



An
Coimisiún
Pleanála

Inspector's Report

ACP-323482-25

Development

PROTECTED STRUCTURE:

Construction of a 4 storey maternity hospital building extension with connections with the existing Entrance Building and Main Hospital Building (protected structure). Refurbishment works within the existing building and all associated site works.

Location

Rotunda Hospital Campus, Parnell Square, Dublin 1

Planning Authority

Dublin City Council North

Planning Authority Reg. Ref.

WEB2689/24

Applicant

The Board of Governors of the Rotunda Hospital.

Type of Application

Permission.

Planning Authority Decision

Grant, subject to conditions.

Type of Appeal

Third Party.

Appellants

- Dublin Civic Trust
- John Aboud

Observers

- John Molloy
- Marie Sherlock T.D.
- An Taisce

Date of Site Inspection

19th November 2025.

Inspector

Terence McLellan

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1.0 Site Location and Description

- 1.1. The subject site measures approximately 0.99 hectares and relates to the western section of the Rotunda Hospital campus on Parnell Square. The site incorporates the existing hospital buildings along Parnell Square West in addition to a large section of the central courtyard space and a section of land along the northern boundary between the Nurse's Home and the boundary with the Garden of Remembrance. The principal buildings within the subject site boundary include the four storey Medical Residence building on the corner of Parnell Street and Parnell Square West, the Plunkett Cairns Wing (four storeys), the existing Entrance Building (four storeys) and the single storey Outpatients Department.
- 1.2. The site forms part of the wider Rotunda Hospital campus which occupies the majority of the southern section of Parnell Square and is itself bounded by the Garden of Remembrance to the north, Parnell Square East, Parnell Street to the south, and Parnell Square West. The remainder of the hospital campus incorporates the Main Building of the Rotunda Hospital (three storeys with cupola), the Nurse's Home (five storeys) and several other late 20th century buildings rising to two storeys. A number of buildings and structures occupy the central courtyard space. The surrounding built form of Parnell Square on its west, north and eastern edges is defined by terraced Georgian townhouses, generally in the order of four storeys above basement. The three storey Hugh Lane Gallery is located on Parnell Square North, and the Abbey Presbyterian Church is located on the corner of Parnell Square North and Parnell Square East/Frederick Street North.
- 1.3. The former Students' Residence and Nurse's Residence (together referred to as the Old Medical Residence) as well as the facades of the Plunkett Cairns Wing are collectively listed on the Register of Protected Structures (RPS) under reference 6419, specifically excluding the ground floor arcades of the adjoining main building of the Rotunda Hospital. In addition to their collective inclusion on the RPS, these buildings are individually listed on the National Inventory of Architectural Heritage (NIAH).
- 1.4. Further Protected Structures are located on the wider hospital campus, including the Rotunda Hospital Main Building (RPS 6420), the Rotunda Hospital Chapel (RPS6420), and The Gate Theatre (RPS1138), all of which are also listed on the NIAH. The majority of the buildings around the west, north and eastern edges of the square are

Protected Structures, as is the Garden of Remembrance and the former Ambassador Cinema. The southern part of the subject site is located within the O'Connell Street Architectural Conservation Area.

- 1.5. Vehicular access to the site is from Parnell Square West where a ramp provides access to the surface level car park within the central hospital courtyard space. A second vehicular access to the internal hospital grounds is available from Parnell Square East. The site is highly accessible by public transport by virtue of its location within central Dublin and the site is served by the Luas Green Line in addition to the multitude of bus services available opposite the site on Parnell Square West.

2.0 Proposed Development

- 2.1. Planning permission is sought for the demolition of the existing single storey Outpatients Department, vehicular ramp, service tunnel and plant structures in the central garden area and redevelopment to provide a new four storey over basement Critical Care Wing extension with associated internal works to the existing Entrance Building, Plunkett Cairns Wing and Old Medical Residence building.
- 2.2. The new Critical Care Wing would provide c. 9,946sqm of gross floor area and would facilitate 80 no. additional hospital bedrooms inclusive of a 16 no. bed labour ward, 20 no. bed Neonatal Intensive Care Unit (NICU), 25 no. bed Special Care Baby Unit (SCBU), 19 no. bed post-natal unit, new operating theatre and recovery area, ancillary facilities and a link corridor at Level 02 providing connections to the Entrance Building and other main campus buildings. An additional level of plant would be provided at roof level.
- 2.3. The development would incorporate the reconfiguration and replacement of the vehicle access ramps and the lower level surface car parks, enabling the removal of 67 no. car parking spaces and the provision of a bicycle store providing an additional 98 spaces. On the northern boundary of the site, it is proposed to construct a screened generator and medical gases compound.

Further Information

- 2.4. Amendments to the proposed development took place at Further Information stage. This included the construction of a single storey bicycle store and the provision of up

to 44 additional bicycle parking spaces, a reduction in size and redesign of the rooftop plant enclosure, and design amendments to the facades including materiality, fenestration and elevational detailing.

Application Documents

2.5. The application was accompanied by the following documents¹:

- Appropriate Assessment Screening Report (including Bat Survey), prepared by Ecosystem Services Limited
- Arboricultural Assessment (Tree survey), prepared by Joe McConville Arborist
- Archaeological & Architectural Heritage Impact Assessment Report, prepared by Niall Gregory Archaeology
- Architectural Design Report, prepared by O'Connell Mahon Architects*
- Architectural Drawings, prepared by O'Connell Mahon Architects*
- Architectural Heritage Impact Assessment Report, prepared by Michael O'Boyle Conservation Architect*
- Basement Impact Assessment, prepared by O'Connor Sutton Cronin Consulting Engineers*
- CGIs, prepared by ModelWorks
- Climate Action & Energy Statement, prepared by ARUP Consulting
- Construction & Environmental Management Plan, prepared by O'Connor Sutton Cronin Consulting Engineers
- Daylight and Sunlight Analysis, prepared by ModelWorks*
- Demolition Justification Report, prepared by O'Connell Mahon Architects
- Engineering Services Report, prepared by O'Connor Sutton Cronin Consulting Engineers*
- Environmental Impact Assessment Screening Report, prepared by Stephen Little and Associates
- Landscape Design Rationale, prepared by Stephen Diamond Landscape Architect
- Landscape Drawings, prepared by Stephen Diamond Landscape Architect (refer to enclosed document

¹ *Denotes amended document received at Further Information stage.

- Masterplan Principles Document, prepared by O’Connell Mahon Architects*
- Mobility Management Plan, prepared by O’Connor Sutton Cronin Consulting Engineers*
- Noise Impact Assessment, prepared by AWN Consulting
- Operational Waste Management Plan, prepared by ARUP Consulting
- Planning Application Report & Statement of Consistency, prepared by Stephen Little and Associates
- Site Lighting Strategy, prepared by, prepared by ARUP Consulting*
- Site-Specific Flood Risk Assessment Report, prepared by O’Connor Sutton Cronin Consulting Engineers
- Technical Drawings, prepared by O’Connor Sutton Cronin Consulting Engineers and ARUP Consulting
- Townscape and Visual Impact Assessment, prepared by ModelWorks*
- Traffic & Transportation Assessment, prepared by O’Connor Sutton Cronin Consulting Engineers*
- Tree retention-removal plan, prepared by Joe McConville Arborist,
- Tree Survey Plan with Constraints, prepared by Joe McConville Arborist
- Verified Photomontages, prepared by ModelWorks

2.5.1. The following additional documents/drawings were received at Further Information stage:

- Engineering Drawings
- External CGI’s
- Internal Photographs
- Photomontages
- Surface Water Management Plan

3.0 Planning Authority Decision

3.1. Decision

3.1.1. Planning permission was granted by Dublin City Council on the 31st July 2025 subject to 14 generally standard conditions.

3.2. Planning Authority Reports

3.2.1. The first Planner's Report contains the following points of note:

- The site is zoned Z8 (Georgian Conservation Area). The proposed hospital building is open for consideration in this zoning.
- Acknowledge the pressures and constraints on the existing hospital, the accommodation is underperforming and clinically sub-optimal.
- Support the provision of a Critical Care Wing and the continued operation of the hospital at Parnell Square, recognising its strategic role in Dublin and the wider region.
- Recognise the unique setting of the hospital in a Conservation Area and that part of the site is located within the O'Connell Street Architectural Conservation Area (ACA) but note that the ACA is confined to the southern part of the site, and no works are proposed within it.
- Accept the rationale for the urgent need and location of the proposed development, including required adjacencies, relocation of outpatient services, and loss of a building that is not a Protected Structure.
- Design requirements of the building layout are noted having regard to clinical requirements and the need to connect to and extend clinical services, including the provision of direct connections to clinical departments in the existing Entrance Building.
- Works to the Protected Structures do not involve any new floor area, change of medical use, or changes to the external facades.
- The site coverage is above the indicative 50% standard. This may be permitted in order to facilitate the strategic role of significant institution/employers such as hospitals.
- The development would be within the prevailing heights of the area. The Outpatient's Department is single storey and as such any building of increased height will appear as a significant visual change in the streetscape and would result in a new street edge.

- Proposed ridge height is generally consistent with existing buildings and Protected Structures.
- Acknowledge the need for rooftop plant. This would be visible from Parnell Square and concerns are raised regarding its extent, bulk, form, and materiality. This should be addressed by Further Information.
- Acknowledge the design limitations and challenges associated with the key clinical functionality requirements of the building and the need to respond to the historic setting of Parnell Square.
- Concern that facades are flat, bland, not of sufficient quality/materiality, and that the CGIs do not fully reflect the design intention. Further refinement and articulation are required to break down the massing of the elevations and improve the composition and arrangement of windows to the building.
- Conservation Officer concerns are noted regarding materiality, detailing, bulk/massing, masterplan provisions, car parking, conservation gain, and transitions between buildings.
- Transport concerns are noted regarding vehicle parking, cycle parking, and access for servicing vehicles.
- There is a lack of adequate information relating to the management of surface water and it is considered that there are deficiencies in the Basement Impact Assessment.

3.2.2. The first Planner's Report concluded in a request for Further Information covering the following points:

1. Design details:
 - a) Design amendments to reduce bulk and visual impact, review the form, extent and materiality of the roof plant structures, and explore the use of a mansard style roof.
 - b) Revised drawings, CGIs and photomontages to demonstrate a more significant, sympathetic and defined articulation of elevations, improved composition and arrangement of windows and reduction of the flat/monolithic appearance of the building in the streetscape.

- c) Investigate removal of car parking spaces to the front of the Rotunda and provision of a publicly accessible open space.

2. Conservation details:

- a) Revised conservation strategy demonstrating greater conservation gain for the Protected Structures, including fabric repairs.
- b) Revised plans/elevations/photographs of Plunkett Cairns Building and Old Medical Residence showing where fabric will be removed.
- c) Clarity on alterations to the fenestration of the Entrance Building.
- d) Clarity on construction dates of all existing mid 20th century buildings within the site.
- e) Drawing and photographic record of existing remnants of the former Pleasure Gardens, indicating the provenance of all existing interventions.
- f) Submission of drawings of historic railings on Parnell Square and arrangements where railings would be removed as part of the works.
- g) Section and elevation drawings that include the Georgian townhouses of Parnell Square West, North and East, including parapet and ridge height.

3. Transport details:

- a) Drawings of revised access from Parnell Square West showing pedestrian priority.
- b) Swept path analyses for all vehicle types.
- c) Clarity on the parking strategy, particularly accessible, EV and motorcycle parking.
- d) Details of long term bicycle parking in compliance with CDP standards.
- e) Provision of visitor bicycle parking within the site footprint.

4. Drainage details:

- a) Submission of a Surface Water Management Plan and revised plans to address (i) green/brown roof provision, (ii) clarity on calculations, (iii) compliance with Code of Practice regarding surface water outfalls.

- b) Clarity on the Basement Impact Assessment regarding (i) demonstration that secant wall provision is feasible, (ii) clarity on feasibility of secant bored pile size, (iii) assessment of ground movement and potential effects, (iv) details of required mitigation measures, (v) details of construction phase monitoring, (vi) details of ground investigations.

3.2.3. Further Information was received on the 4th July 2025. The main changes to the scheme relate to amendments to the scale and form of roof plant, alterations to the facades, design and fenestration changes, and amendments to materials. The revised information is detailed in Section 2.5 above. The Further Information was considered in the second Planner's Report which contained the following points of note:

- Amendments to roof plant, including reduction in height of the plant and parapet, set-backs, materials, and colour scheme are acceptable. Visual impacts have been reduced.
- Elevational alterations and façade improvements are supported as is the proposed material palette. Brick is the predominant material on campus as well as within the Georgian streetscape at Parnell Square West.
- Parking requirements are critical to the Rotunda operation, including for out of hours staff. Acknowledge the Rotunda's commitment to advancing a car parking strategy to investigate the future removal of car parking to the front of the Main Building to realise SDRA10 principle relating to the Rotunda campus.
- Conservation Officer concerns have largely been addressed albeit noting concerns regarding existing car parking and partial loss of railings. Amendments to plant, façades, and materials are considered acceptable from a conservation perspective.
- Transport and drainage concerns have been addressed and appropriate conditions recommended.

3.2.4. The second Planner's Report concluded that all matters had been suitably addressed and recommended that permission be granted, subject to conditions.

3.3. Other Technical Reports

3.3.1. **Archaeology Section (28.01.2025):** No objection subject to conditions. The relevant conditions pertain to the preparation of an Archaeological Assessment (including an

Archaeological Impact Assessment), provision of a Method Statement, provision for potential archaeological excavation, details of foundation layout, and archaeological reporting and monitoring.

- 3.3.2. **Conservation Officer (07.02.2025 and 25.07.2025):** The principle of the proposed development in this location is supported by the Conservation Officer. The initial response noted the pre-application discussions with the Board of the Rotunda Hospital and the Board's commitment to the continued long-term use of the Rotunda in its current location. The Conservation Officer notes the alterations to the site and former pleasure gardens since their inception. The response notes the permanent loss of the view of the central area from Parnell Square West and the creation of a street edge. Concerns were raised regarding elements of the masterplan, including the potential removal of the Nurse's Home and the impact of future development on the Rotunda Hospital Main Building and the importance of ensuring that any future development should include an appropriate reflection of the historic gardens. In terms of the proposed development, concerns were also raised regarding the scale and form of roof plant, transitions between buildings, façade design/articulation/materiality, works to railings, and conservation gain.
- 3.3.3. Further Information and clarifications were recommended to address these concerns in addition to the provision of improved CGI's, photographic records, confirmation of long term use of the site and future use if the hospital should relocate. Following the submission of Further Information and in regard to conservation gain, the Conservation officer expressed regret that the car parking to the front of the Rotunda Main Building was not being removed and that the proposed 36% reduction in car parking on site was not sufficient. However wider conservation gain proposals were considered acceptable. Alterations to the height, form and extent of plant were supported, as were the façade alterations, design refinements and proposed materiality, noting that the use of stone for window reveals should be secured. Whilst the partial loss of historic railings is considered regrettable by the Conservation Officer, appropriate conditions regarding detailed specifications and methodologies for conservation repairs to the railings and plinths, including potential relocation and storage, is secured by condition. The Conservation Officer concluded that planning permission should be granted, subject to conditions.

- 3.3.4. **Drainage Division (21.01.2025 and 21.07.2025):** Initially raised concerns regarding surface water drainage and requested Further Information regarding green/blue roofs, details of calculations, compliance with the Code of Practice, Basement Impact Assessment (secant wall and secant bored pile size), ground movement, monitoring/mitigation, and ground investigations. Following the submission of Further Information, no objections were raised subject to conditions and compliance with the Code of Practice.
- 3.3.5. **Transport Planning Division (31.01.2025 and 18.07.2025):** Requested Further Information with regards to maintaining the vehicular access from Parnell Square West and demonstrating pedestrian priority, provision of swept path analyses for all vehicle types, clarity on the parking provision/strategy, details of long term bicycle parking, and provision of visitor cycle parking within the site footprint. Following the submission of Further Information, no objections were raised subject to conditions regarding detailed drawings and materials for public road works, provision of a Construction and Demolition Management Plan, provision of staff and visitor bicycle parking, protection of Luas operations, compliance with Code of Practice, and payment of costs relating to repairs to public roads and services.

3.4. **Prescribed Bodies**

- 3.4.1. **An Taisce (22.01.2025):** An Taisce raised objections to the proposed development. These are covered in the observation made by An Taisce on the appeal, which is set out in detail at Section 6.4 of this report.
- 3.4.2. **Transport Infrastructure Ireland (09.01.2025):** No objections raised. Standard conditions are recommended regarding works taking place in proximity to the LUAs and Section 49 financial contributions towards the Luas Cross City scheme.
- 3.4.3. **Uisce Éireann (10.01.2025):** No objection in principle, subject to standard conditions and compliance with the Code of Practice. A condition is also recommended in relation to SUDS and surface water drainage, with details to be agreed with the Planning Authority.

3.5. Third Party Observations

- 3.5.1. A total of six observations were received in response to the planning application. These are summarised in the Planner's Report and are on file for the Commission's information. I am satisfied that the matters raised are sufficiently addressed in the grounds of appeal and observations which are set out in detail in Sections 6.1 and 6.4 of this report.

4.0 Planning History

Subject Site

- 4.1. There is a long and detailed planning history for the Rotunda Hospital complex. Recent planning history of relevance includes the following:
- 4.2. **Planning Authority Reference 4130/24:** Permission was granted by Dublin City Council in for the construction of a single storey temporary radiology unit in the Rotunda car park, including a link connection to the existing Admissions building and amendments to the building façade. This permission is currently being implemented.
- 4.3. **Planning Authority Reference 4366/18:** Permission was granted by Dublin City Council in for the construction of a single storey MV switchroom on Parnell Square East, the construction of a single storey LV switchroom and transformer room building, external generator and fuel tank enclosure, and a single storey storage building in the Rotunda lower carpark.
- 4.4. **Planning Authority Reference 2163/17:** Permission was granted by Dublin City Council in for the construction of a new colposcopy clinic to be located to north east of existing nurses' home and northwest of the existing private clinics, within the grounds of the Rotunda Hospital complex.
- 4.5. **Planning Authority Reference 2162/17:** Permission was granted by Dublin City Council for a four storey extension to existing main entrance and clinical block on Parnell Square West.

Adjacent Sites

- 4.6. **ACP Reference ABP-302881-18:** A Section 175 approval was issued by the Commission in for a new City Library and Cultural Quarter to be located in the former Scoil Mhuire buildings on Parnell Square North; beside the Hugh Lane Gallery.

5.0 Policy Context

5.1. National Policy

National Planning Framework First Revision (April 2025)

- 5.1.1. The National Planning Framework (NPF) is the Government's high-level strategic plan for shaping the future growth and development of the country to the year 2040. A key element of the NPF is a commitment towards 'compact growth', which focuses on a more efficient use of land and resources through reusing previously developed or under-utilised land and buildings. The NPF targets half of future population growth to be in the existing five cities and in this regard, it recognises that the delivery of critical strategic infrastructure in areas such as transport, water services management, waste management, education, health and community services is essential to the sustainable growth of Dublin into the future.
- 5.1.2. National Strategic Outcome 10 relates to access to quality childcare, education, and health services, noting in particular that the health system will need to respond to projected population change/requirements.

5.2. Regional Policy

Regional Spatial and Economic Strategy for the Eastern and Midland Region 2019-2031 (RSES)

- 5.2.1. The objective of the RSES is to support the implementation of Project Ireland 2040 - which links planning and investment through the National Planning Framework (NPF) and the ten year National Development Plan (NDP) - and the economic and climate policies of the Government by providing a long-term strategic planning and economic framework for the Region. The RSES seeks to promote compact urban growth by making better use of under-used land and buildings within the existing built-up urban footprint and to drive the delivery of housing, employment, and sustained economic growth.

5.3. Dublin City Development Plan

- 5.3.1. The site is zoned Z8(Georgian Conservation Area), the stated objective of which is ‘to protect the existing architectural and civic design character, and to allow only for limited expansion consistent with the conservation objective’.
- 5.3.2. The red line site area includes the Rotunda Hospital West Wing which comprises the buildings known as the former Students’ Residence and Nurse’s Residence (together as the Old Medical Residence) as well as the facades of the Plunkett Cairns Wing. These buildings are collectively listed on the Register of Protected Structures under reference 6419, specifically excluding the ground floor arcades of the adjoining main building of the Rotunda hospital. In addition to their collective inclusion on the RPS, these buildings are individually listed on the National Inventory of Architectural Heritage as follows:
- Former Nurse’s Residence (NIAH 50010620, National Rating)
 - Student Residence (NIAH 50010621, Regional Rating)
 - Plunkett Cairns Wing (NIAH 50010622, Regional Rating).
- 5.3.3. The wider Rotunda Hospital Campus (blue line area) contains the following protected Structures and NIAH listings:
- Rotunda Hospital Main Building (RPS 6420), (NIAH 50010619, National Rating)
 - Rotunda Hospital Chapel (RPS6420), (NIAH 10011187, National Rating)
 - The Gate Theatre (RPS1138), (NIAH 50011031, National Rating).
- 5.3.4. The O’Connell Street Architectural Conservation Area is located to the south and includes a small portion of the site.
- 5.3.5. The site is located within SDRA 10 – North East Inner City.
- 5.3.6. Chapter 3: Climate Action contains the Council’s policies and objectives for addressing the challenges of climate change through mitigation and adaptation. The relevant policies from this section include:
- CA8: Climate Mitigation Actions in the Built Environment
 - CA10: Climate Action Energy Statements
 - CA24: Waste Management Plans for Construction and Demolition Projects

5.3.7. Chapter 4: Shape and Structure of the City, sets out the Council's strategy to guide the future sustainable development of the city. The objective is to ensure that growth is directed to, and prioritised in, the right locations to enable continued targeted investment in infrastructure and services and the optimal use of public transport. The relevant policies from this chapter are:

- SC1: Consolidation of the Inner City
- SC2: City's Character
- SC5: Urban Design and Architectural Principles
- SC11: Compact Growth
- SC19: High Quality Architecture
- SC20: Urban Design
- SC21: Architectural Design
- SC22: Historical Architectural Character
- SC23: Design Statements

5.3.8. Chapter 5: Quality Housing and Sustainable Neighbourhoods, seeks the provision of quality, adaptable homes in sustainable locations that meet the needs of communities and the changing dynamics of the city. The delivery of quality homes and sustainable communities in the compact city is a key issue for citizens and ensuring that Dublin remains competitive as a place to live and invest in. The relevant policies from this chapter include:

- QHSN52: Sláintecare Plan

5.3.9. Chapter 6: City and Enterprise is of relevance. This chapter recognises that Dublin is an international city and gateway to the European Union for many businesses. The city region contributes significantly to Ireland's economy and is a major economic driver for the country. The relevant policies from this chapter are:

- CEE2: Positive Approach to the Economic Impact of Applications
- CEE30: Hospitals and Healthcare

5.3.10. Chapter 8: Sustainable Movement and Transport, seeks to promote ease of movement within and around the city and an increased shift towards sustainable modes of travel

and an increased focus on public realm and healthy placemaking, while tackling congestion and reducing transport related CO2 emissions. Policies of relevance include:

- SMT8: Public Realm Enhancements

5.3.11. Chapter 11: Built Heritage and Archaeology, recognises that the city's heritage contributes significantly to the collective memory of its communities and to the richness and diversity of its urban fabric. It is key to the city's character, identity and authenticity and is a vital social, cultural, and economic asset for the development of the city. The Development Plan plays a key role in valuing and safeguarding built heritage and archaeology for future generations. The plan guides decision-making through policies and objectives and the implementation of national legislation to conserve, protect and enhance our built heritage and archaeology. The relevant policies of this section include:

- BHA2: Development of Protected Structures
- BHA4: Ministerial Recommendations
- BHA7: Architectural Conservation Areas
- BHA9: Conservation Areas
- BHA10: Demolition in a Conservation Area
- BHA11 Rehabilitation and Reuse of Existing Older Buildings
- BHA24 Reuse and Refurbishment of Historic Buildings

5.3.12. Chapter 15: Development Standards contains the Council's Development Management policies and criteria to be considered in the development management process so that development proposals can be assessed, both in terms of how they contribute to the achievement of the core strategy and related policies and objectives. Relevant sections of Chapter 15 include (but are not limited to):

- 15.4: Key Design Principles
- 15.5: Site Characteristics and Design Parameters
- 15.15: Built Heritage and Archaeology
- 15.16: Sustainable Movement and Transport
- 15.18: Environmental Management

5.3.13. Relevant Appendices include:

- Appendix 3: Achieving Sustainable Growth sets out the height strategy for the city, with criteria for assessing higher buildings and provides indicative standards for density, plot ratio and site coverage.
- Appendix 16: Sunlight and Daylight provide direction on the technical approach for daylight and sunlight assessments.

5.4. **Ministerial Guidelines**

Architectural Heritage Protection, Guidelines for Planning Authorities (2011)

- 5.4.1. This guidance is a material consideration in the determination of applications and sets out comprehensive guidance for development in Conservation Areas and affecting Protected Structures. It promotes the principle of minimum intervention (Para.7.7.1) and emphasises that additions and other interventions to Protected Structures should be sympathetic to the earlier structure and of quality in themselves and should not cause damage to the fabric of the structure, whether in the long or short term (7.2.2).
- 5.4.2. The guidance states that Planning Authorities are obliged to preserve the character of places and townscapes which are of special architectural, historic, archaeological, artistic, cultural, scientific, social or technical interest or that contribute to the appreciation of Protected Structures, by designating them Architectural Conservation Areas (ACAs) in their development plan.

Urban Development and Building Heights, Guidelines for Planning Authorities (2018)

- 5.4.3. The Building Heights Guidelines state that increased building height and density will have a critical role to play in addressing the delivery of more compact growth in urban areas and should not only be facilitated but actively sought out and brought forward by our planning processes, in particular by Local Authorities and An Bord Pleanála. These Guidelines caution that due regard must be given to the locational context and to the availability of public transport services and other associated infrastructure required to underpin sustainable residential communities.

5.5. **Other Relevant Guidance**

National Maternity Strategy 2016-2026

- 5.5.1. The National Maternity Strategy is a framework for the development and provision of maternity services in Ireland which aims to deliver safe, high-quality, woman-centred care. It identifies significant deficits in existing maternity infrastructure and supports the co-location of standalone maternity hospitals with acute hospitals. In terms of the Rotunda Hospital, it supports co-location with Connolly Hospital in Blanchardstown.

5.6. Natural Heritage Designations

- 5.6.1. The site is not located within or immediately adjacent to any European sites. The nearest European sites are:

- South Dublin Bay and River Tolka Estuary SPA (Site Code: 004024) 2.3km to the east.
- South Dublin Bay SAC (Site Code: 000210) 3.75km to the east.
- North Dublin Bay SAC (Site Code 0000206) 5.35km to the east.
- North Bull Island SPA (Site Code 0004006) 5.4km to the east.
- North-West Irish Sea SPA (Site Code 004236) 7.5km to the east.

5.7. EIA Screening

Introduction

- 5.7.1. The application addresses the issue of EIA within an EIA Screening Report prepared by Stephen Little and Associates, dated December 2024, containing information provided in line with Schedule 7A of the Planning Regulations and which seeks to demonstrate that there is no requirement for the preparation of an Environmental Impact Assessment Report for the proposed development. Section 3 of the report sets out the relevant legislation and guidance pertaining to Environmental Impact Assessment and confirms that the screening assessment has been undertaken in accordance with OPR Practice Note PN02 Environmental Impact Assessment Screening 2021. This advocates a three-step approach to screening. Step 1 seeks to determine if a proposal is a project within the meaning of the EIA Directive and, on foot of this, if the development would be of class as set out in Schedule 5 Part 1 or 2 and if it would constitute sub-threshold development.

- 5.7.2. Step 2 requires a preliminary examination of sub-threshold development (nature, size, and location) to conclude if there is a likelihood of significant effects on the environment. Step 3 requires a screening determination to be carried out on the basis of Schedule 7A information where the requirement to carry out an EIA is not excluded at preliminary examination stage.
- 5.7.3. The Applicant's screening report has regard to the criteria set out in in Schedule 7 of the Planning and Development Regulations 2001 as amended (the 2001 Regs), and to the requirements under Schedule 7A of the 2001 Regs. This section also confirms that the assessment has had regard to the relevant annexes of the Environmental Impact Assessment Directive (Annexes I, II, and III).
- 5.7.1. Where an application is made for subthreshold development and Schedule 7A information is submitted, the Commission must carry out a screening determination in line with the requirements of Article 109(2B)(a) of the Planning and Development Regulations 2001 (as amended), therefore, it cannot screen out the need for EIA at preliminary examination.

Mandatory Thresholds

- 5.7.2. This proposed development is of a class of development included in Schedule 5 of the Planning Regulations. Schedule 5 to Part 2 of the Planning Regulations provides that mandatory EIA is required for the following classes of development that are of relevance to the proposal:
- Class 10(b)(iv) - Urban development, which would involve an area greater than 2 ha in the case of a business district*, 10 ha in the case of other parts of a built-up area and 20 ha elsewhere. *a 'business district' means a district within a city or town in which the predominant land use is retail or commercial use.
 - Class 15 - Any project listed in this Part which does not exceed a quantity, area or other limit specified in this Part in respect of the relevant class of development, but which would be likely to have significant effects on the environment, having regard to the criteria set out in Schedule 7.'
- 5.7.3. The screening report gives the site area as 0.99 hectares which is below the relevant threshold. A mandatory EIA is therefore not required on the basis of class 10 (b)(iv).

As such I do not consider that the proposed development would require mandatory EIA on the basis of the aforementioned threshold.

Sub Threshold Development

- 5.7.4. Item (15)(b) of Part 2, Schedule 5 of the Regulations provides that EIA will be required for 'Any project listed in this Part which does not exceed a quantity, area or other limit specified in this Part in respect of the relevant class of development, but which would be likely to have significant effects on the environment, having regard to the criteria set out in Schedule 7'.
- 5.7.5. Environmental Impact Assessment is required for development proposals of a class specified in Part 1 or 2 of Schedule 5 that are sub-threshold where the Commission determines that the proposed development is likely to have a significant effect on the environment. For all sub-threshold developments listed in Schedule 5 Part 2, where no EIAR is submitted or EIA determination requested, a screening determination is required to be undertaken by the competent authority unless, on preliminary examination it can be concluded that there is no real likelihood of significant effects on the environment.
- 5.7.6. The Applicant's Screening Report provides the necessary information for screening this sub-threshold development for Environmental Impact Assessment and I am satisfied that the report and the other information submitted with the application includes the information specified in Schedule 7A of the Regulations, and that the information has been compiled taking into account the relevant criteria set out in Schedule 7 of the Regulations.
- 5.7.7. The reports submitted with the application address a variety of environmental issues and the environmental impacts of the proposed development, including assessing the potential for cumulative impact. The reports demonstrate that, subject to the various mitigation measures, the proposed development would not have a significant impact on the environment. I have had regard to the characteristics of the site, the location of the proposed development, and the type and characteristics of the potential impacts. Having regard to the Schedule 7A information, I have examined the sub-criteria and all submissions, and I have considered all information that accompanied the application and appeal, as set out in Section 2 of this report.

5.7.8. I have completed an EIA screening assessment of the proposed development with respect to all relevant considerations, as set out in Appendix 2 to this report. Having regard to:

- The nature and scale of the proposed development, which is below the threshold in respect of Class 10(b)(i)(iv) of Part 2 to Schedule 5 of the Planning and Development Regulations 2001-2022;
- The location of the proposed development on existing brownfield hospital lands.
- The nature of the existing site and the intensity and extent of the existing established use;
- The availability of municipal water and wastewater services to serve the proposed development;
- The location of the development outside of any sensitive location specified in Article 109(4)(a)(v)(I-VII) of the Planning and Development Regulations 2001, as revised;
- The guidance set out in the 'Environmental Impact Assessment (EIA) Guidance for Consent Authorities regarding Sub-threshold Development', issued by the Department of the Environment, Heritage and Local Government (2003);
- The criteria set out in Schedule 7 of the Planning and Development Regulations 2001, as revised;
- The features and measures proposed by the Applicant that are envisaged to avoid or prevent what might otherwise be significant effects on the environment, including measures identified to be provided in the Construction and Environmental Management Plan, Construction Waste Management Plan, Engineering Services Report, Noise Impact Assessment, Operational Waste Management Plan, Site Specific Flood Risk Assessment, and;
- Further details of mitigation secured by condition.

5.7.9. I am satisfied that the proposed development would not be likely to have significant effects on the environment and that the preparation and submission of an Environmental Impact Assessment Report would not, therefore, be required.

6.0 The Appeal

6.1. Grounds of Appeal

- 6.1.1. Two Third Party appeals have been received from the Dubin Civic Trust and Mr John Aboud against the decision of Dublin City Council to grant permission for the proposed development as follows. There is a consistency across the two appeals in terms of the main issues raised. The substantive points are summarised below:

Zoning and Material Contravention

- The site is zoned Z8 - Georgian Conservation Areas. The objective seeks to protect architectural and civic design and character, allowing for only limited expansion consistent with this objective.
- The proposed floorspace exceeds the floor area of the existing hospital and does not represent limited expansion.
- The scale, form, and location of the proposed extension would undermine the form and function of Parnell Square and have a negative impact on its character and setting.
- The language used in the application manages to morph the zoning and permitted uses into a de facto hospital zoning.
- The Georgian townhouses flanking Parnell Square are all Protected Structures and the proposal fails to comply with CDP requirements to respect/complement the established urban character and built heritage.
- The development does not contribute to legible and cohesive placemaking and it has not been demonstrated that it would not have a significant impact on the protection of architectural heritage and civic design character of the protected structures, their curtilage, and the sites conservation setting.
- The proposals would be inconsistent with the zoning objective and the conservation objectives of the CDP, constituting a material contravention of the development plan.
- Dublin City Council have failed to highlight the material contravention of the development plan.

- The Planning Authority have focussed on clinical pressures rather than the planning framework. It is submitted that the Planning Authority did not envisage a development of this size.
- The Planning Authority rely on Policies CEE30 and CEE31, but these recognise the importance of healthcare in all places/societies.
- A development of this size and its impact on heritage assets cannot be weighed up on an equal footing with other policy considerations.
- Medical and maternity requirements are flexible and transferable within an urban area. Built heritage is not.

Design, Heritage and Townscape

- The existing Outpatients Building was designed to read as a garden pavilion that did not interrupt the relationship between the surrounding houses and the railed green space. It respects the square.
- The proposed extension is excessive in height, scale, and massing having regard to the surrounding historic context.
- The proposal would result in the build out of the west side of Parnell Square, rendering Parnell Square West as a street rather than an open square. The excessive scale would reduce Parnell Square West to a canyon.
- Detailed design, brickwork, stepping up, and fenestration further contribute to the canyon effect.
- The character and feeling of Parnell Square as a square would be lost.
- Parnell Square cannot accommodate a large building without damage to its historic setting. The development would be contrary to the architectural and civic design and character of Georgian Squares, which are recognised for their spatial relationship between enclosing buildings and a central open space.
- Disagree with the TVIA conclusions that there would be positive effects.
- The view of the rear of the Rotunda from Parnell Square West is one of the few rear views of the building from anywhere in the public domain, this view would be lost.
- The development would also significantly compromise views outwards from the rear of the Rotunda/former pleasure gardens to the surrounding Georgian townhouses as well as views across and into the square, including from the

surrounding Protected Structures and most profoundly from Parnell Square West and Granby Road.

- Disagree with the Applicant's assertion that the proposal would have a 'moderate to significant, overwhelmingly positive effect' on townscape.
- The Applicant's photomontages within the National Garden of Remembrance are highly selective and conceal the scale and impact of the development.
- The development would have a significant negative impact on the National Garden of Remembrance. Including impacts on views, its setting, and the intrusive nature of the development in the backdrop.
- The O'Connell Street Architectural Conservation Area traverses the garden front of the 1750's Rotunda Hospital. The fundamental character of the ACA at this location is the original view from the rear of the Rotunda towards the garden square and enclosing Georgian houses. It is statutorily protected. The development will destroy this view and radically alter the protected character. This is contrary to BHA7.
- The Rotunda in its current primary healthcare configuration is ill prepared and funded to act as a custodian of this remarkable complex. The buildings are being poorly maintained and require investment and repair, and the proposal does not ameliorate these issues.
- The assessment of built heritage is insufficient, the Planning Authority expressed support at the beginning of the assessment and objective consideration of the scheme was ruled out before it was even analysed
- There is no assessment of the impact on the protected characteristics of the Rotunda Hospital, the Conservation Area setting of Parnell Square, the O'Connell Street ACA, or the surrounding Protected Structures.
- Judgements from the Supreme Court emphasised the requirement for proper consideration of ACAs and Protected Structures and compliance with the development plan.
- Dublin Civic Trust have been advised by healthcare architects that this is a complicated build that will render Parnell Square a construction site for many years with significant impacts on public realm, amenity, patients/staff, and heritage.

Healthcare Planning, Healthcare Policy, and Relocation

- The proposal represents a failure of healthcare planning.
- Inefficiency and failure to plan, in addition to hospital group medical politics, are being used as a presumptive right to a massive intensification of use on a highly sensitive site.
- Medical and maternity requirements are flexible and transferable within an urban area. Bult heritage is not.
- It is Government/national policy and the policy of the HSE to move all three Dublin maternity hospitals to co-located sites and it is suggested that an interim development is essential to respond to care/clinical needs.
- Provision of these services involves national strategic planning, regional frameworks, suitable locations, and multi-disciplinary stakeholders.
- No government policy supports the proposal, which consolidates a major maternity hospital as a standalone entity, nor is it supported by any international healthcare best practice studies/recommendations which promote co-location with major general hospitals.
- A decision not to co-locate will cost lives and contribute to sub-optimal outcomes.
- Dublin Civic Trust submit that they have engaged directly with leading paediatric and other medical consultants and conclude that that there is not universal support for the proposal, that it does not represent clinical best practice, and that it is poor value for money.
- The hospital could be relocated to The Mater or Temple Street and it is submitted that just an additional 35% floor area could accommodate all the requirements of a freestanding hospital
- It is submitted that the proposal is also intended to stymie any relocation proposals.
- The Board of Governors of the Rotunda Hospital wish to retain the hospital at the current site. The Masterplan makes clear the intention to develop the square with medical facilities and disregarding heritage. A masterplan could only be considered as part of a new CDP or a variation.
- The Rotunda's continued presence on this site has reached a natural and noble conclusion. Providing front line maternity services and all associated supports

is not viable in the current historic buildings or in the new buildings required to enable the hospital to discharge its clinical functions.

Restoration of Parnell Square

- Acknowledge the role of the hospital as a key institution and major employer in Dublin 1, however, given the hospital's unique location in the heart of Dublin and the architectural and conservation significance of the buildings and Parnell Square, it would be a major lost opportunity if the hospital is allowed to consolidate itself in this location long term.
- Despite the construction of the Garden of Remembrance and the incremental expansion of the hospital, much of the original gardens can still be read and perceived.
- Parnell Square is still remarkably intact. The site is the greatest single prospect for the revival of Dublin's north inner city. Relocation presents an extraordinary opportunity to develop a masterplan for Parnell Square and allow the square to be developed as a historic and cultural amenity of national and international importance.
- The PSCQ is designed to be a landmark cultural and civic hub at the north end of Dublin's civic spine. A strategy that facilitates the relocation of the hospital would allow the gardens to be restored for public use and add to the attraction of the PSCQ. The resulting node would be of national and international significance and residential amenity would be enhanced, noting that the north inner city lacks in green space and amenities for residents.
- An ambitious and well considered restoration of Parnell Square would be transformative. If the hospital is allowed to secure its ambition to remain at this site, then the opportunity will be lost.
- Provision of a central amenity area would be an improvement on the current car parking, but it would be private to the hospital only. It would be tokenistic.
- The long term objective is still to move to another location and that the development would be required for 15-20 years, inferring that the CCW is temporary.
- Buildings will be retained on site in line with climate obligations (CA6) and the CCW has no prospect of being demolished. It therefore consolidates sub-

optimal clinical practice on a site with significant heritage impacts, precludes any reinstatement of the original amenity and is an inefficient use of public funds.

- The proposal is a sticking plaster. If the hospital is currently at capacity, then other maternity services should take up the excess demand.

Masterplan

- The Masterplan document submitted with the application makes clear the intention to develop the square with medical facilities and disregarding heritage. A masterplan could only be considered as part of a new CDP or a variation.
- The indicative masterplan would deliver 30,000sqm of hospital space in total, including the proposal. The approach would have negative consequences on the ambience and legibility of the historical open spaces of Parnell Square.
- The masterplan northern block would be overbearing on the Garden of Remembrance and would impact views from Parnell Square North.
- Future blocks facing Parnell Square east show minimal recognition of the Council's Northern Civic Spine proposals and the retention of trees. There would be a profoundly negative impact on the east side of the square.

6.2. Applicant Response

6.2.1. A First Party Response has been received from Stephen Little and Associates, for and on behalf of the Applicant, The Board of Governors of the Rotunda Hospital. The main points can be summarised under the following headings:

6.2.2. Compliance with the Dublin City Development Plan

- The application documents demonstrate compliance with national, regional, and local planning policy.
- Z8 zoning allows for health uses and the scheme seeks to balance healthcare/employment objectives and conservation objectives, rather than prioritising one over the other.

- A multi-disciplinary team was engaged in the development of the scheme to deliver clinical objectives and critical care. Design has been developed progressively.
- The scheme has been developed in line with built heritage policies, in consultation with the Planning Authority and the Applicant's conservation experts in order to minimise visual and structural impact on the historic buildings and their setting.
- The proposal would replace the 20th century Outpatients Building which is of no architectural merit and can be considered unsightly. The proposal represents an improvement and enhancement under policy BHA9.
- The proposed building would occupy a marginally larger footprint than the existing building, would increase overall site coverage by only 4% and increase gross floor area above ground by c. 27%. This is consistent with site coverage and plot ratio standards of the CDP and represents limited expansion, ensuring no overdevelopment.
- Building height, building line, mannered articulation and material selection all ensure that the building would sympathetically integrate into the conservation area setting and would be in harmony with the historic architecture of Parnell Square West.
- The proposal would be consistent with conservation objectives and would not overwhelm the surrounding Z8 Georgian setting.
- Works to protected structures are limited to interior refurbishments, window and brickwork conservation works and boundary railing preservation.
- Unsightly service elements would be removed from the central campus in addition to a reduction in car parking and an increase in soft landscaping.
- The development addresses urgent clinical need whilst balancing architectural and environmental design that respects the historic campus setting.

6.2.3. Landscape and Visual Impact

- The TVIA recognised the negative effect of the development on the view of the rear of the Rotunda from a stretch of Parnell Square West where it is visible above the roof of the Outpatients department.

- The front of the Rotunda would remain visible and prominent on Parnell Street and O'Connell Street. These views are of greater importance than the partial view of the rear from Parnell Square West and it would remain a prominent and defining feature of the wider area.
- Compact growth cannot take place in the city centre without some degree of increased visual enclosure and occasional screening of historic buildings.
- The presence and positive effect of the Rotunda building in the townscape would not be significantly reduced.
- Quality of streetscape and built environment of Parnell Square West would be enhanced by the development. It is an attractive, contemporary building that integrates with the character of the area and would be positive overall.
- Views into and across Parnell Square are dominated by the 20th century hospital buildings and infrastructure.
- The value of already compromised views must be balanced against the land use value of the city centre brownfield site.
- Restoration of an open square of gardens is not compatible with the retention of an operational Rotunda Hospital, which must be allowed to develop, as it has done since its establishment, constantly changing its townscape context.
- Views west from the original hospital building are compromised by modern buildings and infrastructure.
- Whilst the houses on Parnell Square west are currently visible from the hospital building, they are already compromised by the reality of the modern hospital and are experienced by few people.
- The development would involve the decluttering of the central space, improving visual amenity.
- Photomontages were selected in line with best practice, by qualified experts with extensive experience, and are not highly selective as stated by the Dublin Civic Trust.
- There has been no attempt to conceal the effects of the proposal, and the viewpoints provide a thorough assessment of potential effects on views from the Garden of Remembrance.
- Maintain the conclusions on viewpoints 8 and 9, including the significance of effect being classed as moderate neutral. The building would occupy less than

an eighth of any 360 degree view from the Garden of Remembrance. The building would be visible but would not dominate views from the garden or reduce visual amenity.

- The TVIA was carried out with reference to the Landscape Institute Guidelines for Landscape and Visual Impact Assessment 2013 (GLVIA) and EPA Guidelines on the Information to be Contained in Environmental impact Assessment Reports 2022.
- The TVIA and Photomontages provide a comprehensive assessment of the development from 17 viewpoints.
- The verified views were reviewed by a Grade 1 Conservation Architect in the AHIA report, providing a conservation led assessment and commentary.

6.2.4. Building Scale and Design

- Built heritage concerns have been a central focus of the design and assessment of the proposed development and great effort has been made to ensure clinical needs are met whilst remaining sympathetic to the historic context.
- Design and layout were developed in close consultation with a Grade 1 Conservation Architect.
- Further Information stage amendments reduced the height and quantity of rooftop plant and enhanced the architectural treatment of the facades to have a more sympathetic profile and appearance.
- The development respects and complements the urban character and built heritage context and will not have a negative physical or visual impact on the character and setting of historic environments, including ACA's and Protected Structures.
- The development contributes positively to legible and cohesive placemaking, protection of public and private realm and avoids overdevelopment.
- Roof plant has been minimised, and microclimatic effects have been successfully considered.
- Heights are acceptable having regard to prevailing heights and the guidance contained within Appendix 3 of the CDP. Regard has been had to the

surrounding terraced Georgian townhouses and previous hospital extensions to the south.

- The location, scale and design of the building strikes the right balance with the historic campus and conservation setting. It is not dominant or overbearing in its relationship to the Rotunda or its conservation setting.
- A number of building, site design and conservation enhancements have been put forward to maximise conservation gain at the Rotunda.

6.2.5. National Policy and Sustainable Development

- Claims by the Dublin Civic Trust that expansion of the Rotunda on this site does not represent clinical best practice or value for money are unsubstantiated.
- It remains part of the National Maternity Strategy to support the co-location of the three standalone maternity hospitals with Level 4 Acute Hospitals.
- Initial plans were for the Rotunda to tri-locate with the Mater and the Children's Hospital, but this ceased when permission was refused for the Children's Hospital.
- It was then proposed to co-locate with Connolly Hospital in 2015 but noting that Connolly Hospital was not a level 4 hospital and required substantial investment to be brought to that level.
- A new Regional Executive was established in 2024 and new hospital group structure was created around Integrated Health Areas (IHA). The Rotunda is now in the same IHA as the Mater Hospital. A working group is investigating co-location with the Mater.
- The National Maternity Strategy is approaching its review phase, and it is anticipated that current policy will be revised. The HSE and Department of Health acknowledge that substantial infrastructure investment is required at the Rotunda to address high clinical risks. This cannot wait for co-location to Connolly which will not be in place for at least another 20 years.
- The Rotunda is essentially already co-located with the Mater Hospital, with established professional and clinical relationships as well as intensive care services. Many staff are joint appointments and many resources are shared.

- The Rotunda has many multi disciplinary teams with experts in the Mater and the Rotunda participating. Women can be transferred to Intensive Care units at the Mater as quickly as anywhere else in the Mater complex.
- The proposal is a necessary and long-term investment in the long established maternity hospital.
- In terms of climate impacts from demolition and construction, the Commission are directed to the Demolition Justification Report submitted with the application.

6.2.6. Heritage

- Expansion of the hospital began in the late 19th century and continued through the 20th century. Further development in the square includes the Nurse's Residence and the Garden of Remembrance.
- The Rotunda has been continuously operating on this site for over 275 years and has long been expanded into the former pleasure gardens. Which do not survive in any recognisable form.
- Suggested removal of clinical and ancillary buildings to reinstate a historic facsimile of the 18th century pleasure gardens would be hugely expensive and would require a high degree of conjecture.
- Removal of the longstanding hospital buildings would simply reveal the substantial retaining wall of the Garden of Remembrance, which itself permanently alters the layout of the former pleasure gardens.
- The proposed Critical Care Wing does not significantly encroach on surviving open space.
- In the event that a full restoration was planned, the development would become part of a larger demolition project.
- The development incorporates the benefit of removing the existing service buildings within the hospital grounds, enhancing the setting of the north front of the Rotunda and a potential first step in designating the centre of the hospital campus as a landscaped open space.
- The character of the open space has evolved over time in response to the changing needs of the hospital, which predates the terraced housing surrounding the square.

- The relationship between the hospital and the terraced Georgian housing has changed significantly as the hospital has expanded.
- Views of and from the north front of the Rotunda have been interrupted by the construction of the Nurse's Residence and by the Plunkett Cairns Wing and the Entrance Building on the west side of the square.
- The appeals describe the west boundary as railed green space with low pavilion buildings. There are substantial buildings along the western boundary.
- The location of the CCW is informed by clinical adjacencies and by the established relationship of the existing hospital buildings on the west side of the hospital campus and the terraced houses on Parnell Square West.
- Design is informed by the scale, height and detailing of the existing hospital buildings and the Georgian houses opposite.
- Design responds to important characteristics of the west side of the square, including parapet height.
- Verified views are a clear and impartial assessment that demonstrate that the building responds to the scale, massing and detailing of the surrounding streetscape.
- The cupola will remain visible from vantage points on Granby Row to the north.
- The Garden of Remembrance has always co-existed with the hospital buildings to its south, including the Nurse's Residence, which is a significant component of its setting.
- The proposed building would be visible from the Garden of Remembrance and will read as a structure of comparable scale to the Nurse's Residence.

6.2.7. Masterplan Proposals

- Any future development beyond that described in the planning notice and shown in the planning drawings would be the subject of a separate application for permission and would be assessed on its own merits against relevant policies.
- The Masterplan demonstrates that the proposed development would not prejudice any future campus development and establishes design principles in line with the SDR10 principles and heritage considerations.

- The principles of the SDRA 10 plan have been taken into account and, where possible, integrated into the design.
- Public access and the ability to provide publicly accessible open space within the hospital grounds needs to be limited, given patient and staff protections.
- The plan includes the removal of 67 car parking spaces as well as the removal of ad hoc structures and plant that detracts from the historic campus setting.
- Landscape proposals will enhance the available amenity space within the campus.
- There has never been unrestricted access to the Rotunda grounds throughout its 275 year history. Entry to the pleasure gardens required payment of an admission fee, with proceeds going towards the construction and operation of the hospital.
- From the early 20th Century, access was restricted to hospital staff and patients. The square was not laid out for the benefit of the surrounding townhouses and there was never keyholder access. The former gardens have always been associated with the hospital.

6.2.8. The Grounds of Appeal are accompanied by the following letters of support:

6.2.9. Kilian McGrane – Director of National Women and Infants Health Programme

- The Rotunda deals with a high level of complex maternity and neonatal patients requiring highly specialised care. The Critical Care Wing is part of the strategic response to improving maternity infrastructure. The Rotunda needs significant investment to deliver specialist care. The Critical Care Wing is an essential development that will provide much needed capital infrastructure to provide high quality safe care.

6.2.10. Brian O'Connell - National Director, Head of Strategic Health Infrastructure and Capital Delivery (HSE)

- The HSE have extensively engaged with the Rotunda Hospital regarding the proposal and are fully supportive. Whilst still committed to the National Maternity Strategy which will be reviewed in 2026, the Critical Care Wing is being progressed as an interim measure to address the most critical clinical risks in a cost effective and timely manner.

- The CCW will provide additional capacity, address infection prevention control in neo-natal/special care baby unit, provide additional post-natal rooms, and provide a modern labour ward with additional capacity to meet the hospital's needs.

6.2.11. Dr John F. Murphy – National Clinical Lead in Neonatology

- Age, condition and infection were three of the high risks identified from an HIQA inspection.
- The Neonatal Intensive Care Unit does not meet recommended guidelines.
- The proposal will enhance neonatal care for babies and their families and an improved future for neonatology at the hospital.
- Prevention of cross-infection is critical, particularly when caring for high-risk babies with reduced immunity. Infection is an ever-present threat and there needs to be adequate spacing between cots, multiple hand washing stations, optimal air quality for humidity and temperature, separate systems for the delivery of medications/other products, disposal of clinical waste, and negative pressure rooms for the isolation of infected babies.
- The NICU will enable clear boundaries between zoned areas which is a key factor in the delivery of care

6.2.12. Further letters of support from the following TDs and Senators have been included with the First Party response:

- Duncan Smith TD
- Gary Gannon TD
- Mary Lou McDonald TD
- Marie Sherlock TD
- Senator Evanne Ní Chuilinn
- Senator Mary Fitzpatrick

6.2.13. The letters of support can be summarised as follows

- This is the oldest continuously operating maternity hospital in the world and the busiest on northern Europe.
- Demand for the hospital's services is rising

- The hospital faces space limitations impacting its ability to deliver care and services.
- The neonatal intensive care unit and labour ward are under intense physical constraints.
- Pregnant women and babies are some of the most vulnerable citizens in the country. Implore the Commission to listen to the women whose babies require neonatal care and the healthcare professionals who provide care under significant constraints.
- The physical clinical environment is no longer fit for purpose.
- The hospital currently provides care for 37 babies in its overcrowded neonatal unit. Critically ill babies are treated with insufficient spacing between cots and there have been several infectious outbreaks this year – this is more likely and more dangerous in shared spaces with insufficient infection control capacity.
- The development would provide 46 individual neonatal spaces for babies, with safer infection control and a dramatically improved clinical environment as well as a modern labour ward, a midwifery led unit and postnatal accommodation.
- The development will provide 19 postnatal rooms. It is unacceptable that women currently have to recover from labour and delivery 10 or 12 to a room.
- The proposal is for critical infrastructure to meet basic standards of clinical care and safety and is not expansion for the sake of it.
- A city must serve both its history and humanity and the Rotunda has made clear its commitment to honouring and integrating with the streetscape and urban fabric.
- Constraints make it difficult to deliver safe, high-quality care to women and infants.
- Urge the Commission to consider the challenges faced by the Rotunda staff.
- The hospital will remain on the current site for many decades to come. The development is a critical investment in its future.
- The development is essential, urgent, and entirely in the public interest.
- The proposal has been meticulously planned, refined and updated.
- The Rotunda is a fundamental part of the fabric of the city, for multiple generations of families, the hospital has been an important part of their lives.

- The current Outpatients Department built in the 1930s has little relationship to the historical built heritage on the square. The building will represent a significant improvement.

6.3. Planning Authority Response

- 6.3.1. Request that the Commission uphold the decision and apply conditions relating to Section 48 and 49 development contributions and the payment of a bond.

6.4. Observations

- 6.4.1. The following observations have been made on the appeal:

6.4.2. An Taisce

- The application brings into question the status, future, and regeneration potential of Parnell Square as one of the great Georgian Squares of Dublin and for the suitability and shorter to medium term future of the Rotunda.
- The development would create a street frontage along the majority of the west side of the square, fundamentally changing its composition and its relationship/setting with the adjacent 18th century houses.
- The development would further erode the relationship between the original Rotunda building and the former pleasure gardens, which are still legible and hold potential for recovery.
- Dublin's Georgian squares have been increasingly valued as key components of the City's heritage, character, and urban structure.
- Parnell Square is unique as houses were only laid out on three sides, with the original hospital building sitting in the square fronting south and facing into its pleasure gardens.
- The historic elements of The Rotunda and adjoining buildings are an important complex of classical stone Dublin build, warranting a high level of care and consideration. They are of international significance (NIAH) and Protected Structures under the CDP.
- The southern part of Parnell Square sits within the O'Connell Street Architectural Conservation Area, the square itself is within a red hatched conservation area, and the square and environs (excluding the Garden of

Remembrance), has a Z8 conservation orientated zoning which only permits limited expansion.

- It is policy that Georgian squares will play a key role in revitalisation/regeneration, long awaited improvements have started to materialise at Parnell Square (Colaiste Mhuire).
- The current proposal would be contrary to zoning, it would compromise the cultural heritage and regeneration potential of Parnell Square and would be contrary to SC2 of the CDP.

6.4.3. John Molloy

- The development would transform the west side of Parnell Square into a street and cause irreparable damage to the character of the area.
- Due to the State's inaction, a choice now has to be made between two desirable but conflicting objectives. The Rotunda's requirements should be met by modifying other premises in the area, such as Temple Street Hospital.
- The Rotunda has an immediate need for additional accommodation, people may be reluctant to object to its proposals, there is a risk that a far-reaching planning decision may be determined by non-planning considerations.
- Dublin City Council was not legally entitled to consider the application as it is contrary to the CDP and does not include a Cultural Impact Statement.
- A task force was set up by the state to address the deteriorating state of central Dublin and to improve O'Connell Street. The proposal will have the opposite effect.
- The Commission's decision will have long term effects on Dublin City. The current Georgian heritage of the city is a result of far-seeing decisions made over 200 years ago.

6.4.4. Marie Sherlock T.D.

- The Rotunda Hospital has been established in its current premises since 1757. It is the oldest maternity hospital in the world, one of the busiest in Europe, and it is the case that it will be remaining on this site for decades to come.
- Excellent care is being provided however this is being provided in sub-par accommodation and the hospital is under very significant physical/space constraints, particularly for neonatal intensive care and for the labour ward.

- None of the current labour ward accommodation is of a Health Building Note (HBN) standard, which is the accepted standard for healthcare in Ireland. The hospital only has 11 rooms for delivery, two of these can rarely be utilised.
- The neonatal unit is the busiest in the country, none of the spaces in this unit are single spaces for babies, some of whom are very premature. This is not acceptable from an infection prevention perspective.
- The extension to the Rotunda Hospital for a Critical Care Wing is essential and must proceed.
- The Rotunda Hospital is part of the fabric of Dublin. The Rotunda is an integral part of the square. Care has been taken to integrate the new wing with the Garden of Remembrance and to respect the architecture of the square.
- The current single storey outpatient department has little relation to the built heritage of the square – the proposed building will be a significant improvement.
- The Critical Care Wing has been spoken about for more than 20 years and must be built.
- It would expand capacity at the hospital, provide significant improvements to current accommodation arrangements, and offer modern neonatal care to more babies.
- The Critical Care Wing would allow the Rotunda to expand its services, respond to pressures and ensure deliveries take place in facilities of an acceptable standard.
- The Commission must consider the reality of the Rotunda's operating environment and the difficulty for staff to provide safe, quality services to women and infants.
- Urge the Commission to grant permission for this much needed infrastructure in the heart of the city.

7.0 **Assessment**

- 7.1. Having examined the application details and all other documentation on file, including all of the submissions received in relation to the appeal, the report/s of the local authority, and having inspected the site, and having regard to the relevant

local/regional/national policies and guidance, I consider that the substantive issues in this appeal to be considered are as follows:

- Need, Healthcare Policy, and Alternative Sites
- Zoning
- Design, Heritage and Townscape
- Masterplan Proposals
- Material Contravention
- Other Matters

7.2. Need, Healthcare Policy, and Alternative Sites

- 7.2.1. At the outset I would note that a significant number of points have been made in the appeals and observations in relation to the proposal to develop this site rather than relocating the Rotunda Hospital operations to other sites. It is submitted that the National Maternity Strategy (2016-2026) supports co-location with Connolly Hospital in Blanchardstown in line with Government policy to co-locate all Dublin maternity hospitals with Level 4 Acute Hospitals. It is stated that the proposal is mired in medical politics and that it represents a failure of healthcare planning.
- 7.2.2. The Dublin Civic Trust submit that they have engaged directly with leading paediatric and other medical consultants, concluding that there is not universal support for the proposal, that it does not represent clinical best practice, and that it is poor value for money. Both appeals propose alternative sites at The Mater and Temple Street Hospitals. It is further argued that continuing maternity services on this site would be sub-optimal, not viable, and that the Rotunda's presence on the site has reached a conclusion.
- 7.2.3. Whilst acknowledging the aim of the National Maternity Strategy to co-locate Dublin's maternity hospitals with Level 4 Acute Hospitals, Connolly Hospital in the case of the Rotunda, the Applicant contends that the National Maternity Strategy is approaching its review phase and that it is anticipated that current policy will be revised. It is also stated that the HSE and Department of Health recognise the need for substantial infrastructure investment at the Rotunda to address high clinical risks and that this

cannot wait for co-location to Connolly which will not be in place for at least another 20 years.

- 7.2.4. The Applicant considers the Appellants' points regarding a lack of universal support, clinical best practice and value for money to be unsubstantiated. Furthermore, the Applicant argues that the Rotunda is essentially already co-located with the Mater Hospital due to shared services, joint appointments and multi-disciplinary teams.
- 7.2.5. I note the provisions of the National Maternity Strategy regarding the aim of co-locating the Rotunda to Connolly Hospital. Re-location has not taken place within the lifetime of the strategy and there is no information before me to indicate that any meaningful progress has been made in this regard, not least the investment that would be required at Connolly Hospital to bring it to the relevant standard to enable co-location. In that respect, progress towards the aim of co-location is unclear. The HSE, whilst being committed to the National Maternity Strategy, is supportive of the Critical Care Wing proposal which is considered essential to address clinical risks in a cost effective and timely manner and the Rotunda Hospital has expressed its intention to remain on site long term.
- 7.2.6. The need for significant clinical infrastructure improvements at the Rotunda Hospital are clearly recognised, including the urgent need for additional capacity, the much needed provision of an improved Neonatal Intensive Care Unit (NICU) and improved infection control, and an improved Special Care Baby Unit (SCBU). Whilst I note that parties to the appeal refer to the Critical Care Wing as interim development, it would clearly be required for at least 20 years, even in an optimistic scenario, and as noted by the Applicant, the National Maternity Strategy is approaching a review phase whereby the matter of co-location may be revisited. Given the intentions of the Rotunda Hospital and the support of the HSE for the Critical Care Wing, on the face of it, it would seem the broad intention is to remain on this site long term.
- 7.2.7. Whilst I recognise the concerns raised by the Appellants in terms of co-location and wider healthcare planning, including site selection and the alternatives proposed by the Appellants, I do not consider that these are material considerations for the Commission in determining this appeal. The role of the Commission is to assess the specific development proposal at the subject site against the provisions of the development plan and to determine if the proposal constitutes the proper planning and

sustainable development of the area. It is not for the Commission to resolve wider strategic healthcare planning matters or clinical suitability. These are, in my opinion, matters for Government, including the Department of Health and the Health Service Executive (HSE) as well as the relevant service providers and medical professionals.

7.3. Zoning

- 7.3.1. A key issue raised in both the appeals and observations is that the proposed development would be contrary to the Z8 zoning objective which allows for only limited expansion. It is further stated that the language used in the application morphs the zoning and permitted uses into a de facto hospital zoning. The grounds of appeal submit that the floor area of the proposed Critical Care Wing would exceed that of all of the existing hospital buildings on site and does not represent limited expansion.
- 7.3.2. Various design, townscape and heritage impacts are raised. It is concluded that the development would be contrary to the zoning objective and the heritage policies of the CDP such that it would materially contravene the development plan and that the Planning Authority have failed to address this matter.
- 7.3.3. The Applicant argues that the Z8 zoning objective allows for health uses and that the scheme seeks to balance healthcare/employment and conservation objectives, rather than prioritising one over the other. Furthermore, the Applicant refutes claims that the proposals breach good planning and design practice, concluding that the development would be in compliance with national, regional, and local planning policy. The Planning Authority considered the proposed use to be open for consideration and raised no objections with regards to land use.
- 7.3.4. The site is zoned Z8: Georgian Conservation Areas, which seeks 'to protect the existing architectural and civic design character, and to allow only for limited expansion consistent with the conservation objective'. The aim is to protect the architectural character/design and overall setting of such areas while facilitating regeneration, cultural uses and encouraging appropriate residential development (such as well-designed mews) in the Georgian areas of the city.
- 7.3.5. Medical and related consultants are allowed under 'Permissible Uses', whilst buildings for the health, safety, and welfare of the public are listed as 'Open for Consideration'. I acknowledge the issue raised in the appeal regarding the perception of a de-facto hospital zoning however in my opinion the language used in the submission

documents is simply a reflection of the nature and character of the southern half of Parnell Square as the Rotunda Hospital and does not represent an intention to claim a hospital zoning. Given the long-term established hospital use on this site together with the provisions of the zoning objective, I am fully satisfied that the proposal is acceptable in land use terms and would be in accordance with the zoning objective in this respect.

- 7.3.6. The remaining issues raised by the Appellants under the CDP zoning objective and heritage policies have significant cross reference with the design, heritage and townscape issues that are also raised in the appeals. I will deal with these matters independently in the relevant sections of this report in order to avoid repetition.

7.4. Design, Heritage, and Townscape

- 7.4.1. The core design, heritage and townscape issues raised in the appeals relate to the scale, massing, form and detailed design of the proposed Critical Care Wing which is considered to be excessive and inappropriate. Concerns are raised regarding the location of the development on the west site of Parnell Square and the resultant impacts on the surrounding historic context of the Georgian townhouses, the Rotunda Hospital and the historic pleasure gardens, noting the significant number of Protected Structures within and surrounding the site. It is submitted that Parnell Square cannot accommodate a large building without damage to its historic setting. In this respect it is submitted that the development would enclose the square, creating a street edge on Parnell Square West and impacting on key views.

Design, Scale and Massing

- 7.4.2. The grounds of appeal state that the proposed Critical Care Wing would be excessive in scale, inappropriately located, and that it would create a canyon effect along Parnell Square. It is argued that the proposal would be alien to its context and would be monolithic in appearance.
- 7.4.3. The Applicant submits that the building was located and designed with regard to clinical requirements and the need to integrate into the unique setting. The Planning Authority requested design amendments at Further Information stage in order to address concerns regarding bulk and form but were ultimately satisfied with the proposal in scale, massing, design terms and accepted the justification regarding clinical adjacencies.

Location

- 7.4.4. The proposal would occupy and extend the footprint of the current Outpatients Department which sits on the west side of the hospital campus adjacent to Parnell Square West. This particular site within the campus was selected on the basis of the existing Outpatients Department and the required critical clinical adjacencies that require new departments such as a Labour and Delivery Unit and Neonatal Intensive Care Unit to have direct connections/proximity to other departments within the existing building, including the Theatre Department.
- 7.4.5. In addition to providing the necessary clinical adjacencies, the Outpatients Department was identified as being the most suitable for relocation in order to enable redevelopment to take place. In this regard I note that the Outpatients Department has been decanted to a new building on North Earl Street and that this would facilitate redevelopment whilst allowing critical clinical services to remain on site.
- 7.4.6. Overall, I am satisfied that the proposed location within the campus is appropriate and justified both in clinical/service provision terms and in terms of minimising impacts on the remainder of the hospital campus, including the logical redevelopment of an existing built footprint safeguarding the potential future provision of landscaped open space in the central area.

Height, Scale and Massing

- 7.4.7. In terms of scale and massing, the proposed building would generally occupy the footprint and extent of the existing out-patients department, although I note that it would extend the eastern building line a further 10m to the east (approximately). The development would be four storeys above basement, and a rooftop plant enclosure would be provided which effectively adds an additional storey, albeit set well back from the edges of the building.
- 7.4.8. Existing neighbouring buildings on the hospital campus include the Entrance Building, the Plunkett Cairns Wing and the Medical Residence, all of which are four storeys. The Main Building of the Rotunda Hospital rises to three storeys, albeit the equivalent height of the adjoining four storey Old Medical Residence. The Nurse's Home rises to five storeys and other buildings within the central area of the campus are generally in the order of two storeys. Adjacent to the site on Parnell Square West, the Georgian townhouses rise to four storeys above basement.

- 7.4.9. The proposed development at four storeys with an additional plant level is, in my opinion, within the prevailing heights of the area. Whilst I note that the proposed Critical Care Wing would have a parapet height higher than that of the adjacent Georgian townhouses, it is not a significant increase in townscape terms and it is mitigated by the width of Parnell Square West such that the increased height of the parapet would not be overly apparent nor would it read as a discordant feature. I acknowledge that the rooftop plant enclosure would add additional height, however this is recessed and I am satisfied that the set-back from the facades and the street edge is sufficient to mitigate this additional height. Both the parapet height and plant enclosure would, in my view, only be visible in the context of the adjacent townhouses when viewing southwards along Parnell Square West and in this view the street would also be viewed in the context of the taller buildings on Parnell Street.
- 7.4.10. I also acknowledge that there would be a step up in height from the existing adjoining hospital buildings, namely the Entrance Building, however, as evident from the CGI's, this would not be overly apparent from Parnell Square West, and I do not consider that the step up in height would be excessive.
- 7.4.11. Clearly the provision of the proposed Critical Care Wing on the site of the existing single storey Outpatients Department would represent a significant change in streetscape, however I do not consider that this would be harmful or that it would result in a canyon like presentation to the street and the set back from the street edge will allow some planting to take place behind the railings that will soften the street edge. In my opinion, the height, scale and massing are acceptable.

Limited Expansion

- 7.4.12. The zoning objective allows for limited expansion and the grounds of appeal argue that the development would be a new hospital rather than an extension. It is stated that the proposed floorspace would be more than that of the existing building and on that basis, it would not constitute limited expansion.
- 7.4.13. For Conservation Areas, the CDP sets a plot ratio range of 1.5-2.0 and a site coverage range of 45%-50%. In terms of this distinct site within the Rotunda campus, the proposed development would achieve a plot ratio of 1.83 and a site coverage of 53%. Site coverage would therefore be above the CDP range but not by a significant margin and I note that Appendix 3 of the CDP provides for a higher site coverage in

circumstances that include facilitating the strategic role of significant institutions/employers, such as a hospital.

- 7.4.14. Furthermore, whilst the application is submitted as a discrete site within the wider Rotunda campus, I consider it appropriate to have regard to the wider hospital site. In this case, the Applicant's submission details that the existing gross floor area of the hospital is 22,493sqm with a site coverage of 39% and a plot ratio of 1.0. With the proposed development in place, floorspace would rise to 31,160sqm, plot ratio to 1.4, and site coverage to 43%.
- 7.4.15. Taken together with the scale and massing of the development, which is broadly in alignment with the existing hospital buildings and within the prevailing heights of the surrounding area, including the Georgian townhouses of Parnell Square West, I am satisfied that the proposal would represent limited expansion.

Detailed Design

- 7.4.16. In terms of the façade treatment, I am supportive of the amendments that took place at Further Information stage. I consider the composition of the facades to be much improved from the original submission. Scale and massing have been refined and the roof-plant has been reduced in height and extent, forming a more recessive feature than the original proposal. In terms of materials, the use of brick successfully contextualises not just with the existing hospital buildings but also with the Georgian townhouses of Parnell Square. The facades have improved articulation through the introduction of the plinth and the deeper reveals, which are further enhanced by the use of stone. The amendments to the facades successfully modulates the massing and helps reduce the perception of bulk whilst providing visual interest. Overall, the character, form, and rhythm of the facades would, in my opinion, be a suitable addition to this area having regard to the character of the site surroundings.

Protected Structures

- 7.4.17. As noted previously, the site itself includes the Plunkett Cairns Wing and Old Medical Residence which are listed on the RPS. The wider Rotunda campus includes further Protected Structures including the Rotunda Hospital Main Building, The Rotunda Hospital Chapel and The Gate Theatre. The majority of buildings surrounding Parnell

Square are also Protected Structures, including the majority of the Georgian townhouses, the Abbey Presbyterian Church (Findlater's Church) and the former Ambassador Cinema.

- 7.4.18. Physical works to Protected Structures to enable the proposed development would be limited to some internal works to the Plunkett Cairns Wing and the Old Medical Residence at second floor level. The internal interventions in the Old Medical Residence building are limited to the removal of approximately three non-original partition walls and a small section of another internal room wall that may be original fabric but has likely already been subject to previous alterations. The overall extent of works are very limited, and I do not consider that they would have any demonstrable effect on the character of the Protected Structures. In terms of the internal alterations to the Plunkett Cairns Wing, the Commission should note that the RPS only covers the facades of this building. Notwithstanding, I would note that the internal arrangement of this building has been heavily modified over the years, and no fabric of heritage value is proposed for removal. Wider impacts on townscape, views, and the setting of Protected Structures are considered in more detail in the townscape section below.

O'Connell Street Architectural Conservation Area

- 7.4.19. The grounds of appeal state that the development would cause harm to the O'Connell Street Architectural Conservation Area and that the Planning Authority have undertaken no analysis of the impact on same, with the Appellant referencing recent Supreme Court judgements on heritage matters. It is submitted that the fundamental character of the ACA at this location is the original view from the rear of the Rotunda towards the garden square and enclosing Georgian houses and that the development would destroy this view and radically alter the protected character, contrary to Policy BHA7.
- 7.4.20. The O'Connell Street ACA extends westwards from O'Connell Street along Parnell Street, encompassing the buildings on or close to this street frontage on the southern portion of the Rotunda Hospital Campus, including the Plunkett Cairns Wing, the Old Medical Residence, and the Rotunda Main Building, in addition to The Gate Theatre and the Ambassador Theatre. The site of the proposed Critical Care Wing itself is not located within the ACA, and I note that no development would take place within the

ACA. As mentioned previously, some internal works would take place within the Plunkett Cairns Wing and the Old Medical Residence, but these works would be internal only and would have no measurable impact on the ACA.

- 7.4.21. I disagree with the Appellant's contention that the fundamental character of the ACA at this location is the original view from the rear of the Rotunda towards the garden square and enclosing Georgian houses. In my opinion, the fundamental character of the ACA is the streetscape environment and the buildings that form the edges of the main thoroughfares within the ACA itself and the interrelationship between same. As noted in the Architectural Heritage Protection Guidelines, the special interest of an ACA is derived from the collective value of the area rather than the merit of individual buildings. The boundary of the ACA has clearly been drawn to include the Protected Structures on the Rotunda Campus due to the contribution they make to the streetscape setting. The Guidelines state that the boundary of an ACA should be clearly defined and that it should be drawn to include all features that contribute to the special character of the area.
- 7.4.22. Arguably, had the intentions of the Planning Authority been to protect views from the rear of the Rotunda then the ACA boundary would have been extended to cover such. That is not to say that I do not consider the views from the rear of the Rotunda to be of importance. Clearly, they are of significance in townscape terms, and these matters are dealt with in the townscape section of the report.
- 7.4.23. The proposed Critical Care Wing would only be visible in views outwards from the edge of the ACA, at Parnell Street and Parnell Square West in which case its scale, massing and appearance would align with the existing hospital buildings on Parnell Square West and the Georgian townhouses opposite, and in views towards the edge of the ACA southwards along Parnell Square West where the context would also include the taller buildings on Parnell Street. Overall, I do not consider that the proposed development would have any significant impact on the O'Connell Street ACA.
- 7.4.24. Whilst a small portion of the site relative to the Protected Structures is located within the ACA, no external physical works are proposed on this land. Regardless, I have considered the potential for indirect impacts on the character and setting of the ACA in terms of the relationship of the development to the ACA, built form and intervening

development/character. In my opinion, the development would not have a material impact on the character or setting of the O'Connell Street ACA, nor would it undermine the appreciation of the wider ACA.

Townscape and Visual Impact

- 7.4.25. The grounds of appeal raise concerns regarding the impact of the development on the wider townscape of the area, having regard to the sensitivity of the surrounding heritage and built context. It is argued that the development would further enclose the square and impact on views into, out from and across the square, including impacting on views of the rear of the Rotunda Hospital building. It is submitted that the position of the viewpoints is selective and that they obscure the impacts of the development. Further concerns are raised regarding the conclusions of the TVIA, with the Appellants disagreeing with the conclusion that there would be positive effects overall.
- 7.4.26. The Applicant contends that the photomontages/viewpoints are accurate and comprehensive, having been undertaken in line with relevant guidance, concluding that the effects would be neutral to positive overall. Whilst acknowledging the impact of the development on views towards the rear of the Rotunda, the Applicant notes that the remaining principal elevations of the Rotunda Main Building would remain unaffected and that compact growth in a city centre location reasonably requires some level of additional enclosure and impact on views.
- 7.4.27. The Application was accompanied by a Townscape and Visual Impact Assessment (TVIA). This was updated as part of the Further Information request, taking into account the scheme amendments. The TVIA is based on an assessment of 17 viewpoints covering six townscape/visual receptors from key points around and within Parnell Square. I am satisfied that the number and location of viewpoints is acceptable and allows for a comprehensive assessment of townscape impacts. On that basis I do not agree with the assertion in the appeal that the viewpoints are selective or that they downplay potential impacts. I will address each viewpoint/receptor in turn.

Parnell Street

- 7.4.28. Viewpoint 1 (Junction of Parnell Street and Parnell Square West) – The Critical Care Wing would be visible in this view northwards up Parnell Square West. Whilst it would be afforded significant screening by the trees outside of the Entrance Building, including in winter, it would still be clearly discernible, although I do not find that it

would be harmful to the view. Despite its low-rise nature, the Outpatients Department provides a street edge and this would become more prominent and defined with the proposed development in place. The Critical Care Wing would generally be in alignment with the heights of the existing hospital buildings. The set back from the street edge is readable and the plinth and various façade recesses enhance articulation and help reduce the perception of bulk. In terms of the relationship to the Georgian townhouses opposite, the Critical Care Wing would not appear dominant or overbearing and the nature, character, and setting of the street would not be compromised. The design detail of the Critical Care Wing successfully contextualises with these buildings in terms of the rhythm and form of fenestration, ordering, and materiality. Whilst it would represent a significant addition, it would not be incongruous in my opinion. I agree with the conclusion of the TVIA that the effect on this view would be not significant/neutral.

- 7.4.29. Viewpoint 2 (Moore Lane towards Parnell Street) and Viewpoint 14 (Parnell Street, east of O'Connell Street Junction) –The development would not be visible in these views. There would therefore be no change to the views and no effect of any significance.

Parnell Square West

- 7.4.30. Viewpoint 3 (Opposite Entrance Building) – Despite being a prominent addition to this view, the Critical Care Wing avoids being an overly dominant addition through the detailed design of the facades including the parapet heights and articulation which reflect the existing buildings and the materiality and pattern of fenestration that reflects aspects of the Georgian townhouses as well as contextualising with the existing hospital buildings on Parnell Square West. I note the concerns raised in the appeal that the development would turn Parnell Square West into a street, however, the presence of the existing Outpatients Department already provides a street edge as far as the Mortuary.
- 7.4.31. The loss of the Outpatients Department would be entirely acceptable and would not have any negative impact on streetscape. The Critical Care Wing would provide a more defined street edge, and the facade design and materiality help alleviate concerns regarding bulk and mass, with the building appearing well integrated into the streetscape. Whilst the rooftop plant would be slightly visible, it is not a dominant or

obtrusive feature. In this view, the Critical Care Wing does not interfere with any views, nor does it directly impact on any Protected Structures. I do not consider the Critical Care Wing to be a harmful addition to this view, nor would it have a significant negative effect on the overall conservation setting. Overall, I would consider the effects on this view to be largely neutral.

7.4.32. Viewpoint 4 (Parnell Square West towards the north of the site) – In the existing scenario, there is a partial view towards the rear façade of the Rotunda Hospital, with the top floor and cupola being visible above the Outpatients Department, framed between the Mortuary and the Entrance Building. In terms of height and detailed design/facade composition, I am satisfied that the proposal is largely in alignment with the existing hospital buildings and the Georgian townhouses opposite and that it would integrate well with the context of the streetscape and the surrounding architectural character. The building would provide a more defined street edge in comparison to the rather weak and undefined Outpatients Department and the view southwards down Parnell Square West is varied, taking in the taller and more modern buildings on Parnell Street that terminate the view at the end of the street.

7.4.33. However, the view of the rear of the Rotunda is a significant contributor to this view and by bridging the gap between the Mortuary and the Entrance Building, the proposed Critical Care Wing would entirely block the view of the rear of the Rotunda Main Building from this section of Parnell Square West, and in my opinion, this is a significant negative effect that would substantially alter this view. However, despite the pleasant nature of the view, it is not listed in the CDP as a key view or prospect and whilst its loss would undoubtedly be a negative effect, the view is somewhat transient, short range, and very localised to a short section of Parnell Square West.

Granby Row

7.4.34. Viewpoint 5 (Granby Row towards the north of the site) – The Critical Care Wing would be a prominent addition to the view, but the northern elevation would be significantly screened by the existing trees within the north of Parnell Square/Garden of Remembrance. As with Viewpoint 4, the Critical Care Wing would largely obscure the view of the cupola of the Main Hospital Building, however this is very much screened by the trees in the existing scenario and as such the additional screening provided by the Critical Care Wing is somewhat limited. Whilst the building appears slightly taller

than the existing hospital buildings on Parnell Square West in this view, this is largely reflective of the stepped arrangement of the street, and I note that the Critical Care Wing does not appear excessive or overly dominant within the streetscape when viewed in the context of the adjacent townhouses. The rooftop plant is more visible in this view however, in my opinion it is still a recessive feature. In my view the proposal would have a neutral effect on this view.

- 7.4.35. Viewpoint 6 (Dorset Street/Granby Row) – Again, the addition of the Critical Care Wing would clearly be a prominent addition to this view however, the view of the cupola is largely unaffected. The lower part of the roof plant would sit midway across the drum however this would be well below the copper dome, and the remainder of the roof plant would step away from the cupola to the west allowing this view to be largely preserved. It should be noted that the most visible part of the cupola in this view is the copper dome, particularly considering the significant screening of the lower parts of the cupola by the trees of Parnell Square North. Whilst the Critical Care Wing would be a significant addition to this view, I consider that the effects would be largely neutral overall.

Parnell Square North

- 7.4.36. Viewpoint 7 (Entrance to Hugh Lane Gallery) – In this view southwards from the entrance to the Hugh Lane Gallery, the view encompasses the Garden of Remembrance which is viewed within the surrounding context of the existing hospital buildings, including the Nurse's Home and the rear of the Entrance Building, as well as the Georgian townhouses of Parnell Square West. The Critical Care Wing would be visible centrally in this view, just beyond the Garden of Remembrance. It would result in an increase in built form however this would not be uncharacteristic of a city centre location. The Critical Care Wing does not appear over scaled or overly dominant in the view and the existing trees of Parnell Square West, and the Garden of Remembrance would offer a significant degree of screening for much of the year with a significant amount of filtering still evident in a winter scenario. I conclude that the effect on this view would be neutral.

Garden of Remembrance

- 7.4.37. Viewpoint 8 (Raised Eastern Area at Sculpture) – The Critical Care Wing occupies the gap between the Nurse's Home and the and the memorial wall/trees of the western

extent of the Garden of Remembrance. Currently, the rear of the entrance building and the recent hotel development on Parnell Street occupy this portion of the view. The stepped nature of the building is evident as is the recessive nature of the roof plant. Whilst being a prominent addition to the view, the Critical Care Wing does not dominate or draw attention away from the focal point which remains the Children of Lir sculpture. The TVIA categorises the effect on this view as being moderate neutral and I agree with this finding.

7.4.38. Viewpoint 9 (Sunken Area at Reflection Pool) – Again, the Critical Care Wing would occupy the space between the Nurse’s Home and the Memorial Wall however the scale of the building is largely aligned with that of the Nurse’s Residence. Whilst there would be some additional enclosure, this would relate to a small section of the Garden of Remembrance, limited to the south west section of the site and although the Critical Care Wing would be a clearly visible and prominent addition to the view, it would not in my opinion, draw attention away from the focal point of views within the Garden of Remembrance, which is the westwards view to the Memorial Wall and the Children of Lir sculpture. Overall, I concur with the conclusion of the TVIA that the effect on this view would be moderate neutral.

7.4.39. Viewpoint 10 (Parnell Square East at Entrance) – The Critical Care Wing would be visible to the south-west when viewing the Garden of Remembrance from the entrance on Parnell Square East. The Critical Care Wing would be viewed peripherally in the context of surrounding urban development, including the Georgian townhouses on Parnell Square West and as such would not be an incongruous addition. In this view the separation of the Critical Care Wing from the Garden of Remembrance is clearly discernible. I agree with the conclusion of the TVIA that the effect of the development on this view would be slight-moderate neutral.

Parnell Square East

7.4.40. Viewpoint 11 (Parnell Square East/Gardiner Row) – The context of this view is very much a city centre location with views along Parnell Square East towards O’Connell Street clearly visible alongside buildings of varying scale and design. In this view the Critical Care Wing would appear beside and above (roof plant) the existing Nurse’s Home although significant screening would be provided by existing mature trees within the Garden of Remembrance. The building would screen the view of some of the

Georgian townhouses on Parnell Square West but in my opinion this is not significant, particularly considering the very significant screening provided by the existing trees. I am satisfied that the effect on this view would be slight neutral.

7.4.41. Viewpoint 12 (View east across Parnell Square) – This view looks west/south-west across Parnell Square. Key features in the view are the rear of the Rotunda Main Building, the Nurse's Home and the low-rise modern buildings in the central and eastern sections of the hospital campus. The rooftops of some of the Georgian townhouses on Parnell Square West can be seen just above the hospital buildings. The proposed Critical Care Wing would be visible to the left of the Nurse's Home, above the low-rise campus buildings. The view of the rooftops of the Georgian townhouses would be lost, however, these were not highly visible, and the loss of the view is not significant in my mind. Additionally, the existing trees offer a significant level of screening. The view of the rear of the Rotunda Main Building would remain unchanged. I am of the opinion that the overall effect on this view would be neutral.

7.4.42. Viewpoint 13 (View east across Parnell Square) – This view looks west/north-west from Parnell Square East, and the general composition of this view is similar to Viewpoint 13 with the exception that the Rotunda Main Building is not visible and a greater extent of the rooftops of the Georgian townhouses on Parnell Square West are visible. The Critical Care Wing would be much more visible in this view, filling the gap between the Entrance Building and the Nurse's Home and removing the view of the adjacent rooftops. The scale of the building generally aligns with the existing hospital buildings (Entrance Building and Nurse's Home) and the Critical Care Wing is not excessive in its scale and massing or obtrusive in its form. Whilst I acknowledge that it would offer increased enclosure, I do not consider that it would be harmful when considering the existing nature of the view and the established hospital buildings. The TVIA categorises the effect on this view as moderate neutral which I agree with.

Rotunda Hospital Campus

7.4.43. Viewpoints 15, 16 and 17 are from within the central courtyard of the Rotunda Hospital. Viewpoints 15 and 16 are largely the same view looking north-west from two points within the car park close to the rear elevation of the Rotunda Main Building. In these views there is clear visibility of the Georgian townhouses above the Outpatients Department, in between the Entrance Building and the Nurse's Home. Viewpoint 17

looks due west from the Master's Garden and again there is a clear view of the upper levels of the Georgian townhouses. The Critical Care Wing would undoubtedly be a prominent addition to this view, and it would largely enclose the west side of the campus. The scale of the building itself does not appear excessive when viewed in the context of its neighbouring hospital buildings such as the Entrance Building and the Nurse's Residence. However, with the Critical Care Wing in place, the view of the Georgian townhouses would be lost from all three viewpoint, albeit from within the hospital courtyard rather than a public space or street. Whilst there would be some positive benefits for these views in the form of removal/relocation of some support structures, reductions in car parking and opportunities for increased landscaping, the overall effect of the development on this view would be moderate negative.

Conservation Gain

- 7.4.44. It is submitted by the Appellants that the proposal does not include a long term plan for the historic buildings on site, and it is argued that the buildings are being poorly maintained and require investment and repair that the proposal does not provide for.
- 7.4.45. The Applicant indicates that the hospital has been operating beyond capacity and that the development would alleviate pressure on the historic buildings, allowing a gradual phasing out of inpatient facilities from the 18th century buildings and allowing the upper floors to be converted to administrative use, allowing greater public access to the building and improving accessibility to the chapel at first floor level.
- 7.4.46. Following the submission of a revised conservation strategy at Further Information stage, I note that enhanced conservation gain is now proposed for the historic buildings. In addition to the future conversion of the Rotunda Main Building to administrative and non-critical clinical services, thereby allowing greater public access, the removal and rationalisation of services structures within the former gardens and opportunities for enhanced landscaping will offer an improvement to the historic setting.
- 7.4.47. It is also submitted that the Rotunda is committed to carrying out a phased conservation led upgrade of the timber sash and case windows to all of the Protected Structures on the campus, including the Plunkett Cairns Wing, the Old Medical Residence and the Rotunda Main Building, noting that the Plunkett Cairns Wing will

be prioritised given its importance to the receiving environment of the proposed development.

- 7.4.48. The gap between the Plunkett Cairns Wing and the Old Medical Residence as well as between the building façade and the railings to Parnell Square West have been identified as locations for improved landscaping in the form of modular planters.
- 7.4.49. Further improvements proposed for the Plunkett Cairns Wing include conservation works to the brick and faience façade to address staining and gypsum crusts to the faience details. These works would also include the removal of redundant services and pipework and local repairs to brickwork by a specialist brick conservator.
- 7.4.50. Overall, the conservation led works to the Plunkett Cairns Wing, the phased window replacement to the remaining protected buildings and the opportunities to remove redundant services structures/provide improved open space within the central courtyard area are acceptable. The proposals are a suitable level of conservation gain as part of the development and indicate a wider strategy for improvements to the hospital campus buildings. Furthermore, I would note that the development itself does not preclude further beneficial works taking place to the Protected Structures or the central courtyard.

Conclusion

- 7.4.51. Parnell Square is one of the five great squares of Dublin's historic Georgian core and as such the architectural, cultural, and civic heritage value is significant. The development of the square was linked to the establishment of the Rotunda Hospital, which moved to its present location on Parnell Square in 1757, and has operated as a maternity hospital ever since, becoming the oldest continuously operating maternity hospital in the world.
- 7.4.52. The Rotunda was founded as a charitable institution, and the former pleasure gardens played a significant role in financing the hospital. In this respect, the pleasure gardens were commercial in nature and functioned as a type of public attraction. They were a curated, enclosed, and managed space with admission fees being central to the fundraising of the hospital.
- 7.4.53. Parnell Square therefore differed significantly from other typical Georgian 'garden' squares as a result of the nature of the pleasure gardens and their role in connection

with the rotunda hospital which is positioned within the square itself and has arguably been its defining element since its inception, through both its presence and its function/role.

- 7.4.54. The square has changed considerably over the years. Initial expansion commenced in the late 19th century with the construction of the former Doctor's Residence and the Plunkett Cairns Wing (c. 1895). Further development took place in the former pleasure gardens in the first half of the 20th century with the construction of the Old Medical Residence in 1906 and the Outpatients Department in 1936. The latter half of the 20th century saw the construction of the Nurse's Home in 1950 and the Entrance Building in 1991. The Garden of remembrance was constricted in the north section of the square in 1965 and an extension to the Gate theatre was built c. 2010.
- 7.4.55. Further modern development that has taken place in the Rotunda grounds include the Colposcopy/Mortuary/Chaplaincy/IT block, the private/semi-private clinic buildings, the Ambulatory and Gynaecology Block, the Technical Services Building and the collection of temporary buildings that house physio, mental health and occupational health in the central part of the campus. A new temporary radiology block is also currently under construction.
- 7.4.56. Successive developments over the past 130 years have therefore materially altered the setting, form and character of Parnell Square, with the interior and edges of the square undergoing significant development attributable to the changing needs and demands of the hospital, in addition to civic projects such as the Garden of Remembrance. The originally conceived Rotunda Hospital and pleasure gardens set piece has therefore not existed in any recognisable form for a considerable period of time. I note the Appellants' view that the gardens remain largely intact, however, it is my opinion that with the exception of the small Master's Garden and central footpath, there is very little coherent or substantially readable form and remains are largely fragmentary.
- 7.4.57. As is evident from the Rotunda's history, hospitals by their very nature and function are required to be adaptable and evolutionary spaces. The Rotunda has undertaken various extensions, adaptations, and reconfigurations over the years in response to clinical demands and regulatory requirements, evolving in situ in its historic base at Parnell Square. It is therefore my opinion that the hospital and its overall operation are

a significant defining feature of the interior of Parnell Square and that this has been an established reality for a considerable period of time.

- 7.4.58. Parnell Square and its surroundings are clearly a heritage setting of the highest order, as evident from the number of Protected Structures that line the square and the Georgian Conservation Area designation. The development, whilst largely occupying an existing built footprint, would replace a single storey building with a four storey building and associated plant level. The increased scale, massing, and footprint of the Critical Care Wing, in addition to its location on the interior edge of the square is such that there will be clear heritage impacts.
- 7.4.59. As set out in the foregoing assessment, the most significant of these impacts would be the loss of the view of the rear of the Rotunda Main Building, a Protected Structure, from a section of Parnell Square West as well as the view outwards to Parnell Square West from the rear grounds of same. This would affect the setting of the Protected Structures of the Rotunda Main Building and Parnell Square West and I consider that, in this respect, the development would result in moderate harm overall.
- 7.4.60. Views towards the rear of the Rotunda and visibility of the cupola make an important contribution to the setting of Parnell Square West. However, I find that the view is already somewhat compromised due to its congested nature and the presence of other hospital buildings, with only the top floor and cupola being visible in the gap between the Mortuary and Entranec Building, and above the Outpatients Department. Furthermore, this view is short range, transient, and localised, relating to a relatively short section of Parnell Square West, rather than a comprehensive view that characterises or defines the wider setting of Parnell Square and the Georgian Conservation Area. The impact of the development, whilst clearly harmful in respect of the view itself, would be limited in terms of the overall character and setting of the Conservation Area.
- 7.4.61. Views outwards from the rear of the Rotunda main building, and from within the central Rotunda grounds would likewise be blocked, but this view is even more localised due to the location within the central grounds of the hospital rather than being a view from a public vantage point or a street/public open space. Additionally, this view would be within the context of the many existing buildings that characterise the Rotunda

campus. The contribution of this view to the character and setting of the Protected Structures and Conservation Area is therefore very limited in my opinion.

7.4.62. I recognise the significance of the heritage setting and the impacts that the development of the Critical Care Wing would have on the aforementioned views and the character and setting of both Protected Structures and the Conservation Area, in addition to the interior of Parnell Square itself and views across this space from the enclosing streets. Whilst no direct loss of historic fabric is proposed, save for a small section of boundary wall/railings and minor works to an internal wall within the Old Medical Residence, I acknowledge that the development would result in a degree of harm to heritage assets and the historic setting. This harm is not negligible and it is a material consideration of significant weight.

7.4.63. However, as stated previously, the presence and operation of the Rotunda Hospital on this site is, in my opinion, a significant defining feature of Parnell Square. It is therefore my view that the development has to be looked at in the context of the longstanding and continued evolution of the hospital on this site and the changing nature of the site and townscape, despite its heritage setting, in response to the changing needs, clinical demands and regulatory environment of the hospital. Consequently, whilst acknowledging that the Critical Care Wing would result in a degree of heritage harm, I am not of the opinion that the harm would be so significant as to outweigh the very substantial public benefits that would arise from the proposed development.

7.4.64. These benefits are measurable and significant and would deliver a critical piece of healthcare infrastructure that would address the considerable clinical, operational and spatial challenges currently faced by the Rotunda Hospital in the delivery of care, particularly in the context of increasing demand. Although I acknowledge that architectural heritage protection is a key objective of the development plan, consideration has to be given to the function of existing buildings/sites and the need for adaptation and appropriate development.

7.4.65. As such, despite architectural heritage protection being a fundamental objective, there has to be a degree of balance regarding development, particularly where there are significant competing public interests, such as the delivery of essential healthcare. Although the impact on views and the character and setting of the Protected

Structures, Conservation Area and Parnell Square itself are regrettable, they are limited, localised, and on balance, do not undermine the wider architectural coherence, character, or setting of Parnell Square and its surrounding historic environment. I therefore consider the proposal to represent an overwhelming public benefit to which I afford significant weight in my assessment, and I am satisfied that this benefit is sufficient to justify the degree of heritage harm identified.

7.5. Masterplan

- 7.5.1. It is stated in the appeals that the masterplan submitted with the application demonstrates an intent to develop the campus with medical facilities, presuming a build out of Parnell Square to the detriment of its heritage, ambience, legibility of open spaces, and the character of the square itself. It is submitted that the future masterplan fails to give sufficient consideration to the Civic Spine and whilst it does provide for a central open space, this would be private to the hospital and tokenistic.
- 7.5.2. The Applicant contends that any future development would require planning permission, noting that the masterplan demonstrates that the proposed development would not prejudice any future development and that it aligns with SDR10. In terms of open space provision, it is argued that the masterplan proposal represents an enhancement and whilst this space would be private to the hospital, due to staff and patient protection requirements, it should be noted that there was never unrestricted access to the former pleasure gardens throughout the hospitals history, given that admission fees were charged in order to fund the hospital.
- 7.5.3. I note the broad concerns of the Conservation Officer with regard to the Masterplan, most notably the potential loss of the Nurse's Home, which is considered to be of architectural interest. I would agree with the Conservation Officer that the Nurse's Home is clearly of merit and that any future demolition of this building should be resisted. Whilst the masterplan may show the Applicants preferred options for the potential future development of the hospital campus, it is, in my opinion, purely indicative. Its inclusion in the suite of application documents is in response to the requirements of SDRA10 in requiring a concept plan but its inclusion in the application documents does not imply acceptance of the various options set out in the document. The proposal before the Commission is limited to the Critical Care Wing and should any form of development beyond that set out in the notices be pursued at a future

date, then that would require a separate planning permission and would be subject to the formal planning process.

7.6. Material Contravention

- 7.6.1. As set out earlier in this report, it is stated in the appeals that the development would result in a material contravention of the development plan due to non-compliance with the Z8 zoning objective in addition to other heritage related policies of the CDP. It is further stated that the Planning Authority failed to identify a material contravention.
- 7.6.2. The issue of a material contravention is clearly a matter of judgement. In this instance, it is evident that the Planning Authority did not consider the development to materially contravene the development plan. In assessing the issue of a potential material contravention, I have given consideration to the Z8 zoning objective, which is the principal issue raised by the Appellants and observers. The Z8 zoning objective seeks to protect the existing architectural and civic design character, and to allow only for limited expansion consistent with the conservation objective'. The aim is to protect the architectural character/design and overall setting of such areas while facilitating regeneration, cultural uses and encouraging appropriate residential development (such as well-designed mews) in the Georgian areas of the city.
- 7.6.3. I have addressed the matter of limited expansion in detail in paragraphs 7.4.12 - 7.4.15 above. In summary, I consider that the plot ratio and site coverage are acceptable and when considered alongside the scale and massing of the development, which is broadly in alignment with the existing hospital buildings and within the prevailing heights of the surrounding area, including the Georgian townhouses of Parnell Square West and I am therefore satisfied that the proposal would represent limited expansion. Furthermore, whilst I have identified clear heritage impacts, for the reasons set out previously and by virtue of the localised nature of the impacts, I do not consider that the development would have any significant impact on the architectural character/design and overall setting of the Z8 Georgian Conservation Area. In this respect I do not consider that a material contravention has taken place in terms of the Z8 zoning objective.
- 7.6.4. I have also considered the development against the relevant heritage policies of the CDP, including:
- SC2: City's Character

- BHA2: Development of Protected Structures
- BHA7: Architectural Conservation Areas
- BHA9: Conservation Areas
- BHA10: Demolition in a Conservation Area
- BHA11 Rehabilitation and Reuse of Existing Older Buildings
- BHA24 Reuse and Refurbishment of Historic Buildings

7.6.5. I have addressed the impact of the development on Protected Structures, Architectural Conservation Areas and Conservation Areas, and the demolition of the Outpatients Department in detail in Section 7.4 above. My assessment concluded that the Outpatients Department was of no architectural merit and I have no objection to its demolition. I concluded that there would be very limited intervention to the physical fabric of Protected Structures and that there would be no impact on the Architectural Conservation Area. My assessment identified harm to some views of Protected Structures (Rotunda Main Building) however this was very localised, short range and transient. Harm was also identified to views outwards to the Georgian Conservation Area (Parnell Square West) from the Rotunda grounds, however I am of the view that this view is also very localised and does not affect the wider conservation area overall. Having regard to my assessment as set out in full in Section 4 of this report and having regard to the development plan as a whole, I am of the view that the proposal would not result in a material contravention of the development plan.

7.6.6. Should the Commission disagree with my conclusion on this matter and consider the development to result in a material contravention of the development plan, then regard would need to be had to Section 37(2)(a) of the Planning and Development Act 2000 (as amended) which states:

7.6.7. *37(2)(a) - Subject to paragraph (b), the Board may in determining an appeal under this section decide to grant a permission even if the proposed development contravenes materially the development plan relating to the area of the planning authority to whose decision the appeal relates.*

7.6.8. In this instance, section 37(2)(b) and its subsequent requirements (i-iv) would not apply as the Planning Authority did not refuse planning permission. In these circumstances the Commission should not consider itself precluded from granting planning permission.

7.7. Other Matters

Bats

- 7.7.1. Whilst not raised in the appeals or observations, I note that a bat survey was undertaken as part of the Appropriate Assessment Screening. A walkover survey to assess bat potential was undertaken by a bat specialist within the appropriate survey period. The walkover survey identified trees, buildings or other structures that had potential to hold roosting bats for targeted surveys.
- 7.7.2. The survey notes that whilst foraging bats were recorded on the hospital campus, no bat roosts or signs of former bat occupancy were recorded within either the Outpatients Department building that is to be demolished, or the trees that are proposed to be felled on site, albeit noting that some of the trees had Potential Roost Features (PRF) despite not showing any direct evidence of bat roosts. The bat survey concluded that pre-construction surveys (including maternity and wintering roost surveys) should be undertaken in advance of demolition works/tree felling, including the additional seven dead trees proposed for removal, and that an Ecological Clerk of Works be employed during the demolition/construction phase to monitor for signs of bats and bat disturbance.
- 7.7.3. I note that the Planning Authority did not apply the relevant conditions. As such I have included a condition requiring pre-construction/demolition bat surveys, to confirm the baseline condition detailed in the submitted bat survey. I recommend that the Commission include this condition in the event that permission is granted.

Construction Impacts

- 7.7.4. The grounds of appeal raise concerns that the development would turn Parnell Square into a construction site for many years and that this would have an impact on the public realm, patients/staff/amenity and heritage. I accept that healthcare developments are, by their nature, complex construction projects, and I also acknowledge that such construction projects can result in disturbances, nuisance and impacts on visual amenity of the environment around the site. However, the demolition and construction phase are short term and temporary and it has to be acknowledged that for development to take place in urban environments, a certain level of temporary construction related impacts are somewhat unavoidable. Nevertheless, I am satisfied that the implementation of a Demolition and Construction Environmental Management

Plan will be sufficient to minimise potential impacts and reduce disturbance and nuisance to acceptable levels.

Cultural Strategy

- 7.7.5. It is stated in the observation from Mr Molloy that Dublin City Council were not legally entitled to consider the application as it is contrary to the CDP and does not include a Cultural Impact Statement. Whilst Mr Molloy has not elaborated on this point in terms of policy references, it is likely that it is in reference to appears to be in reference to Objective CUO30 which requires large developments over 10,000sqm to undertake a cultural audit. The proposal does not meet this threshold and as such an audit would not be required. I have also given consideration to CUO25 of the CDP which requires development in the SDRA to provide a minimum of 5% community, arts and culture spaces. In my opinion the proposed use would constitute a type of community facility, and this requirement would not be triggered.

Expenses

- 7.7.6. The Commission should note that the Dublin Civic Trust have submitted an expenses claim as part of their appeal.

Planning Authority Assessment

- 7.7.7. I note that the grounds of appeal make various references to the Planning Authority's assessment of the application and perceived deficiencies in the assessment, including that heritage impacts were not properly considered, that a material contravention was not identified and that the Planning Authority expressed support for the development prior to assessing it. It is not a matter for the Commission to address perceived or actual deficiencies in the Planning Authority's assessment. In any event, issues regarding heritage impacts and a potential material contravention have been addressed previously in the foregoing assessment.

Restoration of Parnell Square

- 7.7.8. A number of points are raised in the appeal regarding the impact of the development on the potential future restoration of Parnell Square and that failure to relocate the hospital would represent a lost opportunity to transform Parnell Square as a historic and cultural amenity of national importance. The Applicant states that restoration of

an open square of gardens is not compatible with the retention of an operational Rotunda Hospital, which must be allowed to develop.

- 7.7.9. I note the recent permission for the Parnell Square Cultural Quarter on Parnell Square North as well as the Planning Authority's broad ambitions regarding the Civic Spine, neither of which I consider would be directly affected by the proposal. In terms of restoration of Parnell Square and its gardens, I am not aware of any proposals or long-term strategy that seeks a restoration. Clearly, any meaningful proposal towards restoration of the former pleasure gardens, which I have noted previously have not existed for a significant period of time, would be entirely contingent on the wholesale relocation of the Rotunda Hospital. From the information before me and having regard to the submissions on the appeal, there is no evidence that the Rotunda is likely to relocate in the medium term at the very least. Future aspirations to restore the former pleasure gardens is not, in my mind, a reason to withhold consent, having regard to the reality of the current and ongoing Rotunda operations on this site.

8.0 AA Screening

- 8.1. I have considered the proposed development at the Rotunda Hospital in light of the requirements of S.177U of the Planning and Development Act 2000 as amended. The proposed development is located within central Dublin and would comprise an extension to the existing hospital, providing c. 9,946sqm of floorspace in a building rising to four storeys above basement with an additional rooftop plant enclosure.
- 8.2. The closest European Sites, part of the Natura 2000 Network, are those of Dublin Bay, namely:
- South Dublin Bay and River Tolka Estuary SPA (Site Code: 004024) 2.3km to the east.
 - South Dublin Bay SAC (Site Code: 000210) 3.75km to the east.
 - North Dublin Bay SAC (Site Code 0000206) 5.35km to the east.
 - North Bull Island SPA (Site Code 0004006) 5.4km to the east.
 - North-West Irish Sea SPA (Site Code 004236) 7.5km to the east.
- 8.3. Having considered the nature, scale and location of the proposed development, I am satisfied that it can be eliminated from further assessment because it could not have any effect on a European Site. The reason for this conclusion is as follows:

- The nature of the development on a brownfield, central Dublin site and the lack of any meaningful impact mechanisms that could significantly affect European Sites.
- The city centre location and the availability of municipal wastewater services to accommodate the development.
- The distance of the site from the nearest European Sites, the built-up urban nature of the intervening lands, the lack of suitable habitats on site, and the absence of any significant ecological pathways to the European Sites of Dublin Bay and the significant dilution effects of Dublin Bay itself.

8.4. I therefore conclude, on the basis of objective information, that the proposed development would not have a likely significant effect on any European Site either alone or in combination with other plans or projects. Likely significant effects are excluded and therefore Appropriate Assessment (Stage 2) (under Section 177V of the Planning and Development Act 2000) is not required. No mitigation measures (beyond established best practice construction measures) aimed at avoiding or reducing impacts on European sites were required in order to reach this conclusion.

9.0 Water Framework Directive

9.1. There are no water courses in the immediate vicinity of the appeal site. The proposed development comprises the extension to an existing maternity hospital. No water deterioration concerns were raised in the planning appeal. I have assessed the proposed development and have considered the objectives as set out in Article 4 of the Water Framework Directive which seek to protect and, where necessary, restore surface & ground water waterbodies in order to reach good status (meaning both good chemical and good ecological status), and to prevent deterioration.

9.2. Having considered the nature, scale and location of the project, I am satisfied that it can be eliminated from further assessment because there is no conceivable risk to any surface and/or groundwater water bodies either qualitatively or quantitatively. The reason for this conclusion is as follows:

- The nature and scale of the works;

- The location of the site in a serviced urban area and the distance from nearest water bodies and lack of significant or direct hydrological connections.
- Measures employed during the construction phase to minimise groundwater impacts.

9.3. I conclude that on the basis of objective information, that the proposed development will not result in a risk of deterioration on any water body (rivers, lakes, groundwaters, transitional and coastal) either qualitatively or quantitatively or on a temporary or permanent basis or otherwise jeopardise any water body in reaching its WFD objectives and consequently can be excluded from further assessment.

10.0 Recommendation

10.1. I recommend that the Commission uphold the decision of Dublin City Council and grant permission for the proposed development.

11.0 Reasons and Considerations

11.1. Having regard to the well-established, long-term, and continued presence of the Rotunda Hospital on this site, the proposed use, scale, height and quality of design, the nature and scale of the surrounding historic built environment and the nature of the existing Rotunda Hospital campus on Parnell Square, the planning history pertaining to the site, and having regard to the policies and objectives of the Dublin City Development Plan 2022-2028, including the land use zoning objective applicable to the site, the crucial role played by the Rotunda Hospital in Dublin and the wider region, and the community need, public interest served and the significant maternity and neonatal health benefits that would result from the proposed development, it is considered that, subject to compliance with the conditions set out below, including compliance with the mitigation measures proposed, that the impact of the proposed development would be acceptable and that the proposed development would not seriously injure the character or setting of the Georgian Conservation Area, the O'Connell Street Architectural Conservation Area, or the Protected Structures of the Rotunda Campus and Parnell Square, would not seriously injure the amenities of properties in the wider area in which it is located, would be acceptable in terms transport and traffic safety, and would not be prejudicial to public health. The proposed

development would, therefore, be in accordance with the proper planning and sustainable development of the area.

12.0 Conditions

1. 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 received by the planning authority on the 4th day of July 2025, except as may otherwise be required in order to comply with the following conditions. Where such conditions require details 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. For the avoidance of doubt, this permission shall not be construed as approving any development shown on the plans, particulars and specifications, the nature and extent of which has not been adequately stated in the statutory public notices.

Reason: In the interest of clarity.

2. Prior to the commencement of development details of the materials, colours and textures of all the external finishes to the proposed development shall be submitted to and agreed in writing by the Planning Authority. A panel of the proposed finishes shall be presented on site for the review and written approval of the Planning Authority.

Reason: In the interests of orderly development and the visual amenities of the area.

3. The development shall comply with the following requirements of the Conservation Section:
 - a) In advance of works commencing on site, the applicant/developer shall submit the following information to the Planning Authority for their written agreement:
 - i. In advance of works commencing on site, the applicant/developer shall submit 2 No. copies of coloured survey drawings, all

available historic photographs and coloured conservation reports to be lodged with the Irish Architectural Archive for record purposes.

- ii. In advance of demolition works commencing, the applicant/developer shall submit a detailed drawn and photographic record of all historic buildings to be demolished. The applicant is requested to submit a salvage strategy for all remaining sound historic materials to allow for the retention and incorporation of these historic materials in a meaningful manner either within the redevelopment or for authentic repair / reinstatement of similar structures.
 - iii. The applicant/developer shall submit detailed specifications and methodologies for all conservation repairs to the railings and granite plinths and shall provide clarification on where the removed railings / granite plinth will be relocated and stored.
 - iv. The new window reveals shall be in stone. Samples of the proposed stone reveals shall be submitted for the written agreement of the Conservation Officer.
- b) In the course of development and in advance of each package of work commencing on site, the applicant shall submit the following to the Planning Authority for their written agreement:
- i. In advance of the raking out of pointing, and in advance of any façade repairs being carried out, the Conservation Officer shall be invited to attend the site and inspect the facades at close quarters to agree the scope of repair works required, the location and specification of cleaning, pointing, and brick, stone and faince repair samples and methodologies, and the submission of marked-up drawings indicating the proposed repairs following the joint inspection. An appropriate and historically accurate mortar shall be used for the pointing of the brickwork, and the use of a mechanical grinder should be avoided, except where it is impossible to rake out the existing mortar because of its

hardness, as the use of a grinder is hard to control and thus tends to widen the joints.

- c) In light of the importance of this nationally significant historic complex, a RIAI Grade I Conservation Architect (or equal conservation expert) with proven and appropriate expertise shall be employed to design, manage, monitor and implement the works to the buildings and to ensure adequate protection of the retained and historic fabric during the works. In this regard, all permitted works shall be designed to cause minimum interference to the retained building and facades structure and/or fabric and neighbouring structures.
- d) All works to the protected structure shall be carried out in accordance with best conservation practice and the Architectural Heritage Protection Guidelines for Planning Authorities (2011) and Advice Series issued by the Department of the Environment, Heritage and Local Government. Any repair works shall retain the maximum amount of surviving historic fabric in situ. Items to be removed for repair off-site shall be recorded prior to removal, catalogued and numbered to allow for authentic re-instatement.
- e) In the course of development works, the applicant/developer shall confirm with the Conservation Section if any surviving elements of historic fabric may be concealed behind later finishes and if any hitherto unknown historic fabric is found elsewhere on site.
- f) The applicant/developer shall engage with the Planning, Property and Economic Development Department / Conservation Section in relation to potential impacts on architectural heritage arising from the project implementation and operation, ensuring such impacts are monitored by the design team so as to inform the design and mitigate against any adverse impacts on architectural heritage during rather than after the design process.
- g) The Applicant/developer shall seek the written authorisation of the Conservation Officer for any deviation from the methodology, materials and process described in the documentation submitted.

- h) All existing original features, in the vicinity of the works shall be protected during the course of the refurbishment works.
- i) All repair of original fabric shall be scheduled and carried out by appropriately experienced conservators of historic fabric.
- j) The architectural detailing and materials in the new work shall be executed to the highest standards so as to complement the setting of the protected structure and the historic area.

Reason: To ensure that the integrity of this protected structure is maintained and that the proposed repair works are carried out in accordance with best conservation practice with no unauthorised or unnecessary damage or loss of historic building fabric nor to adjacent historic structures.

4. The Developer shall facilitate the archaeological appraisal of the site and shall provide for the preservation, recording and protection of archaeological materials or features which may exist within the site, including a full photographic record of the existing buildings. In this regard, the developer shall:
 - a) notify the planning authority in writing at least eight weeks prior to the commencement of any site operation relating to the proposed development, and
 - b) employ a suitably qualified archaeologist prior to the commencement of development. The archaeologist shall assess the site, prepare an archaeological assessment and impact assessment, and monitor all site development works. The assessment shall address the following issues:
 - (i) the archaeological and historical background of the site.
 - (ii) the nature, extent, and location of archaeological material on the site, and
 - (iii) the impact of the proposed development on such archaeological material.

A report, containing the results of the assessment, shall be submitted to the planning authority and, arising from this assessment, the developer shall agree in writing with the planning authority details regarding any further archaeological requirements including, if necessary, archaeological excavation, prior to

commencement of construction works. In default of agreement on any of these requirements, the matter shall be referred to An Coimisiún Pleanála for determination.

Reason: In order to conserve the archaeological heritage of the area and to secure the preservation (in-situ or by record) and protection of any archaeological remains that may exist within the site.

5. (a) To ensure no significant change in baseline conditions, prior to the commencement of tree felling and building demolition works trees and buildings with bat roosting potential shall be surveyed by a suitably qualified Ecologist who shall be appropriately qualified and experienced in undertaking bat surveys and in line with best practice at the appropriate time of year to confirm the absence of roosting bats.

(b) In the event that a previously undetected bat roost is identified, the developer shall acquire a derogation under Regulation 54 of the European Communities (Bird and Natural Habitats) Regulations 2011 prior to commencement of the relevant works. Prior to the removal of trees and/or works, the bat survey results, methodologies for felling/works and any derogations shall be submitted for the written agreement of the planning authority.

(c) An Ecological Clerk of Works shall be appointed and retained for the duration of works.

Reason: For the protection of bats.

6. The demolition of the Outpatients Department and the construction of the development shall be managed in accordance with a Demolition and 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:

(a) Location of the site and materials compound including areas identified for the storage of construction refuse.

(b) Location of areas for construction site offices and staff facilities.

- (c) Details of site security fencing and hoardings.
- (d) Details of demolition and construction logistics.
- (e) Details of the timing and routing of construction traffic to and from the construction site and associated directional signage, to include proposals to facilitate the delivery of abnormal loads to the site.
- (f) Measures to obviate queuing of construction traffic on the adjoining road network.
- (g) Measures to prevent the spillage or deposit of clay, rubble or other debris on the public road network.
- (h) Alternative arrangements to be put in place for pedestrians and vehicles in the case of the closure of any public road or footpath during the course of site development works.
- (i) Details of appropriate mitigation measures for noise, dust and vibration, and monitoring of such levels.
- (j) Containment of all construction-related fuel and oil within specially constructed bunds to ensure that fuel spillages are fully contained. Such bunds shall be roofed to exclude rainwater.
- (k) Off-site disposal of construction/demolition waste and details of how it is proposed to manage excavated soil.
- (l) Means to ensure that surface water run-off is controlled such that no silt or other pollutants enter local surface water sewers or drains.
- (m) A record of daily checks that the works are being undertaken in accordance with the Construction Management Plan shall be available for inspection by the planning authority.

Reason: In the interest of amenities, public health and safety and environmental protection

7. Prior to commencement of development, a Resource Waste Management Plan (RWMP) as set out in the EPA's Best Practice Guidelines for the Preparation of Resource and Waste Management Plans for Construction and Demolition Projects (2021) shall be prepared and submitted to the planning authority for

written agreement. The RWMP shall include specific proposals as to how the RWMP will be measured and monitored for effectiveness. All records (including for waste and all resources) pursuant to the agreed RWMP shall be made available for inspection at the site office at all times.

Reason: in the interest of reducing waste and encouraging recycling

8. Site development and building works shall be carried out only between the hours of 0700 to 1900 Mondays to Saturdays inclusive, and not at all on Sundays and public holidays. Deviation from these times will only be allowed in exceptional circumstances where proposals have been submitted and agreed in writing with the Planning Authority.

Reason: In order to safeguard the residential amenities of property in the vicinity.

9. All service cables associated with the proposed development (such as electrical, telecommunications and communal television) shall be located underground. Ducting shall be provided by the developer to facilitate the provision of broadband infrastructure within the proposed development. All existing over ground cables shall be relocated underground as part of the site development works.

Reason: In the interests of visual amenity.

10. No additional development other than that shown on the approved plans shall take place above roof parapet level, including lift motor enclosures, air-handling equipment, storage tanks, ducts or other external plant, telecommunication aerials, antennas or equipment, unless authorised by a further grant of planning permission.

Reason: To protect the visual amenities of the area.

11. The developer shall comply with the transport requirements of the Planning Authority regarding works to the public road, bicycle parking, public road repairs.

Reason: In the interest of providing high quality bicycle parking infrastructure and of orderly development.

12. Drainage arrangements, including the attenuation and disposal of surface water, shall comply with the requirements of the Planning Authority for such works and services.

Reason: In the interest of public health.

13. 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, as amended. The contribution shall be paid prior to 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 An Coimisiún Pleanála to determine the proper application of the terms of the Scheme.

Reason: It is a requirement of the Planning and Development Act 2000, as amended, 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.

14. The developer shall pay to the planning authority a financial contribution in respect of the LUAS Cross City Scheme (St Stephen's Green to Broombridge) in accordance with the terms of the Supplementary Development Contribution Scheme made by the planning authority under section 49 of the Planning and Development Act 2000, as amended. The contribution shall be paid prior to 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 An Coimisiún Pleanála to determine the proper application of the terms of the Scheme.

Reason: It is a requirement of the Planning and Development Act 2000, as amended, that a condition requiring a contribution in accordance with the Supplementary Development Contribution Scheme made under section 49 of the Act be applied to the permission.

15. 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 satisfactory maintenance, completion and any reinstatement of services/infrastructure currently in the charge of Dublin City Council and to secure the satisfactory completion of services until taking in charge by a Management Company or by the Local Authority of roads, footpaths, open spaces, street lighting, sewers and drains to the standard required by Dublin City Council. The form and amount of the security shall be as agreed between the planning authority and the developer, 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 or, in default of agreement, shall be referred to An Coimisiún Pleanála for determination.

Reason: To ensure the satisfactory completion and maintenance of the development until taken in charge.

I confirm that this report represents my professional planning assessment, judgement and opinion on the matter assigned to me and that no person has influenced or sought to influence, directly or indirectly, the exercise of my professional judgement in an improper or inappropriate way.

Terence McLellan
Senior Planning Inspector

12th January 2026

Appendix 1: AA Screening Determination

Screening for Appropriate Assessment Test for likely significant effects	
Step 1: Description of the project and local site characteristics	
Brief description of project	<p>The project incorporates the demolition of the existing single storey Outpatients Department, vehicular ramp, service tunnel and plant structures in the central garden area of the Rotunda Hospital on Parnell Square and redevelopment to provide a new four storey over basement Critical Care Wing extension with associated works to the existing Entrance Building, Plunkett Cairns Wing and Old Medical Residence Building. The new extension would measure 9,946sqm GFA.</p>
Brief description of development site characteristics and potential impact mechanisms	<p>The subject site measures approximately 0.99 hectares and encompasses the western section of the Rotunda Hospital campus on Parnell Square. The site incorporates the existing hospital buildings along Parnell Square West in addition to a large section of the central courtyard space and a section of land along the northern boundary between the Nurse's Home and the boundary with the Garden of Remembrance. The site is brownfield in nature and there are no water courses on or immediately adjacent to the site. The nearest watercourse is the River Liffey, approximately 600m to the south.</p>

Screening report	Stage 1: Screening for Appropriate Assessment Screening Report, prepared by Ecosystem Services in Practice Ltd. (December 2024).
Natura Impact Statement	No.
Relevant submissions	None.

Step 2. Identification of relevant European sites using the Source-pathway-receptor model

The Applicant's screening assessment identified 18 European sites within a 15km Zone of Influence of the proposed development. Five sites progressed to screening stage. I note that the Applicant's screening assessment included Baldoyle Bay however I do not consider there to be any ecological justification for including this site. My screening assessment does however include the North-West Irish Sea given its proximity and relationship to the European sites of Dublin Bay. I have therefore only included those sites with any possible ecological connection or pathway in this screening determination.

European Site (code)	Qualifying interests¹ Link to conservation objectives (NPWS, date)	Distance from proposed development (km)	Ecological connections²	Consider further in screening³ Y/N
South Dublin Bay SAC (Site Code 0000210).	Mudflats and sandflats not covered by seawater at low tide (1140). Annual vegetation of drift lines (1210).	3.75km	Indirect groundwater, surface water, and foul/waste water connections.	Yes.

	<p>Salicornia and other annuals colonising mud and sand (1310).</p> <p>Embryonic shifting dunes (2110).</p> <p>Link to Conservation Objectives: ConservationObjectives.rdl</p>			
<p>North Dublin Bay SAC (Site Code 0000206).</p>	<p>Mudflats and sandflats not covered by seawater at low tide (1140).</p> <p>Annual vegetation of drift lines (1210).</p> <p>Salicornia and other annuals colonising mud and sand (1310).</p> <p>Atlantic salt meadows (Glauco-Puccinellietalia maritimae) (1330).</p> <p>Mediterranean salt meadows (Juncetalia maritimi) (1410).</p> <p>Embryonic shifting dunes (2110).</p>	5.35km	<p>Indirect groundwater, surface water, and foul/waste water connections.</p>	Yes.

	<p>Shifting dunes along the shoreline with <i>Ammophila arenaria</i> (white dunes) (2120).</p> <p>Fixed coastal dunes with herbaceous vegetation (grey dunes) (2130).</p> <p>Humid dune slacks (2190).</p> <p><i>Petalophyllum ralfsii</i> (Petalwort) (1395).</p> <p>Link to Conservation objectives:</p> <p>ConservationObjectives.rdl</p>			
<p>South Dublin Bay and River Tolka Estuary SPA (Site Code 0004024).</p>	<p>Light-bellied Brent Goose (<i>Branta bernicla hrota</i>) (A046).</p> <p>Oystercatcher (<i>Haematopus ostralegus</i>) (A130).</p> <p>Ringed Plover (<i>Charadrius hiaticula</i>) (A137).</p> <p>Grey Plover (<i>Pluvialis squatarola</i>) (A141).</p>	2.3km	Indirect groundwater, surface water, and foul/waste water connections.	Yes.

	<p>Knot (<i>Calidris canutus</i>) (A143).</p> <p>Sanderling (<i>Calidris alba</i>) (A144).</p> <p>Dunlin (<i>Calidris alpina</i>) (A149).</p> <p>Bar-tailed Godwit (<i>Limosa lapponica</i>) (A157).</p> <p>Redshank (<i>Tringa totanus</i>) (A162).</p> <p>Black-headed Gull (<i>Chroicocephalus ridibundus</i>) (A179).</p> <p>Roseate Tern (<i>Sterna dougallii</i>) (A192).</p> <p>Common Tern (<i>Sterna hirundo</i>) (A193).</p> <p>Arctic Tern (<i>Sterna paradisaea</i>) (A194).</p> <p>Wetland and Waterbirds (A999).</p> <p>Link to Conservation Objectives:</p>			
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		ConservationObjectives.rdl			
North Island (Site Code 0004006).	Bull SPA (Code)	<p>Light-bellied Brent Goose (Branta bernicla hrota) (A046).</p> <p>Shelduck (Tadorna tadorna) (A048).</p> <p>Teal (Anas crecca) (A052).</p> <p>Pintail (Anas acuta) (A054).</p> <p>Shoveler (Anas clypeata) (A056).</p> <p>Oystercatcher (Haematopus ostralegus) (A130).</p> <p>Golden Plover (Pluvialis apricaria) (A140).</p> <p>Grey Plover (Pluvialis squatarola) (A141).</p> <p>Knot (Calidris canutus) (A143).</p> <p>Sanderling (Calidris alba) (A144).</p> <p>Dunlin (Calidris alpina) (A149).</p>	5.4km	Indirect groundwater, surface water, and foul/waste water connections.	Yes.

	<p>Black-tailed Godwit (<i>Limosa limosa</i>) (A156).</p> <p>Bar-tailed Godwit (<i>Limosa lapponica</i>) (A157).</p> <p>Curlew (<i>Numenius arquata</i>) (A160).</p> <p>Redshank (<i>Tringa totanus</i>) (A162).</p> <p>Turnstone (<i>Arenaria interpres</i>) (A169).</p> <p>Black-headed Gull (<i>Chroicocephalus ridibundus</i>) (A179).</p> <p>Wetland and Waterbirds (A999).</p> <p>Link to Conservation objectives:</p> <p>North Bull Island SPA National Parks & Wildlife Service</p>			
North-West Irish Sea SPA (Site Code 004236).	<p>Red-throated Diver (<i>Gavia stellata</i>) (A001).</p> <p>Great Northern Diver (<i>Gavia immer</i>) (A003).</p>	7.5km	Indirect groundwater, surface water, and foul/waste water connections.	Yes.

	<p>Fulmar (<i>Fulmarus glacialis</i>) (A009).</p> <p>Manx Shearwater (<i>Puffinus puffinus</i>) (A013).</p> <p>Cormorant (<i>Phalacrocorax carbo</i>) (A017).</p> <p>Shag (<i>Phalacrocorax aristotelis</i>) (A018).</p> <p>Common Scoter (<i>Melanitta nigra</i>) (A065).</p> <p>Little Gull (<i>Larus minutus</i>) (A177).</p> <p>Black-headed Gull (<i>Chroicocephalus ridibundus</i>) (A179).</p> <p>Common Gull (<i>Larus canus</i>) (A182).</p> <p>Lesser Black-backed Gull (<i>Larus fuscus</i>) (A183).</p> <p>Herring Gull (<i>Larus argentatus</i>) (A184).</p> <p>Great Black-backed Gull (<i>Larus marinus</i>) (A187).</p>			
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	<p>Kittiwake (<i>Rissa tridactyla</i>) (A188).</p> <p>Roseate Tern (<i>Sterna dougallii</i>) (A192).</p> <p>Common Tern (<i>Sterna hirundo</i>) (A193).</p> <p>Arctic Tern (<i>Sterna paradisaea</i>) (A194).</p> <p>Little Tern (<i>Sterna albifrons</i>) (A195).</p> <p>Guillemot (<i>Uria aalge</i>) (A199).</p> <p>Razorbill (<i>Alca torda</i>) (A200).</p> <p>Puffin (<i>Fratercula arctica</i>) (A204).</p> <p>Link to Conservation objectives:</p> <p>CO004236.pdf</p>			
<p>Step 3. Describe the likely effects of the project (if any, alone <u>or</u> in combination) on European Sites</p>				

The proposal would not result in any direct effects on any of the identified European Sites, however, there is a potential connection via groundwater, surface water network, and foul sewer via Ringsend WWTP. Standard construction techniques and best practice measures would be employed to prevent discharge of dust and contaminants to the ground and surface water network. Operationally, the development would employ standard on-site infrastructure to prevent discharge of contaminants, including a comprehensive SuDS regime and use of green-blue roofs. Foul water from the completed development would be directed to the existing sewer network and onward to Ringsend WWTP for treatment. The site is in a heavily altered urban environment with associated noise, light disturbance, and existing potential for bird collisions. With this in mind I note that the site does not comprise any suitable habitat of importance to the qualifying interests of the European Sites identified and I consider it extremely unlikely that there would be effects beyond the immediate area of the subject site. In the very unlikely event of a release of contaminants from the site, the distance to the nearest European Sites, the intervening urban environment, the minimum 5.4km groundwater pathway, and the significant dilution effects of Dublin Bay and the transitional environment itself are such that I am satisfied the likelihood of significant effects can be ruled out. Even in the absence of mitigation and best practice measures, no significant effects on European sites are anticipated.

AA Screening matrix

Site name Qualifying interests	Possibility of significant effects (alone) in view of the conservation objectives of the site*	
	Impacts	Effects
Site 1: South Dublin Bay SAC (Site Code 0000210). QI list as above.	No direct impacts identified. Indirect impacts during construction would be minor, temporary, low magnitude and limited to the immediate site environs.	Significant effects can be ruled out having regard to the heavily urbanised nature of the site and its city centre location, the absence of watercourses on or immediately adjacent to the site, the distance from the

		SAC, the nature of the intervening urban environment, the lack of meaningful hydrological connections, the availability of drainage services, the dilution effects of Dublin Bay, and the absence of appropriate habitat on site.
	Likelihood of significant effects from proposed development (alone): No.	
	If No, is there likelihood of significant effects occurring in combination with other plans or projects? No.	
	Impacts	Effects
Site 2: North Dublin Bay SAC (Site Code 0000206). QI list as above.	As for Site 1.	As for Site 1.
	Likelihood of significant effects from proposed development (alone): No.	
	If No, is there likelihood of significant effects occurring in combination with other plans or projects? No.	
	Impacts	Effects
Site 3: South Dublin Bay and River Tolka Estuary SPA (Site Code 0004024). QI list as above.	As for Site 1.	As for Site 1.

	Likelihood of significant effects from proposed development (alone): No.	
	If No, is there likelihood of significant effects occurring in combination with other plans or projects? No.	
	Impacts	Effects
Site 4: North Bull Island SPA (Site Code 0004006). QI list as above.	As for Site 1.	As for Site 1.
	Likelihood of significant effects from proposed development (alone): No.	
	If No, is there likelihood of significant effects occurring in combination with other plans or projects? No.	
	Impacts	Effects
Site 5: North-West Irish Sea SPA (Site Code 004236). QI list as above.	As for Site 1.	As for Site 1.
	Likelihood of significant effects from proposed development (alone): No.	
	If No, is there likelihood of significant effects occurring in combination with other plans or projects? No.	

Step 4 Conclude if the proposed development could result in likely significant effects on a European site

Having regard to the information contained within the Applicant's Screening Assessment, my site inspection, a review of the conservation objectives and supporting documents, and adopting a precautionary principle, I consider that the proposed development would not result in any significant effects on the European sites of Dublin Bay as set out above. No mitigation measures have been relied on in coming to this conclusion.

Screening Determination

Finding of no likely significant effects

In accordance with Section 177U of the Planning and Development Act 2000 (as amended) and on the basis of the information considered in this AA screening, I conclude that the proposed development individually or in combination with other plans or projects would not be likely to give rise to significant effects on the European sites of Dublin Bay in view of the conservation objectives of these sites and is therefore excluded from further consideration. Appropriate Assessment is not required.

This determination is based on:

- The nature of the site and its location in an urban area, served by mains drainage.
- The distance to any European Sites, the urban nature of intervening habitats, the absence of meaningful hydrological connections and the absence of ecological pathways to any European Site.

I consider that the proposed development would not be likely to have a significant effect individually, or in-combination with other plans and projects, on a European Site and appropriate assessment is therefore not required.

Appendix 2 - EIA Pre-Screening

Case Reference	ACP-323482-25
Proposed Development Summary	Construction of a 4 storey maternity hospital building extension with connections with the existing Entrance Building and Main Hospital Building (protected structure). Refurbishment works within the existing building and all associated site works.
Development Address	Rotunda Hospital Campus, Parnell Square, Dublin 1.
	In all cases check box /or leave blank
1. Does the proposed development come within the definition of a 'project' for the purposes of EIA? (For the purposes of the Directive, "Project" means: - The execution of construction works or of other installations or schemes, - Other interventions in the natural surroundings and landscape including those involving the extraction of mineral resources)	<input checked="" type="checkbox"/> Yes, it is a 'Project'. Proceed to Q2. <input type="checkbox"/> No, No further action required.
2. Is the proposed development of a CLASS specified in Part 1, Schedule 5 of the Planning and Development Regulations 2001 (as amended)?	
<input type="checkbox"/> Yes, it is a Class specified in Part 1. EIA is mandatory. No Screening required. EIAR to be requested. Discuss with ADP.	
<input checked="" type="checkbox"/> No, it is not a Class specified in Part 1. Proceed to Q3	
3. Is the proposed development of a CLASS specified in Part 2, Schedule 5, Planning and Development Regulations 2001 (as amended) OR a prescribed type of proposed road development under Article 8 of Roads Regulations 1994, AND does it meet/exceed the thresholds?	

<input type="checkbox"/> No, the development is not of a Class Specified in Part 2, Schedule 5 or a prescribed type of proposed road development under Article 8 of the Roads Regulations, 1994. No Screening required.	
<input type="checkbox"/> Yes, the proposed development is of a Class and meets/exceeds the threshold. EIA is Mandatory. No Screening Required	
<input checked="" type="checkbox"/> Yes, the proposed development is of a Class but is sub-threshold. Preliminary examination required. (Form 2) OR If Schedule 7A information submitted proceed to Q4. (Form 3 Required)	<p>Class 10(b)(iv) - Urban development, which would involve an area greater than 2 ha in the case of a business district*, 10 ha in the case of other parts of a built-up area and 20 ha elsewhere. *a 'business district' means a district within a city or town in which the predominant land use is retail or commercial use. The subject site is 0.99 hectares.</p>

4. Has Schedule 7A information been submitted AND is the development a Class of Development for the purposes of the EIA Directive (as identified in Q3)?	
Yes <input checked="" type="checkbox"/>	Screening Determination required (Complete Form 3)
No <input type="checkbox"/>	Pre-screening determination conclusion remains as above (Q1 to Q3)

Inspector: _____ **Date:** _____

Appendix 3 - Form 3 - EIA Screening Determination

A. CASE DETAILS		
An Bord Pleanála Case Reference	ACP-323482-25	
Development Summary	Construction of a 4 storey maternity hospital building extension with connections with the existing Entrance Building and Main Hospital Building (protected structure). Refurbishment works within the existing building and all associated site works.	
	Yes / No / N/A	Comment (if relevant)
1. Was a Screening Determination carried out by the PA?	Yes	Determination - EIAR not required.
2. Has Schedule 7A information been submitted?	Yes	EIA Screening Report, Stephen little Associates (December 2024).
3. Has an AA screening report or NIS been submitted?	Yes	Stage 1 Screening for Appropriate Assessment, Ecosystem Services in Practice Limited (December 2024).
4. Is a IED/ IPC or Waste Licence (or review of licence) required from the EPA? If YES has the EPA commented on the need for an EIAR?	No.	
5. Have any other relevant assessments of the effects on the environment which have a significant bearing on the project been carried	No.	SEA has been undertaken for the Dublin City Development Plan.

out pursuant to other relevant Directives – for example SEA			
B. EXAMINATION	Yes/ No/ Uncertain	Briefly describe the nature and extent and Mitigation Measures (where relevant) (having regard to the probability, magnitude (including population size affected), complexity, duration, frequency, intensity, and reversibility of impact) Mitigation measures –Where relevant specify features or measures proposed by the applicant to avoid or prevent a significant effect.	Is this likely to result in significant effects on the environment? Yes/ No/ Uncertain
This screening examination should be read with, and in light of, the rest of the Inspector's Report attached herewith			
1. Characteristics of proposed development (including demolition, construction, operation, or decommissioning)			
1.1 Is the project significantly different in character or scale to the existing surrounding or environment?	No.	The proposal is for a hospital extension. The building would be four storeys above basement with an additional rooftop plant level. This is generally consistent with heights on the hospital campus and in the wider area. Whilst slightly taller than neighbouring buildings on the hospital campus and directly opposite, the additional height is not significant in terms of the environment. Taller buildings are located to the south on Parnell Street. Given prevailing heights and the sloped nature of the site, the building would	No.

		not be significantly taller in the context of the surrounding environment.	
1.2 Will construction, operation, decommissioning or demolition works cause physical changes to the locality (topography, land use, waterbodies)?	No.	Site is an urban brownfield site. The existing Out-Patients Department would be replaced by the new hospital extension. Land use would therefore remain consistent and not significant changes are proposed to physical land characteristics.	No.
1.3 Will construction or operation of the project use natural resources such as land, soil, water, materials/minerals or energy, especially resources which are non-renewable or in short supply?	No.	Some excavation would be required. Construction materials would be typical for an urban development of this nature and scale. No significant loss of natural resources or biodiversity would result from the development and would not be regarded as significant in nature in terms of the wider environment.	No.
1.4 Will the project involve the use, storage, transport, handling or production of substance which would be harmful to human health or the environment?	No.	Construction activities will require the use of potentially harmful materials, such as fuels and other such substances which are typical for construction sites. Any impacts would be local and temporary in nature and the implementation of the construction practice measures outlined in the Construction and Environmental Management Plan and Operational Waste Management Plan would satisfactorily mitigate potential impacts. No significant operational impacts in this regard are anticipated.	No.
1.5 Will the project produce solid waste, release pollutants or any hazardous / toxic / noxious substances?	No.	Construction activities will require the use of potentially harmful materials, such as fuels and other similar substances and give rise to waste for disposal. The use of these	No.

		materials would be typical for construction sites. Noise and dust emissions during construction are likely. Such construction impacts would be local and temporary in nature. Measures outlined in the Construction Environmental Management Plan and Operational Waste Management Plan would satisfactorily mitigate the potential impacts.	
1.6 Will the project lead to risks of contamination of land or water from releases of pollutants onto the ground or into surface waters, groundwater, coastal waters or the sea?	No.	No significant risk identified. Operation of the measures listed in the Construction Environmental Management Plan would satisfactorily mitigate emissions from spillages during construction and operation. Separate on-site infrastructure would be used for foul and storm water. The operational development would connect to mains services.	No.
1.7 Will the project cause noise and vibration or release of light, heat, energy or electromagnetic radiation?	No.	There is potential for construction activity to give rise to noise and vibration emissions. Such emissions will be localised and short term in nature, and their impacts would be suitably mitigated by the operation of measures listed in a Construction Environmental Management Plan, which would be updated by way of condition.	No.
1.8 Will there be any risks to human health, for example due to water contamination or air pollution?	No.	Construction activity is likely to give rise to dust emissions. Such construction impacts would be temporary and localised in nature and the application of measures within the Construction Environmental Management Plan would satisfactorily address potential risks on human health, including dust,	No.

		monitoring, suppression, and abatement. No significant operational impacts are anticipated for the piped water supplies in the area.	
1.9 Will there be any risk of major accidents that could affect human health or the environment?	No.	The nature and scale of the hospital extension incorporates no components or substances which would present any risk of major accidents.	No.
1.10 Will the project affect the social environment (population, employment)	No.	The project comprises a hospital extension on an existing central Dublin hospital campus in a mixed use area. Population increase would be transient and minor in the context of the overall area and the character/use of surrounding streets.	No.
1.11 Is the project part of a wider large scale change that could result in cumulative effects on the environment?	No.	I have considered cumulative impacts, including permitted schemes in the area. No significant cumulative impacts are anticipated.	No.
2. Location of proposed development			
2.1 Is the proposed development located on, in, adjoining or have the potential to impact on any of the following: <ul style="list-style-type: none"> - European site (SAC/ SPA/ pSAC/ pSPA) - NHA/ pNHA - Designated Nature Reserve - Designated refuge for flora or fauna - Place, site or feature of ecological interest, the preservation/conservation/ protection of which is an objective of a 	No.	No site specific natural or environmental policy designation relates to the site. The closest European Sites are South Dublin Bay and River Tolka Estuary SPA and South Dublin Bay SAC which are c.2.3km and 3.75km to the east	No.

development plan/ LAP/ draft plan or variation of a plan			
2.2 Could any protected, important or sensitive species of flora or fauna which use areas on or around the site, for example: for breeding, nesting, foraging, resting, over-wintering, or migration, be affected by the project?	No.	The proposed development would not result in significant impacts to protected, important or sensitive species. The site comprises a commercial premises in a settled urban area. No such species were identified in the documentation on file.	No.
2.3 Are there any other features of landscape, historic, archaeological, or cultural importance that could be affected?	Yes.	The site is in an urban area, it is located within a Georgian Conservation Area which incorporates Protected Structures. A small portion of the site to the south is within the O'Connell Street Architectural Conservation Area and the area surrounding the site includes various Protected Structures. There would be some impact on the setting of the Georgian Conservation Area and Protected Structures. However, these effects would be localised. Archaeological conditions are recommended which would provide suitable mitigation.	No.
2.4 Are there any areas on/around the location which contain important, high quality or scarce resources which could be affected by the project, for example: forestry, agriculture, water/coastal, fisheries, minerals?	No.	The site is entirely brownfield urban in nature.	No.
2.5 Are there any water resources including surface waters, for example: rivers, lakes/ponds, coastal or groundwaters which could be affected by the project, particularly in terms of their volume and flood risk?	No.	The site is entirely brownfield in nature. There are no waterbodies on or in close proximity to the site.	No.

2.6 Is the location susceptible to subsidence, landslides or erosion?	No.	No information on file indicates that the location is susceptible to subsidence.	No.
2.7 Are there any key transport routes(eg National primary Roads) on or around the location which are susceptible to congestion or which cause environmental problems, which could be affected by the project?	No.	Parnell Square West accommodates a significant number of bus routes. This can be subject to congestion at peak hours as is typical for central urban streets. The proposed development would not have any significant impact in this regard and there are no key transport routes on or around the site.	No.
2.8 Are there existing sensitive land uses or community facilities (such as hospitals, schools etc) which could be affected by the project?	Yes.	The proposal is for an extension to an existing hospital. However, the proposal is expected to have long term benefits for the hospital.	No.
3. Any other factors that should be considered which could lead to environmental impacts			
3.1 Cumulative Effects: Could this project together with existing and/or approved development result in cumulative effects during the construction/ operation phase?	No.	I have considered cumulative effects, and no such effects are anticipated.	No.
3.2 Transboundary Effects: Is the project likely to lead to transboundary effects?	No.	The scale, nature and location of the site within Dublin City make transboundary effects unlikely.	No.
3.3 Are there any other relevant considerations?	No.	No matters identified.	No.
C. CONCLUSION			
No real likelihood of significant effects on the environment.	Agreed	EIAR Not Required	
Real likelihood of significant effects on the environment.		EIAR Required	

D. MAIN REASONS AND CONSIDERATIONS

Having regard to: -

1. the criteria set out in Schedules 7 and 7A, in particular
 - (a) the limited nature and scale of the proposed hotel development, in an established urban area served by public infrastructure
 - (b) the absence of any significant environmental sensitivity in the vicinity,
 - (c) the location of the development outside of any sensitive location specified in article 109(4)(a) of the Planning and Development Regulations 2001 (as amended)
2. the results of other relevant assessments of the effects on the environment submitted by the applicant
3. the features and measures proposed by applicant envisaged to avoid or prevent what might otherwise have been significant effects on the environment.

The Commission concluded that the proposed development would not be likely to have significant effects on the environment, and that an environmental impact assessment report is not required.

Inspector _____

Date _____

Approved (DP/ADP) _____

Date _____