disease and immunology teams to seek new treatments and cures for the benefit of children in the UK and across the world.

Phase 2A (2007-2012) saw the opening of the Morgan Stanley Clinical Building, which comprises a part of the Mittal Children's Medical Centre in June 2012. The new clinical building has allowed the hospital to:

- Increase its capacity in line with growing demand.
- Provide inpatient facilities that offer more space, privacy and comfort, where a parent or carer can stay overnight by a child's bedside.
- Provide additional operating theatre capacity and improve models of care for patients by co-locating clinical teams.
- Improve the working conditions for staff.
- Provide sustainable design and reduced energy consumption. In 2013/14, the efficient combined cooling, heating and power generator located on the top of the Morgan Stanley Clinical Building produced 43 per cent of the Trust's electricity needs and 73 per cent of the Trust's heat needs.
- Introduce creative features. Throughout the Morgan Stanley Clinical Building there are specially commissioned, high quality and innovative artworks and design features that aim to help families find their way, provide welcome distraction, and help to create a sense of community and connection.

In Phase 2B (2012-2014), GOSH officially opened the Mittal Children's Medical Centre, home to the brand new Premier Inn Clinical Building in January 2014. The Mittal Children's Medical Centre – comprising the Morgan Stanley Clinical Building and the Premier Inn Clinical Building – has also increased the hospital's capacity, allowing expert staff to help even more seriously ill children every year.

In 2019 GOSH celebrated the **Phase 3** opening of The Zayed Centre (Ref: 2014/6068/P) for Research into Rare Disease in Children, and welcomed the first outpatients through its doors for treatment. The purpose-built Zayed Centre for Research brings together pioneering research and clinical care under one roof that will help to drive forward new treatments and cures for seriously ill children from across the UK and international patients. The new facility has been built on Guilford Street, next to Great Ormond Street Hospital and UCL Great Ormond Street Institute of Child Health in London.

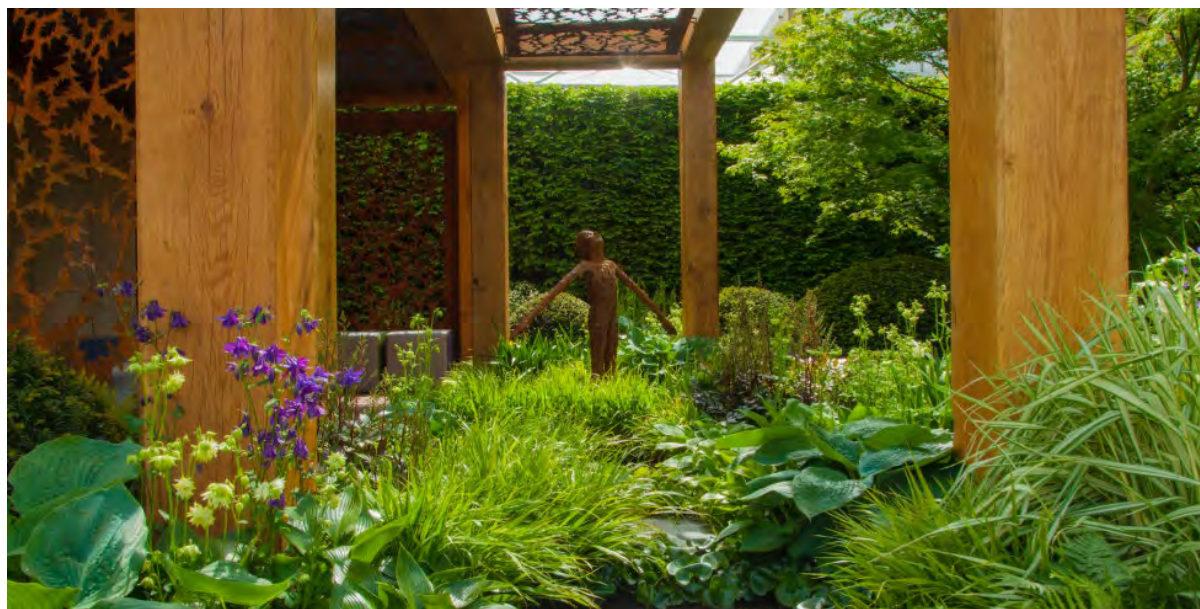
A three-storey building has been completed at the Island Site within the Southwood Courtyard for a new iMRI suite and physiotherapy and rehabilitation facilities (Ref: 2017/3377/P).

Additionally, within the Island Site, a new Sight and Sound facility (for outpatients and day cases) within the refurbished Italian Hospital on the corner of Queen Square opened in June 2021.

GOSH is also working currently with LBC on plans for transport and public realm improvements along Great Ormond Street for the benefit of the local infrastructure, hospital users and servicing, residents and the neighbourhood.

Appendix 2 – GOSH brief for the CCC roof garden

Roof Garden



The Morgan Stanley Garden at GOSH, designed by Chris Beardshaw

Description of Service

GOSH is fortunate to be located in a Central London location that provides excellent transport connections for our staff and families.

However, our site is also very built up and there is minimal outside space available. Coram's Fields in Guilford Street is a fantastic resource for children and families that are able to take the short walk, but GOSH seizes every possible opportunity to provide open space on the hospital site. In recent years we have been able to identify a courtyard area where the beautiful Morgan Stanley Garden, designed by Chris Beardshaw for the Chelsea Flower Show, was constructed by the BBC DIY SOS team.

We are committed to engineering solutions in future masterplan phases that prioritise roof space for gardens and position heavy plant at below ground levels. The CCC presents an excellent opportunity to create a beautiful natural oasis at roof level, with southerly views across London.

GOSH wants all of our staff, patients and families to be able to benefit from this garden so the design must deliver open space that is fully accessible and inclusive. That said, the design solution should also provide the opportunity to use sections for private activities such as teaching, therapy interventions and therapeutic play. Furthermore, the design should provide a variety of spaces where parents can find secluded corners for reflection and peace. And opportunities to provide a private space that is only accessible to staff should be explored.

To ensure that the roof garden is fully accessible to all GOSH's patients, it must be possible to bring a child in a full-sized hospital bed up to the space. Therefore, at least one of the bed lifts should reach roof level,

preferably one of the lifts at the eastern end of the building, so that inpatients can be brought to the garden without passing through public space.

The garden should provide potential for children and families to become involved in the maintenance and care of the space. There should be a proportion of productive planting that will allow children to harvest some produce to support learning about the origin of food.

The design team is expected to exercise their imagination and engage with children and young people in order to deliver a beautiful rooftop escape which will become an oasis for our children, their families and staff. The garden should become a truly special destination and a landmark location on the GOSH site.

Appendix 3: Updated Accurate Visual Representations

BD190_Great Ormond Street Hospital

October 2022









Baseline (Crop)





Proposed (Crop)





Cumulative (Crop)





LVMF Threshold (Crop)









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