



An
Bord
Pleanála

Inspector's Report ABP 311692-21

Development	Construction of a 4-storey Health Care Centre.
Location	Royal Hospital Donnybrook, Morehampton Road, Donnybrook, Dublin 4, D04 HX40.
Planning Authority	Dublin City Council
Planning Authority Reg. Ref.	2843/21
Applicant(s)	Axis Health Care Assets Limited.
Type of Application	Permission
Planning Authority Decision	Grant Permission with Conditions.
Type of Appeal	Third-Party
Appellant(s)	Cullenswood Residents
Observer(s)	None
Date of Site Inspection	30 th August 2022
Inspector	Brendan Coyne

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1.0 Site Location and Description

- 1.1. The site comprises the grounds and buildings of the Royal Hospital Donnybrook, in Donnybrook, Dublin 4. The site is located at the southwestern end of Bloomfield Avenue, which is accessible via Morehampton Road. Bloomfield Avenue is a cul-de-sac road which also provides access to several residential developments, a Carmelite Centre known as Avila and St. Mary's College, a Protected Structure which is now vacant. Bloomfield Avenue is the only public vehicular access point to the site. Bushfield Terrace provides restricted/gated service vehicular and staff pedestrian access to the site. Pedestrian gates (now closed) provided former access to the site from Lesson Park Avenue.
- 1.2. The site encompasses approximately 5.6 hectares and contains a number of buildings within a walled area. Established in 1743, the primary structure on the site is a 2-3 storey building used for general rehabilitation, short-term post-acute rehabilitative care, respite and specialist stroke and neurorehabilitation. The hospital also acts as a day and teaching hospital and provides residential care. Bushfield House, a building dating from the early 20th century, is located in the southeastern section of the site. The vehicular entrance to the site from Bloomfield Avenue is flanked by two single-storey cottages, Gate Lodge and Gardener's Cottage. Gardener's Cottage, on the northern side of Bloomfield Avenue, is in use as a G.P practice known as Morehampton Clinic. The vehicular entrance and avenue lead to the main entrance of the hospital and a car park in the southeastern section of the site, which is the location of the proposed Primary Care Centre. Other car parking areas are provided on the northern side of the avenue and to the north of the hospital building, with a maintenance yard. Several outbuildings, a glass house and an ESB substation are located along the southwestern boundary, adjoining Cullenswood Park. A pedestrian/service delivery path traverses around the side and rear of the main hospital building, adjacent to the western boundary. An area of open space parkland with mature trees is located in the north/northeastern section of the site. A pavilion building serving as a clubhouse is situated along the northern boundary. Mature trees are planted throughout the grounds of the hospital.
- 1.3. The former St. Mary's College adjoins the eastern boundary of the site. An Bord Pleanála granted permission on appeal in 2020 for the redevelopment of this site

under ABP Ref. 307306-20 to provide for a five-star, 169-room hotel. Construction has not yet commenced at the time of writing this report. The site borders Edward Lane, a 3-5 storey residential development along its northeastern boundary, and the residential cul-de-sac Lesson Park Avenue along its northern boundary. The rear gardens of dwellings along Appian Way and Sallymount Avenue adjoin the north/north-western boundary. Cullenswood sheltered housing complex, Cullenswood Park residential cul-de-sac, and Woodstock sheltered housing adjoin the west/south-western boundary of the site

2.0 Proposed Development

2.1. Permission sought for the following (as described in public notices);

- (i) Construction of a new Primary Care Centre, comprising a four-storey over basement level building and accommodating the following:
 - HSE medical diagnostics, consulting and treatment rooms plus ancillary offices, service areas, staff facilities & circulation (6,175sq.m.),
 - General Practitioner Surgery (552sq.m.),
 - Retail Pharmacy Unit (132sq.m.);
 - Car parking, cycle parking, plant, storage, and refuse management at basement level;
 - Escape stair enclosure, external plant enclosure, all ancillary floorspace (505sq.m.);
 - New Quadrangle Garden;
 - 1 no. National Ambulance Service parking space;
 - Vehicular access via the existing public entrance to Royal Hospital Donnybrook at Bloomfield Avenue;
 - Building signage;
 - Sub-station, external plant, connection to existing water and waste-water services;

- (ii) Remove the existing main surface car park at Royal Hospital Donnybrook (82 no. spaces) and re-configure the entrance car park (12 no. spaces), and provide 94 no. spaces as follows;
 - New car parking spaces adjacent existing Hospital building (4 no.),
 - Re-configure and extend the entrance car park (66 no.),
 - Extend the car park adjacent to the hospital maintenance yard (13 no. spaces) and,
 - New car parking spaces adjacent to the Pavilion (11 no. spaces);
- (iii) New controlled pedestrian and cycle link at Cullenswood Park with new entrance piers & gate, new steps and ramp to connect to existing internal path and road network within the grounds of Royal Hospital;
- (iv) All related site lighting, hard and soft landscaping, site development works, and excavation work above and below ground.

2.1.1. Documentation submitted includes (inter alia) the following;

- Letter from the Board of the Royal Hospital Donnybrook confirming its consent to the inclusion of lands in its ownership in the planning application.
- Letter from Health Services Executive Estates Office dated 7th April 2021.
- Letter from Tom Philips & Associates dated 27th May 2021 on behalf of the Board of Royal Hospital Donnybrook confirming support for the proposed development.
- Architecture and application drawings prepared by Quinn Architects.
- Engineering drawings prepared by OCSC Consulting Engineers.
- Landscape drawings designed by Doyle & O'Troitigh Landscape Architecture.
- Public lighting drawings prepared by Conlon Engineering.
- Arboricultural drawings prepared by Charles Mccorkell Arboricultural Consultancy.
- Architectural Design Rationale prepared by Quinn Architects.
- Booklet of Visualisations prepared on behalf of Quinn Architects.
- Planning Statement prepared by Town & Country Resources Limited.
- Engineering Services Report prepared by OCSC.

- Landscape Design Report, prepared by Doyle & O'Troitigh Landscape Architecture.
- External Lighting Specification prepared by CEL.
- Sustainability Report for Mechanical & Electrical Services prepared by CEL.
- Operational Waste Management Plan prepared by AWN Consulting.
- Outline Construction Environmental Management Plan prepared by OCSC.
- Outline Construction & Demolition Waste Management Plan prepared by OCSC.
- Traffic Impact Assessment prepared by OCSC.
- Mobility Management Plan prepared by OCSC.
- Screening for Appropriate Assessment, prepared by Scott Cawley, including Hydrological and Hydrogeological Risk Assessment prepared by AWN Consulting.
- Ecological Impact Assessment prepared by Scott Cawley.
- Noise & Vibration Impact Assessment prepared by CLV Consulting.
- Archaeological Heritage Impact Assessment prepared by Byrne Mullins & Associates.
- Arboricultural Impact Assessment, prepared by Charles Mccorkell Arboricultural Consultancy.
- Architectural Heritage Impact Assessment prepared by Molloy Associates.

2.1.2. Further Information submitted on 25/08/2021 includes the following:

- Response document prepared by OSCS
- External Lighting Specifications
- Parking Management Plan – proposed Primary Care Centre
- Parking Management Plan – Royal Hospital Donnybrook
- Response to Further Information request – Town and County Resources Ltd.
- Revised Visualisation Key Plan
- Response from Quinn Architects

- Revised Layout / Floor Plans
- Landscaping and Planting Plans

3.0 Planning Authority Decision

3.1. Decision

Dublin City Council GRANTED permission for the proposed development subject to 15 no. Conditions. Noted Conditions include:

2. **Development Contribution** - A development contribution in the sum of €885,456.00 shall be paid to the Planning Authority as a contribution towards expenditure that was and/ or is proposed to be incurred by the Planning Authority in respect of public infrastructure and facilities benefitting development in the administrative area of the Authority in accordance with Dublin City Council's Section 48 Development Contribution Scheme.
3. **Bond requirement** - standard.
4. **Hours of Construction** - standard
6. **Materials and Finishes** - Prior to the commencement of development, details of the materials, colours and textures of all the external finishes including details on the 'green roofs' to the proposed development shall be submitted to and agreed in writing by the Planning Authority. A panel of the proposed finishes to be placed on site to enable the planning authority adjudicate on the proposals. Any proposed render finish to be self-finish in a suitable colour and shall not require painting. Construction materials and detailing shall adhere to the principles of sustainability and energy efficiency and high maintenance detailing shall be avoided.
7. **Landscaping** - The landscape scheme accompanying the application shall be implemented fully in the first planting season following completion of the development, and any trees or shrubs which die or are removed within 3 years of planting shall be replaced in the first planting season thereafter.

8. **Tree Protection** - A tree retention and protection plan will be prepared and submitted by a qualified Arboriculture's for approval of Dublin City Council's Parks & Landscape Services prior to construction commencement.
9. **Advertising** - Notwithstanding the provisions of the Planning & Development Regulations 2001 (as amended), no advertisement signs (including any signs installed to be visible through the windows); advertisement structures, banners, canopies, flags, or other projecting element shall be displayed or erected on the building or within the curtilage, or attached to the glazing without the prior grant of planning permission. Reason: In the interests of visual amenity.
10. **Window Glazing** - A window display shall be maintained at all times in the Pharmacy Unit, and the glazing to the shopfront shall be kept free of all stickers, posters and advertisements.
11. **Signage** - Full details of all external signage shall be submitted to the Planning Authority and written agreement obtained prior to commencement of development.
12. **Parking** - The Applicant shall comply with the following Transportation Division requirements: (i). Car parking spaces shall be permanently allocated to the proposed use as outlined within the Parking Management Plan for the Primary Care Centre and shall not be sold, rented or otherwise sub-let or leased to other parties. (ii). Public pedestrian and cyclist access to and from the hospital campus via the Bushfield Terrace access and the Cullenswood Park access shall be provided between 08:00 and 19:00 hours Monday to Sunday. Staff only access by way of key/fob outside these public opening hours shall also be permitted at the Bushfield Terrace and the Cullenswood Park access points. (iii). A minimum of 28 no. staff cycle parking shall be secure, conveniently located, sheltered and well lit. Staff shower and changing facilities shall be provided. Key/fob access shall be required to staff bicycle compounds/areas at basement level. A minimum of 10 no. visitor cycle parking spaces shall be provided within the basement car park. The design of all cycle parking stands shall allow both wheel and frame to be locked. (iv). The applicant/developer shall undertake to implement the measures outlined in the Mobility Management Framework/Plan and to ensure that future tenants of the

development comply with this strategy. A Mobility Manager for the overall scheme shall be appointed to oversee and co-ordinate the preparation of individual plans. A review of the Mobility Management Plan, including travel habit surveys and modal split, shall be carried out within 12 months of the occupation of the development. (vi). Prior to commencement of development, and on appointment of the main contractor, a revised Construction Management Plan shall be submitted to the planning authority for written agreement. This plan shall provide details of intended construction practice for the development, including a detailed traffic management plan, hours of working, noise and dust management measures and off-site disposal of construction/demolition waste and access arrangements for labour, plant and materials, including location of plant and machine compound. (vi). All costs incurred by Dublin City Council, including any repairs to the public road and services necessary as a result of development, shall be at the expense of the developer. (vii). The developer shall be obliged to comply with the requirements set out in the Code of Practice.

13. **Drainage Division Requirements** – standard
14. **Archaeological Requirements** – standard
15. **Noise Control Standard Requirements** - standard

3.2. **Planning Authority Reports**

3.2.1. **First Report (15/07/2021)**

- The proposal is for a new primary health centre to be located on the grounds of the Royal Donnybrook Hospital.
- The Primary Care Centre will be a four-storey building with a basement and will be constructed on an existing surface car park.
- The building will house a retail pharmacy unit and a general practitioner surgery.
- The eliminated parking spaces will be relocated within the Royal Hospital complex.

Requirement for a Primary Health Care Centre

- The Applicant has submitted a letter of support from the HSE stating that the proposed centre is a vital piece of infrastructure for the provision of health services in the Donnybrook and Ranelagh catchment areas.
- The letter of support states that the institution will create a chronic disease specialist hub in response to the requirements of the National Service Plan.
- The Applicants have submitted an 'Architectural Design Rationale,' which states that a need for a Primary Care Centre in Donnybrook has existed for several years.
- Permission to extend and redevelop the vacant Bushfield House building on campus was obtained in 2013 but never enacted. This development was 1,640sq.m in size, with 901sq.m in the old building and a 739sq.m expansion.
- The HSE reviewed its needs to serve Donnybrook and determined a space requirement of 3,600sq.m plus space for a G.P. practice and pharmacy. Then, site options within the campus were evaluated. This evaluation identified three potential sites for development.
- Site A was chosen, on the existing surface parking lot, at a right angle to Bushfield House.
- Site B was to the northwest corner along the boundary shared with Sallymount Avenue, and Site C was in the northeast section of the site.
- The "Architectural Design Rationale" notes that the HSE reviewed their service requirements concurrently with this process and that similar Primary Health Centres were too small at the time of completion to accommodate supplementary services that would enhance comprehensive Primary Care Services.
- The HSE recognised that the current design proposal filed with this application is far greater than the one approved in 2013.
- These designs are the product of extensive engagement with the HSE and reflect the expanded range of services proposed by the HSE for this location.
- The centre accommodates a multi-disciplinary healthcare team delivering the following principle services:

- Primary Care Service – G.P., Nursing, Physiotherapy, Occupational Therapy, Speech & Language.
- Therapy, Psychology, Dietetics, Social Work, Counselling.
- Chronic Disease Management Hub – Diabetes, Respiratory, Cardiac.
- Older person services.
- Community Diagnostics including X-Ray, Ultrasound, ECG, Spirometry, and Phlebotomy.
- Mental Health Community Services & Day Hospital.
- The Applicants note the total floor area of space required by the HSE, including internal partitions, circulation, and plant area is 6,175sq.m.
- The building will also include the Morehampton Clinic, G.P. Practice which is currently operating from the Gardener's Cottage within the grounds and requires 552sq.m.
- The pharmacy will require 132sq.m of floor space.

Design Rationale

- According to the Applicant, the mature character of the existing campus and the formal two-story elevation of the current hospital complex indicate a long-established building complex that has evolved steadily since the first structure was constructed in 1743.
- The elevational treatment of Bushfield House, which stands detached to the south of the Campus, is deemed by the Applicant to be finely articulated and, in conjunction with the existing hospital's form, begins to enclose a spacious forecourt.
- Mature trees enclose an area used for parking and a grass lawn to the left of the main access road.
- According to the Applicants, the recent developments along Bloomfield Avenue display a pattern of four, five, and six-story buildings that have settled effectively to their local environment and added a contemporary character to the surroundings.
- The Applicants note that the developments at Edward Square and Bloomfield Park share several features, such as the sensitive and controlled use of materials, set-

back top floors, careful placement of buildings within existing landscape features, and the construction of new, high-quality hard and soft landscaping amenities to serve these developments.

- The design principles agreed upon with the Royal Hospital Donnybrook were that the new building should be built parallel to the existing hospital and arranged to create a 'quadrangle garden' for use by all. This would frame the hospital building on two sides, Bushfield House to one side and the Primary Health Care building to the other.
- It was agreed that if the levels were reduced on-site, it would be possible to form a basement car park.
- The mass of the new building should be broken in the middle along an axis, bisecting the formal 'courtyard' space.
- At a minimum, a separation distance of 10.5m is provided on all four sides to reduce visual impact.

Proposal

- The proposal is for a single four-storey building over a basement car park.
- The building will have its main entrance on the ground floor in the centre of the building and will directly face the main buildings of the Royal Hospital.
- The pharmacy will be located just off the main entrance and will be 132sq.m.
- The G.P. practice takes up the rest of the building's eastern side, which has a reduced depth of 23m, given its proximity to Bushfield House.
- The practice will have 7 no. consulting rooms, 2 no. nurse's rooms, a procedure room, an emergency room, administration rooms and a waiting area.
- The western side of the building consists of the Primary Health Care Centre, which includes 2 no. ultrasound rooms, X-ray room, retina screening room, 8 no. consulting rooms, wound treatment room, HSE meeting rooms, a national ambulance room along with other ancillary rooms and support service rooms.
- At first floor level, the eastern side of the building contains the stroke services rooms with their respective services, i.e. physio and occupational therapy.

- The eastern side of the building contains 9 no. consulting rooms, and pediatric rooms.
- The second floor contains more consulting rooms, a canteen area which overlooks the new formal garden to the front of the building, staff facilities and larger treatment rooms.
- The third floor provides mental health services for the HSE, with consulting rooms and therapy rooms in addition to ancillary office requirements. This level is set back 8m on all sides from the main façade except for the eastern rear side, which faces into the St. Mary's Site, and the stairwell and lifts section, which is to the rear of the building.
- Access to the basement levels is just off the main entrance from Bloomfield Terrace.

Height, Scale and Massing

- The Primary Health Care building is four stories over a basement car park, with the fourth floor set back on all sides, except the stairwell and the northern eastern side, which has a shallower depth than the western section of the building.
- The most challenging issue for the project will be successfully integrating the new Primary Care Centre into the setting of the Royal Hospital Donnybrook campus and nearby properties.
- The height of the project and how the requirement for a four-storey building may be successfully met on the site were given special consideration during pre-planning discussions.
- The Applicant notes that the proposed building's ground floor height is 15.6m, and this level was chosen to best tie in with the ground floor levels of the adjacent buildings and local site levels within the campus.
- The floor-to-floor dimension is 3.6m, allowing building services to be installed within the floors and ceilings.
- The Applicant notes that in previous Primary Care Centres, a perimeter parapet of approx. 1.2 metres in height was installed at roof level to address health and safety concerns related to roof maintenance.

- The parapet level above the third storey for the Primary Care Centre is 27.45m O.D. with the parapet level above the fourth storey at 30.85.m O.D.
- The applicant details the heights of buildings in the vicinity.
- The main hospital building has a finished floor level of 16.30, eaves of 25.39, and a ridge of 28.35.
- Bushfield House's finished floor level is 15.6 OD, eaves are 25.38 OD, and ridge is 28.75 OD.
- St. Mary's tallest roof ridge height is 30.0 OD, with parapet level over the fourth storey of the bedroom extension at 26.4 OD and ridge level above the fifth storey at 29.5 OD.
- The Planning Authority is aware of the floor area requirements for the proposed building. The Applicant has made sufficient efforts to limit the height and to try to relate it to the surrounding context. Therefore, the proposed four-storey building is reasonable.
- Regarding the massing and bulk of the building, specific parameters were established such that the new building should be centred on an axis with the main hospital building and be symmetrical around that axis.
- The northeastern side of the new building should be positioned to maximise the retention of mature trees along the boundary with the former St. Mary's College.
- The new building should be no more than 10.5m from the front façade of Bushfield House.
- The main plan of the front elevation of the new building should not project beyond the northeastern gable of Bushfield House.
- The Applicants reinforced the positioning of the proposed building on a central axis with the formal façade of the existing hospital in its elevational treatment.
- Given the requirement for a significant quantum of floor space, it was acknowledged at the pre-planning stage that the challenge was providing for a building that would not significantly dominate the existing setting. The Applicant, therefore, has set back most of the fourth storey.

- The architects state that fenestration on the building has a vertical emphasis and there is a randomness to the location of individual windows that reflects the organisation of rooms across each floor of the building.
- The axis is centred on the middle projecting gable of that building
- In composing the front elevation of the new building, the Applicant states that they break the mass of the building when viewed from the southwest into two equal blocks, with a glazed curtain walling section set back from the plane of the main façade.
- The third element is the introduction of the projecting elements to break up the mass of the building further.
- On the central axis, a single-storey projection identifies the main building entrance. It then extends on one side at a slightly lower level to identify the Pharmacy unit, within the building, which contains a shopfront window and signage in a controlled manner.
- At both ends of the building, a two-storey projection grounds the building at either corner. The applicant states these projections also reflect the two projecting gables on either side of the central projecting gable of the existing hospital building. The Applicant notes that these were previously going to be a stone finish but is now brick with a softer material with a greater texture.
- To further address the mass of the building, the first and second-floors project beyond the ground floor building line.
- The external finish along the entire length of the ground floor on the south-west elevation is also brick, and this ties together the three projecting brick elements
- The Applicant considers the upper levels to sit on a brick plinth that both grounds and animates the front façade of the proposed new building.
- According to the architect, the fenestration on the building has a vertical emphasis, and the placement of individual windows is random, reflecting the organisation of rooms across each floor of the building.

- In contrast, where window locations coincide with the brick projections at each corner of the building, the composition of the façade is more formal, adding further strong definition at the extremities of the new building.
- The Applicant notes the projections themselves allow for deeper reveals and layering of the façade within these brick elements.
- The proposal has integrated the location of ventilation openings in the side wall of the basement level car park so that they align with ope dimensions of the windows overhead.
- The building is approximately 70m in length, 32m on the western side and 21.5m on the eastern side.
- The Planning Authority had noted concerns regarding the expanse of the building and its visual dominance within the site. The Applicant has taken on board those comments from the pre-planning discussions, but it is still considered that given the scale of the building, further design revisions could be used to add more articulation to it.

Elevational Treatment and Material Palette

- The Applicant states that the predominant materials for the wall finishes are painted render and brick. This has followed from pre-planning discussions regarding the importance of the external finishes and how to harmonies the scale of the building to the setting.
- It was considered that a brick finish, i.e. Vandersanden' Oud Blanckaert' buff coloured brick, would be preferable to stone. This brick is tumbled, handmade brick with softer edges and a mottled colouring with rich variations in tone. This brick will be used on the ground floor level and extend to the first floor on the corner elements.
- The predominant materials for the roofs are slate to pitched roofs and both zinc and copper with standing seam for visible flat roofs and vertical cladding elements.
- The newer residential elements use expansive glazed elements.
- Regarding the render's colour, the applicants propose a beige colour that will tie in with the brick.

- The top floor, i.e. 3rd, will have a standing seam metal cladding finish. The Applicants consider that this offers a natural finish sympathetic to healthcare use and sensitive to the 'parkland' character of the Royal Donnybrook Hospital Campus.
- A green roof is proposed for the flat roof.
- The Planning Authority is satisfied with the choice of materials but has concerns regarding the expanse of render on the first and second floor and notes if further design measures could be employed to alleviate this in some way.

Architectural Heritage Impact Assessment

- The Applicant has submitted an Architectural Heritage Impact assessment (AHIA) to qualify the existing character of the subject development site and chart how it has changed over time to determine the appropriateness of the proposed design response within its wider historical setting and to inform an accurate assessment of the architectural heritage impacts potentially arising therefrom.
- The AHIA firstly notes that the development site is located on a car park to the fore of an established mature tree berm and masonry wall, located to the west of the site's principal historic hospital building group, to the east of Bushfield House, and the west of a neighbouring Protected Structure, St. Mary's College, Bloomfield Avenue.
- The AHIA notes that the proposed development is at a sufficient distance from other protected structures on Bloomfield Avenue and Carlisle Avenue to preclude their assessment in terms of impact.
- The AHIA notes the Primary Care Centre development is designed in parallel with the building group as a reflection of its composition.
- The AHIA references the benefits of the dominant typology on the site, in its positioning to carefully frame a garden completed by the hospital grouping to the west, Bushfield House to the south and the avenue to the north.
- The AHIA considers the resultant assemblage resonates with the site's given character to the extent that morphological impacts generally associated with the introduction of new buildings of scale are in the instance of the subject

development, absorbed seamlessly within a compatible scheme designed to integrate and not conflict with its architectural environs.

- The AHIA considers the development would not adversely impact the setting of the historic building range, and the introduction of an enclosed garden will serve as a welcome amenity for all campus users and will, in time, become integral to the character of the site.
- The proposed building is positioned perpendicularly to Bushfield House, protecting its setting as a detached building within a garden.
- The AHIA considers that efforts to generate a structure respectful of the design treatment of Bushfield House have succeeded in ensuring the overall compatibility of the proposal.
- The AHIA notes the formality of the proposed garden, which embraces a renewed purpose of the House as a central component of its composition.
- The mature berm of trees presently buffers the visibility of St. Mary's from the development site, which will serve to screen the scheme from the upper rear rooms of the Protected Structure.
- The AHIA states that impact is minimised due to the distance between the proposed car parking area excavations and historic boundary walls.
- As proposed, visual impacts for boundaries arising from additional car parking to the north and west are not considered adverse owing to the existing condition of a carriageway with grassed surfaces to affected areas.
- The proposed Cullenswood Park link will enhance rather than detract from the character of the building group, increasing the permeability and bringing animation to the campus.
- The wall section affected is historic in origin, but the loss is considered reasonable.
- A Consulting Engineering report on the proposed works has been submitted, concluding that there is no risk to the existing conditions of these structures, including boundary walls.
- The proposal would not impact the visual setting or amenity of protected structures along Bloomfield Avenue.

- The AHIA report concludes that a design approach embracing an established tradition of enclosing central gardens is compatible with the institution's evolved character.
- The proposed generation of a new structure on a traditionally open site opposite the principal grouping to the west and enclosing the beginnings of a quadrangle established by the hospital and Bushfield House is deemed appropriate in principle.
- The Planning Authority considers the chosen site reasonable given the constraints and is therefore satisfied that the proposal is reasonable.

Landscape Design

- The Landscape Design Report notes that the 'vision' of the campus masterplan was considered as part of the southern podium space from the outset.
- There was a focused requirement to formalise the space based on a collegiate 'quadrangle' design with open lawns mirrored on a central axis.
- There was also a requirement to create a strong definition to the south of this space with a rigid and formalised line of tree planting. This formalised green edge was a requirement to compartmentalise the space within the wider campus setting.
- The new Quadrangle Garden landscape scheme, measuring 65m in length by 31m in width, is intended to be surrounded and protected by built development. It will be bounded to the south by Bushfield House and to the west and north by the main Royal Hospital.
- According to the Landscape Design Report, the space has an open south and south-west facing aspect, with its layout and length contributing to human comfort and scale.
- The Landscape Design Report identifies that the Quadrangle Garden aims to deliver the following considered and integrated elements:
 - Structural formal setting within a larger historic environment, with opportunities for a range of walking pathways, including focused desire lines for future staff movement and users of all abilities.

- Seating with a favourable perspective and a range of options for group gatherings and private conversations/reflection. All seating is shielded and surrounded by vegetation to provide comfort for future users.
- Copper Beech defines the northern and southern edges of the space. These will serve as 'bookends' for the space and offer leaf colour diversity to add seasonal interest.
- A powerful visual amenity with a varied planting mix that will provide year-round appeal by using an evergreen backbone and flowering shrubs/herbaceous plant material. Tiny deciduous trees/large shrubs with small canopies and light leaves will support these plants. Spring and early summer flowering bulbs will be interplanted with shrub and herbaceous layers.
- Complementary and contrasting hard landscaping features. The plan includes a controlled one-way fire tender access arrangement to ensure its visual quality exceeds its practical usefulness. The access road has a resin-bound surface that will perform well as a permeable surface for the podium. The remaining pedestrian pathway connectors will have modern permeable paving.
- Incorporating planters with prominent seats and integrated lighting along the scheme's central axis will connect the proposed building to the wider campus-built development.
- The 900mm tall powder-coated mild steel planters will give height variation.
- The proposal provides a series of vents for the scheme, which will be screened, softened and integrated with evergreen shrub planting.
- An architectural pergola is proposed on the central axis pathway of the garden space. This contemporary feature will be softened with a climber mix.
- A formal line of Ornamental Pear will perform as a bio-retention tree pit which can form part of the wider SUDS strategy.

- To the northern edge of the existing Royal Hospital Building, there is an opportunity to provide landscape improvements with the 'Quadrangle Garden'.
- This building edge will benefit from a revitalised and structured 'softscape' arrangement along with the integration of a pathway network, which will include 4 no. parallel designated parking bays.
- Proposed re-surfacing of a formalised area of the road surface in a bauxite non-slip finish or similar to the existing internal access road locally at the main hospital entrance. This will aim to integrate the existing building fabric with the new landscape setting and improve legibility.
- The Landscape Design Report report notes that to the eastern edge of the Primary Care Centre, a detailed assessment of tree retention/removal has been carried out, identifying a significant stand of large Black Pine that are to be retained.
- In order to protect them, a retaining timber crib fencing ranging from heights of 0.5m to 1.8m in height shall be provided.
- A dry understorey woodland planting mix is proposed for the disturbed ground areas, which will complement the upper canopy and improve the overall site biodiversity.
- The Landscape Design Report report further notes that all proposed car park areas have been considered to be sensitively linked with the landscaping setting and built environment. Consequently, specific emphasis has been given to providing 'non-dig' construction arrangements to parking bays and internal access roads.

Tree Survey Report

- The Tree Survey report includes an assessment of the trees, their quality and value, the site context and observations on the trees, and local planning policies relevant to the consideration of trees on the site.
- The report looks at the impact of the proposed development on the tree population in and around the site and methods of reducing impacts on trees,
- The Tree Survey report concludes that although tree removals are required to facilitate the proposed development, their loss will not significantly impact the

character and appearance of the wider local surrounding landscape. This is due in part to the introduction of new high-quality tree planting that is proposed, and this new planting will help to mitigate the loss of trees and enhance the visual appearance and character of the development proposal.

- The Tree Survey report goes through the various working areas to provide details on the existing context. It notes that all retained trees can be successfully protected during the proposed development works by using robust fencing and ground protection measures.
- The Tree Protection Plan highlights areas of no-dig construction. It states all ground protection must be fit for purpose and capable of supporting any traffic using the area without being distorted or causing compaction or underlying soil.
- The Tree Protection Plan notes the detailed landscaping plan will help to mitigate the loss of trees and, in the medium to long term, can have a positive impact on the character and appearance of the site and surrounding local landscape.
- This report provides sufficient reassurance to the Planning Authority that the removal of some trees for the development will not negatively impact the existing environs of the site and that the landscaping plan will mitigate it in the medium and long term.

Cullenswood Park Pedestrian Access

- A new controlled pedestrian and cycle entrance is proposed along Cullenswood Park.
- An elevated ramp and stepped arrangement is proposed within the Hospital grounds due to the difference in height at 1.4m. This will be elevated on a post arrangement to avoid existing tree roots.
- A revitalised shrub layer with select feature trees is proposed within close proximity to the ramp/step structure in order to merge the arrangement well into the campus setting.
- A number of submissions were received to the application where the key issue was the introduction of this access.

- The residents have noted serious concerns regarding this proposal, lack of consultation, and impact on their residential amenities.
- The Planning Authority considers this a reasonable proposal given the facilities proposed within the new Primary Care Centre and the access to the residents within the Dublin 6 area.
- It is not considered that the concerns raised by third parties should require the omission of this link and the positive benefit it will provide to the area to increase permeability.
- The Z15 zoning of the site supports this facility and its community use.
- The Applicant has indicated that this is to be a gated controlled entrance that will link the access to the internal footpath and road network and remain open during the operating hours of the campus.
- Further details should be sought on the operating hours.
- The pedestrian gate is to be 1.6m wide and will have two pillars on either side of sandstone smooth and hand hammered finish.
- The pillars will be 2.7m in height, and the new gate will be metal with an integrated decorative feature.
- The ramp will have a neaco aluminium grille system neatdex 168, and the railings will be galvanised sheet guarding with a stainless-steel handrail.
- The Transportation Division are supportive of the proposed pedestrian route into the campus and requests that the Applicant can increase the pedestrian permeability into the site by request for additional information.

Visualisation Key Plan

- The Applicant has submitted 5 CGI's with the application to demonstrate the building and the new 'Quadrangle Garden' in its environs. These show the building and landscaping from various viewpoints.
- The landscaping, along with the use of brick, helps to soften the building's mass and scale in relation to its surroundings. However, given the structure's length, additional efforts to limit the spread of the building, particularly on the first and second levels, may be made.

- The first and second floors are lacking in texture, given the length of the building. This could be sought by way of further information.

Archaeological Heritage

- An Archaeological Heritage Impact Assessment of the proposed development has been undertaken and notes there are no previously identified sites, monuments or features of archaeological interest/potential located within or in the immediate environs of the site.
- According to the Archaeological Heritage Impact Assessment, the site has low archaeological potential due to its historical nature and the general development history of the area, and the discovery of subsurface archaeological remains is unlikely.

Car Parking, Traffic and Transportation

- The new building is to be situated on an existing car park with 82 spaces, which is used by hospital patients, visitors and staff.
- A further 12 spaces will be re-configured as part of the development.
- The spaces are, therefore to be fully replaced/reconfigured and are provided at work areas 01 to 05.
- At the basement level of the new Primary Care Centre, 116 car parking spaces are to be provided. This is considered sufficient to prevent any overspill parking on local residential streets.
- A mobility management plan has been submitted with the application, which sets out a series of measures aimed at reducing the need to travel by car and facilitating travel by more sustainable modes, including public transport, cycling and walking.
- The Applicant has submitted a Transport Impact Assessment, which concludes that the level of traffic generation by the construction work will be out of peak traffic hours and will be lower than that generated by the operational stage.
- The Transport Impact Assessment notes that the impacts during construction will be mitigated through their Construction and Environmental Management Plan.
- A Mobility Management Plan has been prepared, which sets out a series of measures aimed at reducing the need to travel by car and facilitating travel by more

sustainable modes, including public transport, cycling and walking during both construction and operation of the proposed development.

- The Planning Authority's Transport Division assessed the application and identified several concerns, requesting additional information on these matters.
- The main issue is the quantum of car parking proposed and if this could be reduced.
- The Transport Division seeks further information concerning the mobility management plan, pedestrian routes and crossing locations on campus, whether extra footpaths are needed, and details on loading and unloading.

Noise and Vibration Impact Assessment:

- The Noise and Vibration Impact Assessment identifies 3 no. sensitive receptor locations at Bushfield Terrace, St. Mary's site and the single-storey buildings at the entrance to the campus, i.e. The Gate House and the Gardener's Cottage.
- The assessment report states that there will be minimal noise impact on the identified receptors during the construction phase, and that during operation, the noise levels generated by the building services plan, delivery trucks, and car parking are within the criteria for acceptable daytime and nighttime noise levels.

Flood Risk Assessment

- The Drainage Division are satisfied with the proposal and recommends conditions.
- The Drainage Division report notes that the development is located in Flood Zone C and that the proposed land use of a hospital is classified as a highly vulnerable development.
- The proposed surface water network has been designed to accommodate extreme rainfall events up to a 1 in 100-year rainfall event with a 20% allowance for climate change. This ensures that pluvial flooding is not considered to be a significant risk to the proposed development.
- The site is not in the vicinity of any tidally influenced area of groundwater flood and is therefore not considered at risk from groundwater flooding. Therefore flood risk is minimal.

- The Planning Authority conclude that there are a number of issues raised by the Transportation Division which requires additional information. Furthermore, there is concern regarding the expanse of render on the front elevation of the building, given its scale. Therefore, the Planning Authority consider it reasonable to request that further measures be introduced to modulate the building, so that it appears less dominant within the setting of the Royal Hospital.

3.2.2. Further information was requested requiring the following:

1. *The Applicant is requested to respond to the following Transportation Division requests:*

- (i) *The proposed level of car parking for the Primary Care Centre is considered unacceptable having regard to the car parking standards included in the Dublin City Development Plan and would give rise to unsustainable commuting by private car which would conflict with development plan policy. The Applicant is requested to reduce the proposed number of car parking spaces in line with the maximum accessibility based car parking standards expressed in the development plan. The Applicant should consider the reallocation of space within the basement car park area to provide additional secure staff cycle parking (including e-charging facilities) as well as 'end of trip facilities' which include shower, changing room, drying room etc. in order to facilitate and encourage active travel modes by staff. The Applicant is also requested to review the cycle parking layout in regards to the reduction in car parking spaces and provide a suitable secure cycle parking area in addition to a suitable number of visitor cycle space. An updated MMP and TIA should also be submitted to reflect the changes in car parking provision and vehicular trips.*
- (ii) *(ii) Notwithstanding item no. 1 above, the Applicant is requested to submit a car parking management plan for the proposed development and for the*

hospital campus as a whole. This should set out how car parking is managed and allocated to staff and users of the campus and primary care facilities. Staff should be broken down into core and shift staff. The Applicant is advised that the promotion of commuting by private car is contrary to sustainable transport policy and that sufficient parking for patients is required so as to minimise overspill parking on the adjacent streets.

- (iii) (iii) While the proposed pedestrian/cycle link from Cullenswood is welcomed as it will provide additional permeability and more direct connectivity to public transport, the Applicant is requested to investigate the potential to provide additional pedestrian/cycle access points from the surrounding street network.*
- (iv) (iv) The Applicant is requested to provide an updated site layout drawing outlining a clear pedestrian route from the various relocated car parks to the existing hospital entrance(s). The Applicant is also requested to provide a more direct pedestrian route from the existing entrance on Bloomfield Avenue and the existing hospital entrance and provide a demarcated route, including crossing points adjacent to the public entrance to the existing hospital. The Applicant is also requested to review if an uncontrolled crossing and additional section of footpath can be provided north of the proposed relocated accessible car parking spaces in order to link the car park (Works Area 2) and existing hospital entrance.*
- (v) (v) The Applicant is requested to confirm where loading and un-loading of daily service vehicles is to take place from. The Applicant should identify on the plan drawings a suitable set-down location to accommodate day to day servicing of the proposed development. The Applicant is also requested to outline the location of a temporary waste storage area and the temporary set down area for refuse vehicles in order to ensure refuse collection does not impact the operation of the basement car park.*

- (vi) *(vi) Having regard to the increased in vehicular movements at this location the Applicant is requested to contact the Environment and Transportation Department's Transport Advisory Group (TAG) to ascertain if the provision of a controlled pedestrian crossing phase and associated equipment and tactile paving etc. could be accommodated as part of the proposed development.*
2. *The Planning Authority is satisfied with the choice of materials for the building but has concerns regarding the expanse of render at first and second floor given the scale of the building and therefore requests the Applicant to review this aspect of the design to see if further measures could be utilised to alleviate this in some way.*
3. *The Applicant is proposing a gated pedestrian and cycle entrance from Cullenswood Park, which will link the access to the internal footpath and road network. The Applicant is requested to clarify the operating hours of the campus.*

3.2.3. **Second Report (Date)**

Response to Item 1 i)

- The applicant notes in their response that the proposed development was initially assigned the incorrect land use of Hospitals (out-patient facilities) rather than the more comparable land use of Clinic and G.P. Practice for a Primary Care Centre (PCC).
- The Applicant notes that there is 76 no. consulting and treatment rooms proposed within the Primary Care Centre, which would equate to 152 no. car parking spaces as per the Dublin City Development Plan standard of 2 no. car spaces per consulting room for a site within Zone 2.
- The proposed development provides 116 no. car parking spaces. Of the 116 no. spaces, 70 no. are to be allocated to serve patients/visitors, 40 no. allocated for HSE staff who require a vehicle for their work practice and 4 no. car spaces for G.P. staff and 2 no. set down spaces located at basement level.

- The Applicant notes that due to the specific services provided within the Primary Care Centre, several attending patients will not be in a position to travel to the proposed development via public transport, walking or cycling.
- The Applicant notes that travel by car is an essential requirement due to the nature of the proposed development.
- The Applicant outlined that a revised Traffic Impact Assessment or Mobility Management Plan was not required due to no proposed changes to the number of car parking spaces.
- The Applicant confirms that a car parking management system is proposed, which includes the provision of various barriers to control car parking.
- The Applicant has clarified that the 60% of car parking spaces are to be allocated to patients/visitors, with the remaining allocated to staff who require the use of a car to carry out their duties.
- Regarding the proposed car parking allocation and car parking management proposals as well as specific patient requirements, the quantum of car parking is acceptable in this instance.
- The applicant notes in their response that improvements to the cycle parking facilities, namely a secure parking area for 28 no. staff cycle spaces and the provision of 3 no. staff showers, 1 no. drying room and 1 no. W.C. are provided at basement level, adjacent to the staff cycle parking area.
- A total of 10 no. publicly accessible cycle parking spaces are also included within the basement level.
- The Transportation Division notes that the proposed secure staff cycle parking area could facilitate additional cycle parking should demand dictate by using specialist cycle parking systems.

Response to Item 1 ii)

- The Applicant has included a Parking Management Plan (PMP) for the proposed Primary Care Centre and a separate PMP for the existing Royal Hospital Donnybrook development.

- The PMP for the Primary Care Centre site notes the car parking allocation and details the number of staff who require the use of a vehicle to carry out their duties.
- The Applicant notes that approximately 70 no. staff would require a car to carry out their work duties, but due to shift patterns, the allocation of 40 no. spaces will be sufficient.
- The PMP notes that the car park for the Primary Care Centre is to be controlled by barriers and will be operated by taking a ticket or remote fob.
- The overall strategy outlined within the PMP for the Primary Care Centre is acceptable to the Transportation Division.
- Under the proposal, the 82 no. existing car parking spaces currently located on the site of the proposed Primary Care Centre are to be relocated throughout the Royal Hospital campus.
- The PMP for the Royal Hospital Donnybrook outlines the allocation of the total number of existing car parking spaces, 114 no., which serve the hospital's staff and patients/visitors.
- No additional car parking spaces to serve the Royal Hospital Donnybrook are proposed as part of the proposed development.
- The proposed relocated car parking areas will be managed at the entry and exit points with barriers.

Response to Item 1 iii)

- The Applicant notes that the existing campus has good connectivity from Bloomfield Avenue with an additional pedestrian/cyclist link from Cullenswood Park.
- An existing entrance at Bushfield Terrace is restricted to staff and does not currently provide access to members of the public.
- The Applicant proposes to enhance the permeability and connectivity of the site by opening the existing Bushfield Terrace to the public during operating hours of the campus.

- The Transportation Division welcomes the addition of the Bushfield Terrace to complement the existing access at Bloomfield Avenue and the proposed access at Cullenswood Park.

Response to Item 1 iv)

- The Applicant has submitted an updated plan outlining a series of footpaths and pedestrian crossing points which link the various car parking areas and the existing Royal Hospital Donnybrook.
- The updated drawing indicates a more direct pedestrian route between the existing exit on Bloomfield Avenue and the hospital entrance.
- The drawing includes a pedestrian route north of the proposed accessible car parking spaces.

Response to Item 1 v)

- The applicant notes in their response that the internal set down bay adjacent to the Primary Care Centre has been extended to facilitate both ambulances set down and servicing activity, including waste collection.
- The Further Information response notes the location of the temporary waste storage area, which does not impact the adjacent pedestrian footpath.

Response to Item 1 vi)

- The Applicant outlines that due to the relatively low increase in traffic flows through the Morehampton Road/Bloomfield Avenue Junction, which is in the region of a 2 – 4.6% increase, the provision of a controlled pedestrian crossing on Bloomfield Avenue is not required.
- The Applicant liaised with the Transportation Division in relation to the Further Information request, and the submitted FI response is acceptable.
- The Transportation Division are satisfied with the Applicant's response to the further information request.
- The Applicant submitted an Arboriculture review of the site layout changes from Charles McCorkell Arboriculture Consultancy.

- The Arboriculture review notes that the only alteration that had the potential to impact retained trees was the realignment of the pedestrian footpath within Working Areas 04.
- The Arboriculture review notes that the proposed footpath now connects to the existing footpath at a different point and passes through the root protection area of the retained Leyland cypress trees T269 and T270. This footpath will be constructed above ground level using methods of no-dig. This is indicated on both the Landscape Architects and Engineers' amended layouts.

Re. Item No. 2

- The Applicant states they have reviewed the design of the building and consider that this concern relates principally to the South-West elevation that looks over the Quadrangle and faces the existing Hospital complex.
- The Applicant refers the Planning Authority to the 'Architectural Design Rationale' report submitted with the application that sets out their considered approach to addressing massing and materials for the proposed development.
- The Applicant notes that the Architectural Design Rationale explains how the controlled use of brick and changes in plane are used to articulate the building elevations and reduce the visual mass of the building.
- The Applicant states that in considering the concern raised, they determined that to reduce the extent of the render, they needed to increase the extent of the brickwork. However, they don't want to undermine the design rationale but further strengthen it to ensure the coherency of the building design.
- The Applicant, therefore, proposes to extend the two-storey brick projections at each corner of the southwest elevation. The Planning Authority consider this an adequate response to the concerns raised.

Re. Item No. 3

- The Applicant confirms that for the purposes of management of the gated pedestrian and cycle entrances as follows:
 - Monday – Friday: 8am – 8pm Saturday: 8am – 1pm
 - Sunday & Public Holidays: Closed

- The Planning Authority concludes that the proposed new primary health care is acceptable in accordance with the proper planning and sustainable development of the area, and recommended that planning permission is granted subject to conditions.

3.3. Other Technical Reports

Transportation Planning Division: In response to Further Information submitted – No objection subject to conditions. Refer to the Planning Authority’s Second Report for the Division’s response comments to the further information submitted.

Drainage Division: No objection subject to Conditions.

Archaeological Report: No objection subject to Conditions.

3.3.1. Other Departmental Reports

3.3.2. Prescribed Bodies

Health Service Executive (HSE): letter of support submitted with the application detailing the following:

- The HSE intends to enter into an agreement for lease to occupy the building for a period of 25+ years commencing from the date of completion.
- The HSE anticipate being able to begin providing much-needed Primary Health care services.
- There is a shortage of HSE primary care space in the area, and the HSE are seeking to address this by providing a new Primary Care Center in the area.
- The services to be provided by the HSE to public patients from the proposed primary care centre include (both are not limited to) public health and community nursing, physiotherapy, occupational therapy, speech and language therapy, dietetics and counselling.
- The proposal will provide services which will be integrated with the proposed on-site GP service and provide an integrated service to the public all under one roof at this key central location.

- The Donnybrook Primary Care Center has been identified as a hub for the Enhanced Community Care program (ECC) which is an essential component of the HSE National Service Plan 2021.
- The ECC revolves around reducing dependants on the current hospital-centric model of care and supporting capacity building in the community.
- The new Donnybrook Primary Care Center will be one of the first to include a specialist chronic disease hub in response to the requirements of the National Service plan.
- For this reason, the Donnybrook Primary Care Center at the Royal Hospital Donnybrook will be seen as a flagship with an allocation of services within the new building that will support the delivery of primary care by the community healthcare network.

Irish Water: No objection subject to Conditions.

4.0 Planning History

4.1.1. Subject Site

P.A. Ref. 3647/19 Permission GRANTED in 2019 for a change of use at the former Gardener's Cottage (c. 103 sq m) to a G.P. Practice comprising 3 no. consultation rooms, a minor procedures room, nurses' room, patient waiting room, reception, entrance lobby, shower room and toilet facilities (including disabled facilities) and minor ancillary site works.

P.A. Ref. 2027/19 Permission GRANTED in 2019 for a change of use at ground floor level of the Former Nurses Home Building (311 sqm) to a G.P. Practice comprising 5 no. consultation rooms, patient waiting room, reception, entrance lobby, toilets (including disabled facilities), store room, kitchen, boiler room and ancillary site works.

P.A. Ref. 3602/16 and ABP Ref. PL29S.247575 Permission GRANTED in 2017 to erect a single-storey prefab. structure linked to and use of Phoenix Ward all (excluding addiction services) relocated from The Royal City of Dublin Hospital (HSE Baggot Street Hospital).

P.A. Ref. 3724/15 – Permission GRANTED for the construction of a new entry door with access ramp to the Wesley Wing and new service door and concrete platform dock leveller to Hospital stores.

P.A. Ref. 2703/13 and ABP Ref. PL 29S 242783 SPLIT DECISION (PERMISSION & REFUSAL)

Permission GRANTED subject to conditions for the change of use of the former nurse's home building, including alterations and extensions to create a Primary Care Centre, independently accessible pharmacy, additional car parking area with lighting, the demolition of a greenhouse and Pavilion and new ESB substation at Cullenswood Park. Conditions of note include the following:

Condition no.2 (a)

Vehicular access to the site shall be provided from Bloomfield Avenue only and the construction of a new vehicular access at Cullenswood Park together with a 5.5m wide internal access road with a footpath and four metre high lighting, and four number traffic control barriers shall be omitted.

Condition no.4

Pedestrian and cycle access shall be provided at Cullenswood Park, details of which shall be submitted to, and agreed in writing with, the planning authority prior to the commencement of development. The access shall be reduced in width to prevent its use by all traffic other than pedestrians and cyclists. This access shall only be open between the hours of 08.00 and 18.00.

Reason: In the interest of residential amenity, connectivity and the proper planning and sustainable development of the area.

Permission REFUSED for the construction of a new vehicular and pedestrian access at Cullenswood Park together with a 5.5.m wide internal road with a footpath and 4m high lighting, and 4 no. traffic control barriers and the upgrading of part of the existing fire tender access road to a 5.5m wide road with 4m high lighting, landscaping along the boundary to Woodstock Court and Bushfield Place for the following reason:

The reason for refusal was as follows;

Having regard to the established pattern of development in the vicinity, it is considered that proposed development would result in an unacceptable level

of vehicular traffic in Cullenswood Park which would seriously injure the residential amenities of property in the vicinity, would be contrary to the 'Z1' zoning objective for the area, would set an undesirable precedent for similar developments within the city, would by reason of noise, glare and general disturbance PL29S.247575 Inspector's Report Page 6 of 17 seriously injure the residential amenities of the area and would therefore, contrary to the proper planning and sustainable development of the area.

P.A. Ref. 3385/10 Permission GRANTED for the construction of a single-storey seating clinic replacing the existing (but with a g.f.a of 162.85sq.m) to the eastern end of the hospital close to Bushfield Terrace hospital entrance.

P.A. Ref. 2925/10 Permission GRANTED for development which consisted of a new waste management facility, car parking, extending existing perimeter fire access road and ancillary site works to the north west of the site and a new 3 storey goods lift adjacent to ADU ward.

Of note, Condition no. 3 of this permission required the following:

*Bloomfield Avenue only shall be used for any traffic generated by the construction phase. Bushfield Terrace shall not be used for construction traffic.
Reason: In the interests of traffic safety.*

4.1.2. **Surrounding Area**

Saint Mary's College (Protected Structure on adjoining site to the east)

P.A. Ref. 3608/19 and ABP Ref. 307306-20 Permission GRANTED in September 2020 for the extension, alteration and change of use of the premises to a hotel with associated guest facilities, and all associated works.

5.0 **Policy and Context**

5.1. **Development Plan**

Dublin City Council Development Plan 2016-2022 is the statutory plan for the area. The following provisions are considered relevant:

Land Use Zoning: The site is Zoned Z15: Community and Institutional Resource Lands (Education, Recreation, Community, Green Infrastructure and Health). Its zoning objective is 'To protect and provide for institutional and community uses'. (Zoning Map H)

Section 14.8.14 Institutional and Community – Zone Z15: relevant permissible uses on Z15 zoned lands include (inter alia) buildings for the health, safety and welfare of the public; medical and related consultants, and community facilities.

Section 16.13 Medical and Related Consultants and Medical Practices

Section 16.38 Car Parking Standards

The Dublin City Council area is divided into three areas for the purpose of parking control, as shown on Map J. As per Map J, the appeal site is located in Parking Zone 2

Table 16.1 – Maximum Car Parking Standards for Various Land-Uses

Hospitals (Out-patient facilities): Zone 2 - 1 car spaces per 100 sq.m GFA.

Policy MT11: To continue to promote improved permeability for both cyclists and pedestrians in existing urban areas in line with the National Transport Authority's document 'Permeability – a best practice guide'.

Table 16.2 – Cycle Parking Standards for Various Land-Uses

Section 16.39.4 Shower and Changing Facilities

Section 16.39.3 Security

Section 16.39.5 Lockers

5.2. National Policy / Guidelines

Permeability – A Best Practice Guide, National Transport Authority (2015).

Design Manual for Urban Roads and Streets (2019).

Traffic Management Guidelines, Department of Transport (2019).

5.3. Natural Heritage Designations

5.3.1. The nearest Natura 2000 European Sites to the appeal site are as follows:

- The South Dublin Bay and River Tolka Estuary Special Protection Area (Site Code: 004024), approx. 2.7km east of the site.
- The South Dublin Bay Special Area of Conservation (Site Code: 000210), approx. 2.7 km east of the site.

5.4. EIA Screening

- 5.4.1. Having regard to the nature and scale of the proposed development and the nature of the receiving environment, there is no real likelihood of significant effects on the environment arising from the proposed development. The need for environmental impact assessment can, therefore, be excluded at preliminary examination, and a screening determination is not required.

6.0 The Appeal

6.1. Grounds of Appeal

- 6.1.1. A third-party appeal was received from Marston Planning Consultancy representing the third-party appellants Cullenswood Residents of No.10 Cullenswood Park, Ranelagh, Dublin 6. The main grounds of appeal are summarised below;
- The Planning Authority erred in assessing the proposal's impact on the amenities of the surrounding area.
 - The nature of the decision permits unrestricted, public access through Cullenswood Park at all times of the day and night, except between 7 p.m. and 8 a.m., when access is restricted to fob-only entry.
 - The proposal will negatively impact the residential and environmental amenities of Cullenswood Park residents.
 - The proposed access will create a conflict between vehicular traffic, pedestrians, and cyclists.
 - The proposal will result in on-street parking spaces used by the hospital and primary care centre employees and visitors.

- The proposal would create the potential for antisocial behaviour.
- The proposed new pedestrian and cycle access to Cullenswood Park provides no discernible benefit in terms of permeability.
- The proposed entrance is not visible from Ranelagh Road, making it undesirable as an access point.
- Due to the need for signposts, the proposal will attract automobile traffic, whether for dropping off visitors or parking.
- The highly restricted access from Ranelagh Road will inevitably result in traffic congestion, forcing cars to reverse onto the public road and, at the very least, blocking the bicycle lane along Ranelagh Road, creating a traffic hazard.
- The Board is referred to an alternative access point from Leeson Park Avenue that provides a more direct route from the proposed Primary Care Centre to Ranelagh's town centre and LUAS stop. This access point/ entrance gate (currently closed) is visible from Appian Way and would be visible from the proposed quadrangle garden serving the Primary Care Centre.
- Neither the Applicant nor the Planning Authority mention or reference this access point in their evaluation of the application.
- The proposal is contrary to the zoning objective for Cullenswood Park and would be contrary to the proper planning and sustainable development of the area.
- There is currently no pedestrian cyclist or vehicle access to the site from Cullenswood Park.
- Cullenswood Park is 180 metres from Ranelagh Road and divided into two distinct character areas.
- The first 100 metres comprise infill and other houses, with pay and display resident parking on either side.
- There are several bike parking stands that have narrowed the road to a single lane just off Ranelagh Road due to the availability of on-street car parking on the opposite side of the road.
- The road then divides, with vehicular access into the 'Cullenswood' sheltered housing complex.

- The second section of the road is formed by a terrace of 12 no. red brick houses on the southern side of Cullenswood Park that faces the hospital campus and are also adjacent to the proposed new hospital entrance.
- There is pay and display parking for residents on both sides of this road, with a turning area at the end adjacent to the proposed pedestrian and cycle entrance. This section of the road is quiet and has a high level of residential amenity.
- The land adjacent to this section of Cullenswood Park within the hospital campus contains a substation on the boundary as well as a number of other small structures, including two portacabins, a polytunnel, and a single-storey building.
- There are numerous mature trees inside the site boundary adjoining Cullenswood Park and along the street itself.
- The application is light on detail on the existing car parking available within the site.
- In 2013, the Planning Authority issued a split decision granting the majority of works but refused the proposed vehicular access to the hospital campus from Cullenswood Park on two grounds.
- The Board's Inspector recognised the quiet residential nature of the cul-de-sac facing the hospital campus.
- Condition No. 4 of the decision required that the access from Cullenswood Park be restricted to pedestrian and bicycle access and that the access be restricted to between the hours of 8 am and 6 pm.
- This condition made it clear that the proposed pedestrian and cyclist access would be at the northern end of Cullenswood Park and would be heavily controlled.
- The applicant has failed to recognise the sensitive residential amenity of Cullenswood Park in accordance with the site's zoning objective and the position of the previously unimplemented permitted access.
- The proposed access from Cullenswood Park is poorly conceived and will significantly reduce the residential amenity along this peaceful residential street.
- The Appellant provides an analysis of comparable pedestrian routes from the proposed Primary Care Centre to the Ranelagh Luas Stop. The shortest of these is

the 'white route', with a distance of 930m via Cullenswood Park. The second shortest route is the yellow route, with a distance of 940m via Leeson Park Avenue.

- While precedent has been set from the 2013 permission for pedestrian/cycle access to the hospital campus via Cullenswood Park, the approved access was at a different location than currently proposed.
- The function of any such access should be to facilitate improved access to as wide a population as possible.
- The Royal Hospital Donnybrook is not a local hospital serving the local population but a specialist hospital providing rehabilitation, respite, and residential care and serving as a teaching hospital for UCD.
- The Royal Hospital Donnybrook does not serve a local population but rather a much larger catchment area that relies on public or private transportation to reach the campus.
- The proposed Primary Care Centre has a different function and is aimed at serving the wider Donnybrook and Ranelagh area.
- The sole reason for the proposed pedestrian/ cyclist access is to link with Ranelagh village.
- A review of the land uses reveals that the best access to shops and public transportation is via Leeson Park Avenue, where there is an existing gate that, if opened, would also make the existing amenity space accessible to the local population to the north.
- The entrance at Leeson Park Avenue would provide greater benefits than the ill-conceived location of the proposed pedestrian/cyclist access through the end of Cullenswood Park and its convoluted access to the Primary Care Centre.
- The convoluted nature of the access materially increases the potential for antisocial activity adjacent to the proposed entrance, to the detriment of the area's local residential amenity.
- The Board is referred to five key considerations under the Urban Design Compendium (English Partnership) for achieving a more attractive pedestrian environment that this application clearly fails to address.

Connections - Cullenswood Park does not readily connect the places users of the new development would want to go, e.g. shops and public transport.

Convenience – The route to the proposal along Leeson Park Avenue offers the most direct route with minimal road crossings to the Ranelagh triangle and LUAS stop.

Convivial – The route along Leeson Park Avenue is the most attractive, well-lit and safe route.

Comfortable – When compared to other entrances, the proposed entrance is tucked away and not visible from the entrance to the Primary Care Centre, and its need to go around the existing hospital makes it a highly uncomfortable route in terms of encouraging permeability.

Conspicuousness – The route to Cullenswood Park is not conspicuous, whilst the route via Leeson Park Avenue and Bushfield Terrace is clear and easy to follow.

- The proposed public access at the end of Cullenswood Park will result in on-street parking by residents and visitors of the new development along Cullenswood Park and neighbouring streets.
- Local residents will be forced to park their cars on adjacent streets, thus reducing the safety of their vehicles and the value of their property.
- The existing parking situation along Cullenswood Park is cramped, particularly along the single-lane part of Cullenswood Park closest to Ranelagh Road. This will inevitably result in traffic movements to the end of the cul de sac for dropping staff and visitors off at the hospital and Primary Care Centre.
- The proposed access will create a traffic hazard and negatively impact the residential amenity of this part of Cullenswood Park.
- The potential traffic hazard is exacerbated by residents of the sheltered housing scheme using Cullenswood Park road on their mobility scooters, which, combined with increased use of the cul-de-sac, will create a clear traffic hazard and conflict.
- While it is recognised that Cullenswood Park provides a more direct route to the Ranelagh Road bus stop, this only serves intermittent bus services that connect via route nos. 11, 44, and 61.

- Route No. 11 connects to Chelmsford Road and Appian Way via Leeson Park Avenue. This is a more direct route to this bus service than via Cullenswood Park.
- Bloomfield Avenue connects to the quality bus corridor served by the Dublin Bus Nos. 135 and 46A, which provides a high-quality bus service connecting the city centre and the south of the city in a shorter walk.
- The proposed Cullenswood Park entrance would not provide improved access to public transport.
- Leeson Park Avenue has an existing pedestrian gate into the hospital campus that, while currently locked, provides an excellent opportunity to open up a link and improve permeability from the proposed Primary Care Center into the surrounding neighbourhood.
- The link at Leeson Park Avenue provides an opportunity to open up the amenity space in this corner of the hospital campus to the general public. The access via Cullenswood Park wood Park provides no such planning benefit.
- Leeson Park Avenue has no turning points that would encourage its use as a vehicle or drop-off point for access to the hospital campus.
- The Leeson Park Avenue access point would be more acceptable because it is visible from both the proposed development and the main road leading to it.
- The proposed access would create a traffic hazard and result in poor traffic movements and congestion along Cullenswood Park.
- The availability of a turning area at the end of Cullenswood Park cul-de-sac would encourage the proposed entrance to be used both for drop-off and short term parking.
- The access at Bushfield Terrace is only for service vehicles and does not allow for cars to turn at this end. This will put additional pressure on Cullenswood Park due to its greater attractiveness as a drop off point due to the ability of cars to turn at the end of the cul-de-sac.
- The proposed pedestrian/cycle access at the end of Cullenswood Park would materially diminish the residential amenity of this quiet residential cul de sac and would be contrary to the zoning objective for the area.

6.2. Applicant Response

The Applicant, Axis Health Care Assets Ltd., responded to the grounds of appeal with reports / documents from the following;

- Town & Country Planning and Development Consultants,
- O'Connor Sutton Cronin Consulting Engineers,
- Quinn Architects,
- Health Service Executive,
- Royal Hospital Donnybrook.

Issues raised in these reports are summarised below accordingly.

6.2.1. Town & Country Planning and Development Consultants

The response received from Town & Country Resources Ltd. on behalf of the Applicant, Axis Health Care Assets Ltd. is summarised as follows;

- The third-party appeal fails to present any material land-use planning issue or argument as to why the proposed development would be contrary to the proper planning and development of the area, including the preservation of the amenities thereof.
- The need for a Primary Care Centre (PCC) for the Donnybrook area has long been identified by the HSE and acknowledged by Dublin City Council.
- The development of a national Primary Care Centre network is a fundamental pillar of the Government's healthcare reform strategy and National Service Plan.
- The proposed PCC will be a high-quality healthcare facility focusing on the needs of the local communities while supporting the regional and national healthcare infrastructure.
- The location of the facility within the RHD Campus intensifies and strengthens the existing medical services that have been provided by the hospital to the community since the 18th century.
- The proposed facility will be operated by the HSE and will provide the following services:

- HSE Primary Care Services (including G.P., Nursing, Occupational Therapy & Physiotherapy, Speech & Language Therapy, Psychology, Dietetics, Social Work, Counselling).
 - Chronic Disease Management Hub, Diabetes, Respiratory and Cardiac services,
 - Older person services,
 - Community Diagnostics (including X-Ray, ultrasound, ECG, Spirometry, and Phlebotomy).
 - Mental Health Community Services
 - Dental Services
 - Ambulance set down space for one vehicle.
- The proposal will provide an independently accessible retail pharmacy, ancillary office accommodation, staff facilities, building facilities and storage.
 - It is anticipated that the overall facility will require approx. 100 employees, including medical and administrative staff.
 - It is not anticipated that all employees will work in the care centre at any one time as various teams will work off-site.
 - The Primary Care Centre services will typically operate Monday-Saturday 8 am-8 pm, with all consultations by appointment only.
 - Sunday services are not anticipated but may occasionally be required to facilitate patients' needs.
 - The HSE confirms that the service requirements for the proposed development are informed by lessons learned with similar Primary Care Centre developments in terms of floor area requirements to accommodate the range of services required.
 - A letter of support prepared by the Health Services Executive Estates Office dated 7th April 2021, was included with the planning application. Comments therein provided.
 - The nature and extent of the new pedestrian and cycle link, which is to include entrance piers and a gate, new steps and ramp to connect to the existing internal

path and road network within the Royal Hospital, is appropriate and necessary to ensure good permeability of the RHD Campus.

- The principle of a pedestrian and cycle link to the RHD Campus at Cullenswood Park has already been accepted by An Bord Pleanála. The Board is referred to the previously granted permission for a primary care centre development at RHD, under P.A. Ref. 2703/13 and ABP Ref. PL 29S.242783.
- In permitting the Primary Care Centre proposed at that time, An Bord Pleanála refused permission for a vehicular link to the campus via Cullenswood Park but approved a pedestrian and cycle link at that location.
- As the development permitted under ABP Ref. PL 29S.242783 was never implemented, the link at Cullenswood Park did not materialise.
- The Board's decision in 2013, following rigorous and detailed scrutiny of all of the salient planning issues, including concerns raised by the residents of Cullenswood Park on appeal, is a relevant and important precedent on the principle of the issue now arising.
- The Board is requested to acknowledge that precedent and to now similarly find that the link proposed in the current application is appropriate and important in encouraging sustainable travel modes and in the interests of permeability.
- The Board is referred to the Dublin City Council Transportation Planning Division's Report dated 13th July 2021 which notes that *'the proposed pedestrian and cyclist access from Cullenswood Park will improve permeability of the site and provide a shorter pedestrian route, approximately 10 minutes to Ranelagh and the Luas station for visitors and staff if implemented'*.
- The Board is referred to the Planning Officer's report, which states that *'The Planning Authority consider this a reasonable proposal given the facilities proposed within the new Primary Care Centre and the access that can be provided for the residents within the Dublin 6 area. It is not considered that the concerns raised by third parties should require the omission of this link and the positive benefit it will provide to the area, to provide for increased permeability'*.
- In the subsequent Request for Further Information on the planning application, the Planning Authority noted in Item 1(iii): *'While the proposed pedestrian/cycle link*

from Cullenswood is welcomed as it will provide additional permeability and more direct connectivity to public transport, the applicant is requested to investigate the potential to provide additional pedestrian/cycle access points from the surrounding street network.'

- *In response, the Applicant stated that 'In consideration of this request, it is proposed to further enhance permeability and connectivity by providing pedestrian and cycle access at the Bushfield Terrace entrance in line with the proposals for the Cullenswood Park entrance, meaning it will be open to public access during operating hours of the campus. This will result in pedestrian and cycle access on three separate campus boundaries.'*
- *In response, the Planning Authority report stated how 'The applicant notes that the existing campus has good connectivity from Bloomfield Avenue with an additional pedestrian/cyclist link from Cullenswood Park. An existing entrance at Bushfield Terrace is restricted to staff and does not currently provide access to members of the public. The applicant proposes to enhance the permeability and connectivity of the site by opening the existing Bushfield Terrace to the public during operating hours of the campus. The addition of the Bushfield Terrace entrance to complement the existing access at Bloomfield Avenue as well as the proposed access at Cullenswood Park is welcomed by this division'.*
- *Summary provided of the report prepared by OCSC Consulting Engineers, which specifically addresses the grounds of appeal, including;*
 - *Cullenswood Park is in the charge of Dublin City Council, making it a public road that is entitled to be used by the general public. It is a good quality link with public lighting in place, making it an attractive and safe route.*
 - *The planning application has developed and clearly outlined a parking strategy for the overall campus which takes into account the needs of patients, visitors and staff and negates the potential for off-site or drop off/collection at locations such as Cullenswood Park.*
 - *The use of Cullenswood Park for off-site parking by staff or visitors will carry a higher cost and has time limitations on when it may be used, and will not be considered a realistic alternative to the proposed on-campus parking to serve the hospital and Primary Care Centre*

- The report prepared by Quinn Architects outlines a considered submission on the issue of the location of the proposed link on Cullenswood Park, by comparison with the position of the link as permitted under P.A. Ref. 2703/13 and ABP Ref. PL 29S.242783.
- There are clear and material benefits to the positioning of the current proposed link when compared with the 2013 proposal, including reduced impacts on mature trees and existing structures in use for the benefit of patients and residents of the Hospital; and shorter distancing and the potential for clearer wayfinding for visitors to the campus via Cullenswood Park.
- The proposal presents the optimal design solution for the site with regard to the established pattern of development in the area.
- The proposal will deliver an energy-efficient, contemporary building of architectural merit and distinction.
- The aim of the new building is to provide essential medical infrastructure while also intensifying and strengthening the existing medical use at the RHD Campus.
- The proposed development will enhance the character and physical environment of the RHD Campus through the quality of its design.
- The proposed development allows for appropriate and sufficient car parking facilities within the campus to negate the potential for overspill parking or drop-off/collection in areas remote from the hospital and proposed Primary Care Centre.
- The proposal is in line with a previously approved entrance at this location with only a minor difference in location that is considered negligible.

6.2.2. **O'Connor Sutton Cronin Consulting Engineers**

The response received from O'Connor Sutton Cronin Consulting Engineers on behalf of the Applicant, Axis Health Care Assets Ltd. is summarised as follows;

- Cullenswood Park pedestrian and cycle entrance was requested to be included by Dublin City Council Transportation Planners at a pre-planning meeting regarding the project.

- The overall purpose of the entrance is to facilitate general permeability through the lands to the benefit of the wider community, the existing hospital and the proposed Primary Care Center.
- The proposed entrance is not solely proposed to facilitate access to the nearby Luas station, as indicated in the appeal submission, but rather to encourage and facilitate those seeking to travel from the local area to and through the campus by more sustainable means.
- The proposed entrance would complement existing entrances on Bushfield Terrace and Bloomfield Ave, which facilitate access from the north and east, respectively and is in line with clear pedestrian desire lines from nearby locations, including portions of Ranelagh and Rathmines,
- The proposed Cullenswood Park entrance represents the shortest travel distance to the Ranelagh and Beechwood Luas stops.
- The appeal submission acknowledges that the proposed Cullenswood Park entrance is the most direct route to the local bus services not facilitated by the existing campus entrances.
- Cullenswood Park is in the charge of Dublin City Council, making it a public road that is entitled to be used by the general public.
- Cullenswood Park is a good quality link with public lighting in place making it an attractive and safe route.
- The proposal is in line with a similar proposed entrance on Cullenswood Park under a previous application for a Primary Care Center development at the site.
- While the previously permitted entrance was initially proposed to facilitate vehicular traffic as well as pedestrians and cyclists, it was conditioned by Dublin City Council to be amended to pedestrian and cycle access only (P.A. Ref. 2706/13 and ABP Ref. 29S.242783). An Bord Pleanála subsequently upheld this in response to a similar third-party appeal lodged.
- The location of the approved entrance was approximately 30 metres west of the currently proposed entrance, a difference which is considered to be negligible in terms of its potential impact on Cullenswood Park and its residents.

- The Board also included a condition that the access be open between the hours of 8:00 AM and 6:00 PM. This is in line with the current proposal to have the entrance open between 8:00 AM and 7:00 PM so that permeability is maximized to the benefit of the wider community.
- Access outside these hours would be limited to staff only to maximize accessibility by sustainable modes of workers. Associated movements during these times would be very low as they are limited to pedestrians and cyclists.
- Associated impact on Cullenswood Park residents would be negligible particularly in terms of noise.
- The appeal states that the proposed entrance will need to be facilitated by signposts which will encourage car based traffic. However, the application includes no proposals for signposts or any signage outside of the hospital campus.
- The appeal notes the proposed entrance will be seen as an attractive location for drop-off/collection. However, the nature of the existing hospital and the proposed Primary Care Center must be considered in this regard.
- Both uses had a specific Parking Management Plan submitted as part of the planning application, which clearly sets out a significant allocation of parking for patients and visitors based on the existing and estimated demand at the campus.
- It has been demonstrated that the existing/ proposed development would be adequately catered for within the campus, meaning there would be no need for drop-off/collection outside the site.
- Consideration must be given to the nature of the patients that will be facilitated at the campus.
- The proposed Primary Care Centre will generally serve patients who have limited mobility, including stroke rehabilitation and physiotherapy. It is not logical to consider that such patients would choose to be dropped off outside of the campus and have to walk when sufficient allowance is made for such activity within the site.
- The existing hospital has a significant number of its patients being treated for general and specialist rehabilitation and residential care, many of which are long-term patients based at the hospital, further reducing the need to travel.

- All car parking along Cullenswood Park is pay and display and permit only.
- Permits would not be issued to staff, patients or visitors at the hospital, meaning they would have to pay an hourly charge.
- Cullenswood Park is located in the high demand zone as defined by Dublin City Council, which carries a higher cost than other areas across the city, while the use of pay and display parking in Dublin City also has an associated maximum duration of three hours.
- The use of off-site parking, which is more remote from the hospital and the proposed Primary Care Center, will carry a higher cost and has limitations on when it may be used, which will not be considered a realistic alternative to the proposed on-campus parking to serve the hospital and Primary Care Center.
- The planning application has developed and clearly outlined a parking strategy for the overall campus that considers the needs of patients, visitors and staff and negates the potential for off-site parking or drop-off collection at locations such as Cullenswood Park.
- The potential for the creation of a traffic hazard, as outlined in the appeal submission, is negligible.

6.2.3. **Quinn Architects**

The response received from O'Connor Sutton Cronin Consulting Engineers on behalf of the Applicant, Axis Health Care Assets Ltd. is summarised as follows;

- The access point from Cullenswood Park to the Royal Donnybrook Hospital Campus is immediately to the east of the existing ESB Sub-Station.
- Under P.A. Ref. 2703/13 and ABP Ref. PL 29S.242783, An Bord Pleanála directed that the use of the proposed new entrance should be limited to pedestrians and cyclists.
- As the overall development did not proceed, a revised design for the proposed entrance to the Royal Donnybrook Hospital Campus from Cullenswood Park was not developed.

- Site Layout Plan image submitted of the pedestrian/cycle entrance permitted under P.A. Ref. 2703/13 and ABP Ref. PL 29S.242783.
- Under the subject application, the proposed pedestrian & cycle entrance is a more modest intervention.
- In consultation with the Management of the Royal Donnybrook Hospital, the Applicants decided to locate the access point at the end of Cullenswood Park.
- The considerations that informed that decision were as follows:
 - *Minimising Impact* - by locating the access point at the end of Cullenswood Park, the Applicants are able to leave the area generally intact the existing polytunnel used as a gardening and amenity space for patients and residents.
 - *Separation of Public & Private* - the location of the proposed pedestrian & cycle entrance separates it from the existing recreation areas used by patients and residents. The positioning of the proposed access point significantly reduces the crossover between patients and residents on the one hand and those using the proposed Cullenswood Park entrance on the other.
 - *Clear Wayfinding* - The purpose of the proposed pedestrian & cycle entrance is to facilitate access to the public entrance of the Royal Donnybrook Hospital and to the entrance of the proposed Primary Care Centre, as well as to promote greater connectivity to the other public roads adjacent to the Campus.
- The location at the foot of the steps and ramp as currently proposed is at a location on the Campus close to the Southernmost corner of the Hospital building with the internal road leading clearly in the direction towards the front of the buildings. This promotes clear wayfinding.
- For those using the proposed pedestrian & cycle entrance to exit the Campus, the location of the steps and ramp are immediately visible on rounding the corner of the Hospital building.
- *Shortest Distance* - The distance from the boundary wall to the existing internal road network at the access point approved in 2013 is c. 29 metres. The distance from the Boundary Wall to the existing internal road network at the current Access Point is c. 10 metres.

- The distance from the site boundary to the edge of the internal road that runs around the existing Hospital buildings is significantly shorter at the location of the proposed Pedestrian & Cycle Entrance than at any other point in this area.

6.2.4. **Health Service Executive (HSE)**

A letter was received from the Health Service Executive. Comments are summarised as follows;

- The Board is referred to the HSE's submission with the application, which sets out the HSE's position regarding the proposed development.
- The Enhanced Community Care programme (ECC) is a central component of the HSE National Service Plan 2021.
- Primary care infrastructure is the most critical infrastructure component of the ECC programme. The proposed Primary Care Centre at the Royal Hospital Donnybrook would be one of the first Primary Care Centres in Ireland to include a comprehensive range of community diagnostic services in line with the ECC programme.
- The proposed Donnybrook Primary Care Centre is a flagship Primary Care Centre, with an allocation of services within the new building that will support the delivery of primary care to the residents of Donnybrook and Ranelagh, in direct response to the requirements of enhanced community care.
- The HSE submits that the proposed link on Cullenswood Park will encourage and facilitate those seeking to travel from the local area to the new Primary Care facility by sustainable means.
- The HSE requests An Bord Pleanála to grant permission for the proposed development, which will deliver essential medical infrastructure, and which is urgently required to serve the Donnybrook and Ranelagh area.

6.2.5. **Royal Hospital Donnybrook**

6.2.6. A letter of support was received from the Royal Hospital Donnybrook (RHD), reaffirming its commitment to the proposed Primary Care Centre and full support for the proposed development. Regarding the grounds of appeal, RHD affirms that the

proposed access from Cullenswood Park would be limited to pedestrians, wheelchair users and cyclists. Furthermore, the use of the access point will be controlled in terms of hours and access rights, as detailed in the further information response. The RHD submit some of the benefits of the proposed location, as follows;

- The location provides the shortest travel path for residents and users accessing the proposed Primary Care Centre from the Ranelagh area, including the Beechwood Luas station. The location of the proposal offers convenience and reduces unnecessary travel time for staff and visitors, thereby encouraging sustainable travel.
- The proposed location ensures the existing facilities for hospital patients and residents within the campus are unaffected. These amenities include an outdoor residence seating area and a polytunnel for resident activities including a sheltered gardening to the northeast of the proposed entrance. These amenities act as a valuable breathing and activity space for patients and residents, and would have to be removed or relocated if the access point and pedestrian cycle path is relocated as suggested by the appellants. It is considered more appropriate to direct cyclists, in particular away from this zone.
- The proposed ramp and footpath within the RHD side of the access connects well to the existing internal pedestrian routes and ring road around the main hospital building, providing a clear direct route to the proposed primary care centre and other facilities on site.
- The location of the proposal avoids impact on other structures in place such as an ESB substation.
- The location of the proposed access point allows the maximum preservation of existing mature soft landscaping, foliage and trees near the perimeter wall.
- It is not considered the proposal would alter the character of Cullenswood Park or impact residential amenities.

6.3. Planning Authority Response

None

6.4. **Observations**

None

6.5. **Further Responses**

None

7.0 **Assessment**

7.1.1. I have reviewed the proposed development and the correspondence on the file. I note the Planning Authority was satisfied that the proposed development accords with the policies and objectives of the Dublin City Council Development Plan 2016-2022. Having examined the application details and all other documentation on file, I consider that the main issues in this appeal are those raised in the grounds of appeal, and I am satisfied that no other substantive issues arise. The issues are addressed under the following headings:

- Traffic and Parking
- Pedestrian & Cycle Access
- Appropriate Assessment

These issues are addressed below.

7.2. **Traffic and Parking**

7.2.1. The appellants object to the proposed development on the grounds that the proposed access to the site at the end of Cullenswood Park would;

- Create a conflict between vehicular traffic, pedestrians and cyclists along Cullenswood Park.
- Create traffic congestion and result in poor traffic movements along Cullenswood Park, creating a traffic hazard.
- The availability of a turning area at the end of Cullenswood Park cul-de-sac would attract vehicular traffic and encourage the proposed entrance to be used as a drop-off point for staff and visitors.

- Result in on-street parking along Cullenswood Park and neighbouring streets by staff and visitors to the hospital and Primary Care Centre.
- Local residents will be forced to park their cars on adjacent streets, thus reducing the safety of their vehicles and the value of their property.
- Because of the highly restricted vehicular access from Ranelagh Road, the proposed entrance at the end of Cullenswood Park would cause traffic congestion and create a hazard by forcing cars to reverse out onto the public road and blocking the bicycle lane along Ranelagh Road.
- The potential traffic hazard would be exacerbated by the residents of Cullenswood sheltered housing scheme using Cullenswood Park road on their mobility scooters, which, combined with increased use of the cul-de-sac, would create a traffic hazard.
- The current access at the end of Bushfield Terrace is restricted to service vehicles and does not permit cars to turn at this location. The ability of cars to turn at the end of Cullenswood Park cul-de-sac will increase the desirability of Cullenswood Park as a drop-off location, resulting in increased pressure on the street.

7.2.2. The Applicant contests these grounds of appeal, as detailed in Section 6.2 above.

7.2.3. In response to the Further Information requested by the Planning Authority, the Applicant submitted a separate Parking Management Plan for the proposed Primary Care Centre and the existing Royal Hospital Donnybrook. Details contained in these Parking Management Plans are summarised under the headings below accordingly.

7.2.4. Proposed Primary Care Centre

- The Primary Care Centre (PCC) and associated parking will be managed independently of the Royal Hospital Donnybrook and is considered separately under its own Parking Management Plan.
- The PCC will be served by a basement-level car park which will house all associated car parking.
- This will be facilitated by a single barrier-controlled access point linking back to the main internal campus road near its Bloomfield Avenue entrance.

- Vehicular access to the proposed PCC will be solely from the existing campus entrance on Bloomfield Avenue.
- The majority of the proposed development will be occupied by Health Service Executive (HSE) staff, utilising approximately 88% of the PCC floorspace. The remainder of the space comprises a GP Practice and pharmacy.
- In total, the PCC includes 76 no. consulting and treatment rooms, many of which have the potential to cater to multiple patients simultaneously.
- The Donnybrook PCC will accommodate the Enhanced Community Care service model as part of the "Slaintecare" policy. A key component of the PCC's operation will be staff based there travelling out into the community to meet the needs of patients in their homes.
- This type of service will require staff to use a vehicle as part of their work practice. Using other forms of transport would be considerably less efficient, to the detriment of the patients being served. In addition, it would present difficulties concerning the movement of necessary equipment and materials.
- The PCC will provide a wide variety of services, including stroke rehabilitation, community diagnostics, community nursing and wound care, physiotherapy, occupational therapy, speech and language therapy, dental, community mental health services, general GP services and paediatric care.
- Patients associated with a number of the above services, including stroke rehabilitation, physiotherapy, wound care etc., will not be in a position to travel by foot, bicycle or public transport.
- Travel by car is an essential requirement due to the sensitive nature of the proposed development and the essential services which will operate from it.
- The proposal will provide 116 no. car parking spaces proposed to serve the PCC. This will provide for the following:
 - 70 no. patient/visitor car parking spaces
 - 40 no. HSE staff car parking spaces.
 - 4 no. GP staff spaces.

- The 76 no. consulting and treatment rooms will result in a notable number of patients per day. Many of these rooms will be used multiple times on a daily and even hourly basis, and there will be an invariable overlap in patients arriving and departing the site at times. However, the related use will be spread across the course of the day, meaning any associated trip generation will not be focused on peak A.M. and P.M. traffic times traditionally associated with normal commuting activity.
- The HSE have confirmed the following requirements with respect to staff needing a vehicle to carry out their essential daily work activity
 - Community Nurses - 30 no.
 - Occupational Therapists - 10 no.
 - Physiotherapists - 10 no.
 - Other Clinical Staff (Visiting Consultants, Social Workers, Speech and Language Therapists etc.) - 20 no.
- The above equates to 70 no. staff requiring a vehicle for essential medical-related work purposes. However, just 40 no. spaces are proposed with the 70 no. personnel to be accommodated through a strict management regime which the HSE has confirmed is feasible and appropriate. This will include spreading such activity across the day and alternating shift times to reduce the on-site demand at any one time.
- No HSE staff member who does not require the use of a vehicle for work purposes will be allocated the use of a staff parking space.
- GPs are occasionally required to make house calls which require the use of a vehicle and cannot reasonably be accommodated by alternative modes of transport.
- A set of barriers will control entry and exit to the car park. These barriers will incorporate a ticket distribution/collection system to facilitate access by the general public and a fob or similar recognition system to allow access for authorised staff who have been allocated the use of a parking space.

- Authorised staff who have been allocated use of a staff parking space will be issued with a fob or similar means of facilitating access through the entry and exit barriers.
- Staff parking in the basement will be further segregated by a second set of barriers within the car park which permit access by fob or similar control measure only. This will allow for easier ongoing control and management of spaces.
- Wayfinding and other appropriate signage will be provided throughout the car park to guide users to their respective parking areas and prevent any unauthorised usage of spaces.
- Regular audits will be undertaken to ensure the appropriate use of car parking.

7.2.5. Existing Royal Donnybrook Hospital

- The proposal seeks to relocate a number of the existing car parking spaces that currently serve the Royal Hospital Donnybrook (RHD) to a number of different locations across the hospital campus. This will facilitate the construction of the proposed Primary Care Centre.
- Each car park is linked to the respective hospital entrances via footpaths with dropped kerbs and tactile paving crossings provided at appropriate locations.
- There are 2 no. entrances to the campus, via Bloomfield Avenue and Bushfield Terrace.
- The Bloomfield Avenue entrance is the main entrance and facilitates both staff and visitor/patient traffic.
- Bushfield Terrace is limited secondary access open to staff as access only for a short period each morning.
- The hospital offers a wide variety of services requiring an extensive workforce to meet the varying medical and care needs on a continual and 24-hour basis. Services offered include short-term post-acute rehabilitative care, general rehabilitation, specialist stroke rehabilitation, specialist neurorehabilitation, day hospital, respite, residential care, teaching hospital and GP services.
- Key staff numbers at the hospital include the following:
 - 168 no. nurses and care assistants;

- 13 doctors;
- 50 additional health and social care professional staff (physics, occupational therapists, speech and language therapists, dietetics etc.);
- Over 60 support staff (catering, household, cleaning, porters etc.)
- 19 management staff
- 15 additional support staff (pastoral care staff, volunteers, activity staff etc.)
- On a typical weekday, there would be a peak of over 240 staff on-site at any given time throughout the day, with a peak of approximately 130 at weekends.
- In terms of patients and associated visitors, the hospital caters to a very wide catchment and is linked with St. Vincent's University Hospital, with staff regularly travelling between the two as part of their work practice.
- The distances to be travelled by patients can be notable in many instances and, given the nature of the illnesses in question for many, alternative travel options to private car use are limited.
- In total, there are 114 no. spaces to serve the Royal Hospital Donnybrook.
- The allocation of this car parking has been based on a first principles assessment of demand, considering critical factors including the needs of patients and staff working arrangements/requirements.
- The allocation of car parking provides for the following;
 - Patient/Visitor - 50 no. Spaces
 - Nursing/Care Assistants - 35 no. spaces
 - Doctors - 10 no. Spaces
 - Catering - 5 no. Spaces
 - Household staff - 5 no. Spaces
 - Additional Health and Social Care Professional Staff - 6 no. Spaces
 - Management & Administration - 2 no. spaces
 - Additional Service Providers - 1 no. Space

- The management of the RHD car parking is to be based on a system of car park barriers, signage & delineation and ongoing enforcement.
- 5 no. barriers will be provided, strictly controlling access to all car parking associated with the RHD.
- The existing barrier at the hospital entrance is to be removed as it will no longer be required.
- In order to prevent any unauthorised parking in the areas not controlled by the aforementioned barrier systems, it is proposed to put in place double yellow lines along the main internal road to demonstrate to all motorists that parking outside of designated areas is not permitted.
- Wayfinding signage will be provided to identify the routes to the respective car parking areas and types so visitors and staff will understand where to go.

7.2.6. The Applicant has submitted a Mobility Management Plan for the site and proposed development during its operational and construction stages. Details are provided of existing public transport and cycle & pedestrian facilities in the vicinity. This includes details of bus routes and their frequency, Luas and rail and their operating hours /frequency, pedestrian and cycle routes, bike schemes and their stations, Bus Connects routes and their expected frequency, the proposed Metrolink at Charlemont (Ranelagh), DART stations and the Greater Dublin Area Cycle Network Plan proposed facilities in the vicinity. The Mobility Management Plan sets out key objectives with regards parking provision, promotion of public transport and cycle/walking. Taking into account the proposed parking provision and the high level of public transport, cycle & pedestrian infrastructure locally, the Mobility Management Plan provides preliminary modal split targets for the operational stage of the proposal as follows; On Foot (15%), Bicycle (10%), Public Transport (35%), Car Driver (35%), Car Passenger (5%). A Mobility Manager/Travel Coordinator will be appointed at the development for both the construction and operational stages to implement the mobility management plan, the promotion of public transport use, and the promotion of cycle/pedestrian facilities.

7.2.7. The Traffic Impact Assessment (TIA) provides an assessment of the potential traffic impact on the operations of the local road network during its construction and operation. Of particular relevance to the grounds of appeal is its assessment of the potential for overspill parking. The TIA details how both Cullenswood Park and

Bloomfield Avenue contain pay & display/permit parking which is primarily considered to serve the local residents in these locations and not intended to facilitate parking at the hospital. Despite this, they remain publicly accessible and are open to use, subject to payment. The TIA notes that in the context of the proposed Primary Care Centre, insufficient on-site parking will potentially make these parking areas a more viable alternative, particularly for short-term appointments. The TIA notes that Bushfield Terrace currently has no parking controls in place which would present a risk of overspill parking in this area should appropriate on-site parking not be provided.

7.2.8. The Planning Authority, in its assessment, considered the proposed quantum of car parking serving the existing hospital and the proposed Primary Care Centre acceptable in this instance. Regarding bicycle parking, the Council's Transportation Division noted that the proposed secure staff cycle parking area could facilitate additional cycle parking should demand dictate by using specialist cycle parking systems. The proposed Parking Management Plans (PMPs) for the proposed Primary Care Centre and the existing Royal Hospital Donnybrook were deemed acceptable to the Council's Transportation Division.

7.2.9. Regarding Parking, the Dublin City Council area is divided into three areas for the purpose of parking control, as shown on Map J of the Dublin City Council Development Plan 2016-2022. As per Map J, the appeal site is located in Parking Zone 2. Table 16.1 of the Development Plan refers to 'Maximum Car Parking Standards for Various Land-Uses' and requires the following:

Hospitals (Out-patient facilities): Zone 2 - 1 car spaces per 100 sq.m GFA.

Clinics and Group Practices: Zone 2- 2 per consulting room.

Under the subject appeal, it is considered that the nature of the Primary Care Centre accords with the Clinics and Group Practices category. As detailed above, the proposal provides 76 no. consulting and treatment rooms which would require a maximum of 152 no. car parking spaces for the proposed Primary Care Centre, in accordance with Table 16.1 of the Development Plan. Given that the proposed Primary Care Centre provides 116 no. car parking spaces, I am satisfied that the proposal complies with the Development Plan's Maximum Car Parking Standards. The proposal makes no changes to the quantum of car parking spaces serving the existing Royal Hospital Donnybrook, i.e. 114 no. spaces. Of these, 82 no. spaces will

be relocated within the Royal Hospital complex. Having reviewed the Parking Management Plans for both the proposed Primary Care Centre and existing Royal Hospital Donnybrook, I am satisfied that a clear rationale has been set out for the proposed allocation/relocation of parking associated with both and that satisfactory measures are put in place to control their use.

7.2.10. Regarding bicycle parking and cyclist facilities, the proposal provides a secure parking area for 28 no. staff cycle spaces and the provision of 3 no. staff showers, 1 drying room and 1 no. W.C. at basement level, adjacent to the staff cycle parking area. Additional staff showers are provided at ground and second-floor levels. The proposal also provides 10 no. publicly accessible cycle parking spaces within the basement level. Electric charging facilities would serve 20% of all cycle parking. Given the proposed Primary Care Centre provides 76 no. consulting/treatment rooms, I am satisfied that the cycle parking provisions comply with Table 16.2 of the Development Plan, which refers to 'Cycle Parking Standards for Various Land-Uses' and which requires 1 no. cycle space per 2 consulting rooms for Clinic and Group Medical Practices in Zone 2. Furthermore, I am of the view that the shower and changing facilities provided accord with the requirements of Section 16.39.4 of the Development Plan. Such measures encourage travel by sustainable means to the site.

7.2.11. Regarding the Appellant's concerns regarding drop-off traffic and overspill parking along Cullenswood Park, this is a public cul-de-sac road in Ranelagh Village. The road is subject to short-term, pay and display parking for the public on both sides of the road. Having regard to the quantum of car parking provided on the site to serve both the existing hospital and proposed Primary Care Centre, I am satisfied that adequate parking is provided in accordance with Development Plan parking standards and that the level of such parking would not present a significant risk of overspill parking on neighbouring streets. As per the Dublin City Council Tarif Zone Map, Cullenswood Park is located in a 'High Demand Zone', which carries a higher cost than other areas across the city, and the use of pay and display parking has an associated maximum duration of three hours. Any unauthorised parking is subject to enforcement (clamping and fines) by Dublin Street Parking Services. The carriageway through Cullenswood Park is narrow, with parking on both sides for the most part, and lacks a full vehicular turning point at the end of the cul-de-sac due to on-street parking spaces there. The proposal does not provide for wayfaring or other signage outside of the hospital

campus. A public footpath is provided on both sides of the street, of which the path on the northern side leads directly into the Cullenswood sheltered housing at the L-bend in the road. Given the aforementioned constraints of Cullenswood Park road and in the absence of verifiable evidence to demonstrate otherwise, I do not consider the proposed pedestrian/cyclist entrance at the end of Cullenswood Park will create significant levels of traffic movements to the end of the cul de sac for dropping off staff and visitors to the hospital and proposed Primary Care Centre. I recommend, therefore, that the proposed development is not refused permission on these grounds of appeal.

7.3. Pedestrian/Cyclist Access

7.3.1. The appellant's concerns regarding pedestrian and cyclist access through Cullenswood Park are detailed in Section 6.1 above and synthesised as follows;

- The permitted development would allow unrestricted, public access to the site via Cullenswood Park between 8 a.m. and 7 p.m. and fob-only admission outside of these hours. This would increase the likelihood of antisocial conduct along Cullenswood Park.
- The proposed new pedestrian and cycle access through Cullenswood Park provides no discernible benefit in terms of permeability.
- The proposed entrance is not visible from Ranelagh Road, making it undesirable as an access point.
- The Board is referred to an existing alternative entrance gate/access point from Leeson Park Avenue that provides a more direct route from the proposed Primary Care Centre to Ranelagh centre and LUAS stop. This entrance gate (currently closed) would be more acceptable because it is visible from Appian Way and from the proposed quadrangle garden serving the Primary Care Centre.
- Neither the Applicant nor the Planning Authority mention or reference this access point in their evaluation of the application.
- The Leeson Park Avenue entrance offers an excellent opportunity to establish a link and increase permeability from the proposed Primary Care Centre into the surrounding neighbourhood. The Leeson Park Avenue link provides an opportunity to make the

amenity space in the adjoining parkland corner of the hospital campus more accessible to the general public. The Cullenswood Park access provides no such planning benefit. Leeson Park Avenue, unlike Cullenswood Park, lacks any turning points that would encourage its use as a vehicle drop-off point for access to the hospital campus. The most convenient route to shops and public transportation is via Leeson Park Avenue, where a gate if opened, would also make the existing amenity space accessible to the northern local population. The entrance at Leeson Park Avenue would provide even more benefits than the proposed pedestrian/cyclist access through the end of Cullenswood Park and its convoluted access to the Primary Care Centre.

- In 2013, the Board approved most of the proposed works but omitted the proposed vehicular access from Cullenswood Park to the hospital campus for two reasons. Condition No. 4 of the Board's decision stipulated that access from Cullenswood Park be restricted to pedestrians and cyclists between 8:00 am and 6:00 pm. This condition required that the proposed pedestrian and bicycle access be located at the northern end of Cullenswood Park and heavily controlled. Although a precedent was established in 2013 for pedestrian/bicycle access to the hospital campus via Cullenswood Park, the approved access was in a different location than the one currently proposed.
- As detailed in Section 6.1 above, the Board is referred to five key considerations outlined in the Urban Design Compendium (English Partnership) for achieving a more attractive pedestrian environment that this application fails to address.
- While the Appellant acknowledges that Cullenswood Park is a more direct route to the Ranelagh Road bus stop, it only serves intermittent bus services that connect via Routes 11, 44, and 61. Bloomfield Avenue connects with the Quality Bus Corridor served by route Nos. 135 and 46A. These provide a high-quality bus service connecting with the city centre. As a result, the proposed Cullenswood Park entrance would not improve access to public transportation.

7.3.2. The Applicant contests these grounds of appeal, as detailed in Section 6.2 above. The Planning Authority, in its assessment, noted the Transportation Planning Division's report, which welcomes the Applicant's proposal to enhance the permeability and connectivity of the site by opening the existing Bushfield Terrace to the public during

operating hours of the campus and the proposed pedestrian/cyclist access at Cullenswood Park. The Planning Authority imposed Condition No. 12(ii) which requires that *'Public pedestrian and cyclist access to and from the hospital campus via the Bushfield Terrace access and the Cullenswood Park access shall be provided between 08:00 and 19:00 hours Monday to Sunday. Staff only access by way of key/fob outside these public opening hours shall also be permitted at the Bushfield Terrace and the Cullenswood Park access points'*.

7.3.3. As detailed in Section 4.0 above, Under P.A. Ref. 2703/13 and ABP Ref. PL 29S 242783, the Board issued a split decision (permission & refusal), whereby permission was granted for the change of use of the former nurse's home building, including alterations and extensions to create a Primary Care Centre, independently accessible pharmacy, additional car parking area with lighting, the demolition of a greenhouse and Pavilion and new ESB substation at Cullenswood Park. Condition No.2 (a) of this permission required that *'Vehicular access to the site shall be provided from Bloomfield Avenue only and the construction of a new vehicular access at Cullenswood Park together with a 5.5m wide internal access road with a footpath and four metre high lighting, and four number traffic control barriers shall be omitted'*. Condition No.4 required that *'Pedestrian and cycle access shall be provided at Cullenswood Park, details of which shall be submitted to, and agreed in writing with, the planning authority prior to the commencement of development. The access shall be reduced in width to prevent its use by all traffic other than pedestrians and cyclists. This access shall only be open between the hours of 08.00 and 18.00'*.

7.3.4. The location of the approved entrance was approx. 30 metres northwest of the proposed pedestrian/cycle entrance under the subject appeal. In consideration of the previously permitted development by the Board, it is my view that this creates precedence for the proposed pedestrian/cyclist entrance. Furthermore, I consider the proposed access location at the end of Cullenswood Park to present the optimal design solution compared to that previously permitted under ABP Ref. PL 29S 242783. Its location would not impact the existing outbuildings and polytunnel used as a gardening and amenity space for patients and residents of the hospital. Its location at the foot of the steps and ramp is closest to the internal road. The proposal would not significantly impact trees and vegetation, requiring the removal of only 1 no. tree and its replacement with 11 no. trees and planting along either side of the ramp. I concur

with the Planning Authority's Transportation Planning Division that the proposed access at Cullenswood Park and the opening of the existing Bushfield Terrace to the public would improve the permeability and connectivity of the site. In particular, the proposed entrance at Cullenswood Park would increase pedestrian/cyclist accessibility and disabled access to the site from neighbourhoods to the west. Such development accords with Policy MT11 of the Dublin City Council Development Plan 2016-22 which seeks 'To continue to promote improved permeability for both cyclists and pedestrians in existing urban areas in line with the National Transport Authority's document 'Permeability – a best practice guide'. Cullenswood Park is well overlooked by residential dwellings and served with good public lighting, making it a safe pedestrian route. In the grounds of appeal, the Appellant provides an analysis of comparable pedestrian routes from the proposed Primary Care Centre to the Ranelagh Luas Stop and acknowledges that the shortest of these is via Cullenswood Park. Ranelagh Road is well served with frequent Dublin routes, including Route Nos. 11, 44 and 61, as per Dublin Bus's website¹. As such, the proposed pedestrian / cyclist entrance at Cullenswood Park accords with Section 2.2.4.1 of the Development Plan which refers to high-level goal No. 10 of the Local Economic and Community Plan which seeks to '*Support the continued development of a quality, affordable and accessible movement system within the city prioritising walking, cycling and quality public transport which serves both the needs of local neighbourhoods and the economy of the city and the health and well-being of all*'. It is my view that a Condition restricting the hours of use of the entrance between the hours of 08.00 and 19.00 hours would prevent anti-social behaviour and protect the residential amenity of dwellings along Cullenswood Park. Changes to the existing entrance gate to the campus from Leeson Park Avenue are not proposed under the subject application and therefore are not for consideration under the subject appeal. I recommend, therefore, that the proposed development is not refused permission on these grounds of appeal.

¹ <https://www.dublinbus.ie/RTPI/Sources-of-Real-Time-Information/?searchtype=map&searchquery=>

Appropriate Assessment

- 7.3.5. The closest European Sites to the appeal site are the South Dublin Bay and River Tolka Estuary Special Protection Area (Site Code: 004024) and the South Dublin Bay Special Area of Conservation (Site Code: 000210), located c. 2.7km east of the site and
- 7.3.6. Having regard to the nature and scale of the proposed development, the location of the site within a fully serviced urban environment, and the separation distance and absence of a clear, direct pathway to any European site, no Appropriate Assessment issues arise and it is not considered that the proposed development would be likely to have a significant effect individually or in combination with other plans or projects on a European site.

8.0 Recommendation

- 8.1.1. I recommend that planning permission should be granted for the proposed development for the reasons and considerations set down below and subject to the following conditions.

9.0 Reasons and Considerations

- 9.1.1. Having regard to the provisions of the Dublin City Development Plan 2016 to 2022, including the land use zoning objective for the area, the nature and scale of the proposed development and its location, and the established pattern of development in the area, it is considered that, subject to compliance with the conditions set out below, the proposed development would be acceptable in terms of scale, mass, and design, would not be detrimental to the visual or residential amenity of the area and would be acceptable in terms of traffic safety and convenience. The proposed development would, therefore, be in accordance with the proper planning and sustainable development of the area.

10.0 Conditions

1.	<p>The development shall be carried out and completed in accordance with the plans and particulars lodged with the application, as amended by the further plans and particulars submitted on the 25th August 2021, except as may otherwise be required in order to comply with the following conditions. Where such conditions require points of detail to be agreed with the planning authority, the developer shall agree such details in writing with the planning authority prior to commencement of development and the development shall be carried out and completed in accordance with the agreed particulars.</p> <p>Reason: In the interest of clarity.</p>
2.	<p>Use of the overall premises shall be restricted to those uses specified in the documentation lodged with the planning authority (primary care centre and retail pharmacy unit) and any change of use, whether within the use class for exempted development of the Planning and Development Regulations, 2001, as amended, or otherwise, shall be subject to a prior grant of planning permission.</p> <p>Reason: In the interest of orderly development.</p>
3.	<p>Water supply and drainage arrangements, including the attenuation and disposal of surface water, shall comply with the requirements of the planning authority for such works and services.</p> <p>Reason: To ensure adequate servicing of the development and to prevent pollution.</p>
4.	<p>Prior to commencement of development, the developer shall enter into water and/or waste water connection agreement(s) with Irish Water.</p> <p>Reason: In the interest of public health.</p>
5.	<p>Prior to the commencement of any development on site, the developer shall submit details of the materials, colours and textures of all external finishes, including samples and details of the 'green roofs', for the written agreement of the Planning Authority.</p> <p>Reason: In the interest of visual amenity.</p>

6.	<p>Public pedestrian and cyclist access to and from the hospital campus via the Bushfield Terrace access and the Cullenswood Park access shall be provided between 08:00 and 19:00 hours Monday to Sunday. Staff only access by way of key/fob outside these public opening hours shall also be permitted at the Bushfield Terrace and the Cullenswood Park access points.</p> <p>Reason: In the interest of residential amenity and orderly development.</p>
7.	<p>The applicant/developer shall implement the measures outlined in the Mobility Management Framework/Plan and ensure that future tenants of the development comply with this strategy. A Mobility Manager for the overall scheme shall be appointed to oversee and coordinate the preparation of individual plans. A review of the Mobility Management Plan, including travel habit surveys and modal split, shall be carried out within 12 months of the occupation of the development.</p> <p>Reason: In the interest of public safety and orderly development.</p>
8.	<p>The landscaping scheme, as submitted to the planning authority shall be carried out within the first planting season following substantial completion of external construction works.</p> <p>All planting shall be adequately protected from damage until established. Any plants which die, are removed or become seriously damaged or diseased, within a period of five years from the completion of the development, shall be replaced within the next planting season with others of similar size and species, unless otherwise agreed in writing with the planning authority.</p> <p>Reason: In the interest of residential and visual amenity.</p>
9.	<p>(a) Prior to commencement of development, all trees, groups of trees, hedging and shrubs which are to be retained shall be enclosed within stout fences not less than 1.5 metres in height. This protective fencing shall enclose an area covered by the crown spread of the branches, or at minimum a radius of two metres from the trunk of the tree or the centre of the shrub, and to a distance of two metres on each side of the hedge for its full length, and shall be maintained until the development has been completed.</p>

	<p>(b) No construction equipment, machinery or materials shall be brought onto the site for the purpose of the development until all the trees which are to be retained have been protected by this fencing. No work is shall be carried out within the area enclosed by the fencing and, in particular, there shall be no parking of vehicles, placing of site huts, storage compounds or topsoil heaps, storage of oil, chemicals or other substances, and no lighting of fires, over the root spread of any tree to be retained.</p> <p>Reason: To protect trees and planting during the construction period in the interest of visual amenity.</p>
10.	<p>Notwithstanding the provisions of the Planning & Development Regulations 2001 (as amended), no advertisement signs (including any signs installed to be visible through the windows); advertisement structures, banners, canopies, flags, or other projecting element shall be displayed or erected on the building or within the curtilage, or attached to the glazing without the prior grant of planning permission.</p> <p>Reason: In the interests of visual amenity.</p>
11.	<p>A window display shall be maintained at all times in the Pharmacy Unit, and the glazing to the shopfront shall be kept free of all stickers, posters and advertisements.</p> <p>Reason: In the interests of visual amenity.</p>
12.	<p>Full details of all external signage shall be submitted to the Planning Authority and written agreement obtained prior to commencement of development.</p> <p>Reason: In the interest of visual amenity.</p>
13.	<p>The developer shall facilitate the preservation, recording and protection of archaeological materials or features that may exist within the site. In this regard, the developer shall -</p> <p>(a) notify the planning authority in writing at least four weeks prior to the commencement of any site operation (including hydrological and geotechnical investigations) relating to the proposed development,</p>

	<p>(b) employ a suitably-qualified archaeologist who shall monitor all site investigations and other excavation works, and</p> <p>(c) provide arrangements, acceptable to the planning authority, for the recording and for the removal of any archaeological material which the authority considers appropriate to remove.</p> <p>In default of agreement on any of these requirements, the matter shall be referred to An Bord Pleanála for determination.</p> <p>Reason: In order to conserve the archaeological heritage of the site and to secure the preservation and protection of any remains that may exist within the site.</p>
14.	<p>Site development and building works shall be carried out only between the hours of 08:00 to 19:00 Mondays to Fridays inclusive, between 08:00 to 16:00 on Saturdays and not at all on Sundays, Bank or public holidays. Deviation from these times will only be allowed in exceptional circumstances where prior written approval has been received from the planning authority.</p> <p>Reason: In order to safeguard the residential amenities of property in the vicinity.</p>
15.	<p>All necessary measures shall be taken by the contractor to prevent the spillage or deposit of clay, rubble or other debris on adjoining roads during the course of the works.</p> <p>Reason: In the interest of orderly development.</p>
16.	<p>The construction of the development shall be managed in accordance with a Construction Management Plan, which shall be submitted to, and agreed in writing with, the planning authority prior to commencement of development. This plan shall provide details of intended construction practice for the development, including noise/vibration and traffic management measures and off-site disposal of construction/demolition waste.</p> <p>Reason: In the interests of public safety and residential amenity.</p>

17.	<p>Construction and demolition waste shall be managed in accordance with a construction waste and demolition management plan, which shall be submitted to, and agreed in writing with, the planning authority prior to commencement of development. This plan shall be prepared in accordance with the “Best Practice Guidelines on the Preparation of Waste Management Plans for Construction and Demolition Projects”, published by the Department of the Environment, Heritage and Local Government in July, 2006. The plan shall include details of waste to be generated during site clearance and construction phases, and details of the methods and locations to be employed for the prevention, minimisation, recovery and disposal of this material in accordance with the provision of the Waste Management Plan for the Region in which the site is situated.</p> <p>Reason: In the interest of sustainable waste management.</p>
18.	<p>All waste from the facility shall be securely stored on site prior to collection by an authorised specialist waste management operator and shall not be stored on the public road.</p> <p>Reason: In the interest of public health.</p>
19.	<p>All service cables associated with the proposed development (such as electrical and telecommunications) shall be located underground. All existing over ground cables shall be relocated underground as part of the site development works.</p> <p>Reason: In the interest of visual and residential amenity.</p>
20.	<p>Prior to commencement of development, the developer shall lodge with the planning authority a cash deposit, a bond of an insurance company, or other security to secure the provision and satisfactory completion and maintenance until taken in charge by the local authority of roads, footpaths, watermains, drains, public open space and other services required in connection with the development, coupled with an agreement empowering the local authority to apply such security or part thereof to the satisfactory completion or maintenance of any part of the development. The form and amount of the security shall be as agreed between the planning authority</p>

	<p>and the developer or, in default of agreement, shall be referred to An Bord Pleanála for determination.</p> <p>Reason: To ensure the satisfactory completion and maintenance of the development until taken in charge.</p>
21.	<p>The developer shall pay to the planning authority a financial contribution in respect of public infrastructure and facilities benefiting development in the area of the planning authority that is provided or intended to be provided by or on behalf of the authority in accordance with the terms of the Development Contribution Scheme made under section 48 of the Planning and Development Act 2000. The contribution shall be paid prior to the commencement of development or in such phased payments as the planning authority may facilitate and shall be subject to any applicable indexation provisions of the Scheme at the time of payment. Details of the application of the terms of the Scheme shall be agreed between the planning authority and the developer or, in default of such agreement, the matter shall be referred to the Board to determine the proper application of the terms of the Scheme.</p> <p>Reason: It is a requirement of the Planning and Development Act 2000 that a condition requiring a contribution in accordance with the Development Contribution Scheme made under section 48 of the Act be applied to the permission.</p>

Brendan Coyne
 Planning Inspector

01st September 2022