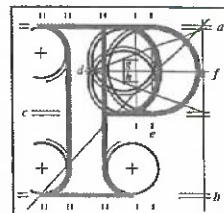


**Our Case Number:** ABP-314724-22

**Your Reference:** Mater Misericordiae University Hospital



**An  
Bord  
Pleanála**

Gore and Grimes Solicitors LLP  
Three Haddington Buildings  
Percy Place  
Dublin 4  
D04 T253

**Date:** 15 December 2022

**Re:** Railway (Metrolink - Estuary to Charlemont via Dublin Airport) Order [2022]  
Metrolink. Estuary through Swords, Dublin Airport, Ballymun, Glasnevin and City Centre to  
Charlemont, Co. Dublin

Dear Sir / Madam,

An Bord Pleanála has received your recent submission and oral hearing request (including your fee of €50) in relation to the above-mentioned proposed Railway Order and will take it into consideration in its determination of the matter.

The Board will revert to you in due course with regard to the matter.

The Board has absolute discretion to hold an oral hearing in respect of any application before it, in accordance with section 218 of the Planning and Development Act 2000, as amended. Accordingly, the Board will inform you on this matter in due course.

Please be advised that copies of all submissions/observations received in relation to the application will be made available for public inspection at the offices of the relevant County Council(s) and at the offices of An Bord Pleanála when they have been processed by the Board.

More detailed information in relation to strategic infrastructure development can be viewed on the Board's website: [www.pleanala.ie](http://www.pleanala.ie).

If you have any queries in the meantime, please contact the undersigned. Please quote the above mentioned An Bord Pleanála reference number in any correspondence or telephone contact with the Board.

Yours faithfully,

*pp Niamh Hickey*

Niamh Thornton  
Executive Officer  
Direct Line: 01-8737247

Teil	Tel	(01) 858 8100
Glaao Áitiúil	LoCall	1800 275 175
Facs	Fax	(01) 872 2684
Láithreán Gréasáin	Website	<a href="http://www.pleanala.ie">www.pleanala.ie</a>
Ríomhphost	Email	<a href="mailto:bord@pleanala.ie">bord@pleanala.ie</a>

64 Sráid Maoilbhríde	64 Marlborough Street
Baile Átha Cliath 1	Dublin 1
D01 V902	D01 V902

**Teil**  
**Glaó Áitiúil**  
**Facs**  
**Láithreán Gréasáin**  
**Ríomhphost**

**Tel**  
**LoCall**  
**Fax**  
**Website**  
**Email**

(01) 858 8100  
1800 275 175  
(01) 872 2684  
[www.pleanala.ie](http://www.pleanala.ie)  
[bord@pleanala.ie](mailto:bord@pleanala.ie)

64 Sráid Maoilbhríde  
Baile Átha Cliath 1  
D01 V902

64 Marlborough Street  
Dublin 1  
D01 V902

**Gore & Grimes Solicitors LLP**  
Three Haddington Buildings  
Percy Place, Dublin 4, D04 T253  
Ireland

**T** +353 1 872 9299  
**F** +353 1 872 9877  
**DX** 109001 Fitzwilliam  
**E** lawyer@goregrimes.ie

**GORE & GRIMES**  
SOLICITORS LLP

[www.goregrimes.ie](http://www.goregrimes.ie)

An Bord Pleanála

64, Marlborough Street

Dublin 1.

**Our Ref:** BON/M8821/1

**Your Ref:**

25 November 2022

**Metrolink Railway Order Application & Supporting Documentation**

**Our Clients: Mater Misericordiae and the Children's University Hospitals Company Limited by Guarantee and Mater Misericordiae University Hospital**

**Address: Eccles Street, Dublin 7.**

**Ref Nos: ML5B-A4, ML5B-U32, ML5C-U3, ML5C-U4 and ML5C-U5**

Dear Sirs,

We act on behalf of the above clients who have been served with notice of the making of the above Railway Order Application for the Metrolink Project.

The Mater Misericordiae and the Children's University Hospitals Company Limited by Guarantee is the parent company and the owner of the land impacted by the Railway Order Application. The Mater Misericordiae University Hospital is a subsidiary of the parent company and is the operating entity for the Mater Hospital (the "Hospital") and it operates the Hospital's day-to-day activities.

The Hospital officially opened its doors in 1861, its purpose to provide the best medical care to all of those who needed it, irrespective of their means. Today, the Hospital has over 4,250 staff, is one of the country's leading Level 4 hospitals, and is:

- the national centre for over 15 specialities and super specialities;
- one of the eight nationally designated adult cancer centres;
- a major centre for intensive care medicine;
- a major cardiac centre;
- one of the two Major Trauma Centres in the country.

In conjunction with its academic partner University College Dublin (UCD), the Hospital has a strong track record in research, innovation, and education. It provides high quality research and innovation that delivers

meaningful benefits to patients' lives and is educating the next generation of healthcare professionals and researchers.

In 2021, the Hospital treated close to 67,000 day patients and 24,940 inpatients. There were 136 Covid-19 ICU admissions, over 240,000 outpatient attendances and 197,000 radiology orders. There were 73,000 presentations at the Emergency Department.

The Hospital is the main charitable and voluntary general hospital serving Dublin's north inner city. It is a university teaching hospital. The population of its local catchment area is 450,858. At full capacity it has approximately 722 inpatient beds (which includes 74 off-site post-acute care beds) and 210 day beds. The Hospital has provision for 14 theatre units.

The Hospital provides services on three levels: those serving the local catchment area, specialist services delivered to regional populations, and quaternary services delivered nationally, summarised as follows:

Local	Tertiary	Quaternary
Accident and Emergency	Cardiology	Intensive Care Medicine
Acute Medicine	Clinical Genetics	Cardio-thoracic Surgery
Anaesthetics	Dermatology	Thoracic Transplantation
Endocrinology	Haematology	Extra-Corporeal Life Support (ECLS)
Gastro-enterology	Oncology	Spinal Trauma
General Medicine	Breast Surgery	National Isolation Unit

Geriatric Medicine	Colo-Rectal Surgery	Metabolic Diseases
GI Surgery	Gynaecology	Rare Diseases
Infectious Diseases	Ophthalmology	
Nephrology		
Neurology		
Pain Management		
Pathology		
Psychiatry		
Radiology		
Respiratory		
Rheumatology		
Dental Surgery		
Orthopaedics		
Otolaryngology (ENT)		
Plastic Surgery		
Urology		

The Hospital's Extracorporeal Membrane Oxygenation ("ECMO") service, which replaces the functions of the heart and lungs on a short-term basis, was a vital service during the pandemic. The Hospital's ECMO Service

has supported over 600 patients for COVID-19 pneumonitis since the pandemic began.

The Hospital is, without doubt, a significant and essential part of the State's health system. Any interference with its operations would have significant implications for the Hospital, its patients and the State.

In terms of its infrastructure, parts of the Hospital date from the 1860s. The relevant wing of the Hospital that will be most impacted by TII's works is known as the Misericordiae wing and it is a protected structure. It is thus particularly sensitive to impacts from construction works.

There is also a significant amount of sensitive and highly calibrated equipment throughout the Hospital and the buildings are operating at capacity.

For An Bord Pleanála's (the "**Board**") assistance enclosed herewith is a drawing which illustrates the uses to which different areas of the Hospital are currently being put. This is, of course, subject to change as operational requirements dictate.

Our clients are broadly supportive of the proposed Metrolink project, which has potential benefits for the Hospital and its patients. However, they remain concerned about potential impacts on the Hospital's operations both during construction and operation of the proposed project, and also about the extent of the permanent land take proposed to facilitate the scheme.

Our clients have facilitated TII to date in the course of its preparation of the Railway Order application and will continue to do so. It is hoped that continued engagement by TII with our clients' concerns will enable those concerns to be addressed to the satisfaction of our clients and then reflected in any Railway Order ultimately granted by the Board.

In this regard, we note that the Non-Technical Summary to the EIAR accompanying the application records that TII anticipates that an Oral Hearing will be convened by the Board in relation to the Railway Order application which will provide TII with *"an opportunity to present evidence on the proposed Project and on submissions received. There is also an opportunity for the Board and parties who made submissions during the statutory consultation process to question TII and its specialists."*

Our clients very much look forward to participating in that oral hearing, considering the evidence presented by TII and tendering their own evidence in relation to the potential impacts on the Hospital's operations. It

is considered that this is necessary to ensure that the Board is in a position to make a properly informed decision on whether to grant the Order and, if granted, to determine the conditions, modifications, restrictions, and requirements which should be imposed in order to ensure that any impacts on the Hospital can be addressed. It is clear that having regard to the scale of the proposed project, the volume of material produced by TII in support of its application, and, most importantly, the potential impacts of the project, that it would not be possible for the Board to decide TII's application without an oral hearing.

Our clients have considered the application documents submitted with the Railway Order application and is in the process of engaging experts to enable it to fully understand the detailed technical information provided. It is acknowledged that the application recognises that there are potential impacts on the Hospital. Based on the information provided, however, our clients remain concerned about a number of issues which will need to be addressed during the assessment of the application. The Hospital provides a vital public service which must be allowed function and develop both during and after the construction of the Metrolink Project.

We have set out below a summary of initial issues in respect of which our clients have concerns and about which it is proposed to provide further detail as necessary. In brief, concerns arise under the following headings:

1. Traffic impacts including access for emergency vehicles.
2. Construction impacts including noise, vibration and air quality impacts.
3. Operational impacts.
4. Extent of the proposed land take.

#### **1. Traffic Impacts**

It is, of course, essential that access to the Hospital be maintained at all times for staff, patients, patient visitors, suppliers as well as goods and services. As indicated above, there were 73,000 presentations to the Emergency Department at the Hospital during 2021 making it one of the busiest emergency departments in the State. Apart from the Hospital's main campus, there are a plethora of other healthcare and support services operating from a number of houses on Eccles Street (30 to 63 as well as numbers 71, 15, 16, 19, 20, 10 and 12). The services provided on Eccles Street include the diabetes centre, breast check and health, renal day centre, dermatology, liver centre, centre for lung health, ophthalmology, mental health office etc. In addition, the main entrance to

both the emergency department and the underground car park is off Eccles Street.

It is noted that Chapter 9 of the EIAR (Traffic and Transport) confirms that during Phase 2 works, Eccles Street will be closed to all traffic except emergency vehicles. This will clearly have very significant operational difficulties for the Hospital and impact on its services for patients and staff wishing to access services including the emergency department; the dialysis unit; the underground car park; consultants' rooms; the Hospital crèche; the centre for nurse education (which is situated at 15, 16, 19 and 20 Nelson Street); the institute for cancer research etc. In addition, the Hospital's logistics and warehousing facilities for stock items are located on Eccles Street.

It is further noted that TII's anticipated opening date for the Metrolink Project is 2035, which indicates a potential for impacts on the Hospital over an extended period. During this time, there will be ongoing developments at the Hospital, including the new Major Trauma Centre, which is a development of national importance. The limitation proposed by TII on access to Eccles Street is a matter of particular concern in this regard. Clearly, the question of phasing of the construction works for the Metrolink Project and related implications for any future works on the hospital site needs careful consideration.

It is absolutely essential that there be no interference with the ability of emergency vehicles to enter and leave the Hospital. In addition, as is clear from the above, there is concern as to how the Hospital can manage its day to day activities in light of essential areas of the Hospital being left with restricted access onto Eccles Street. It is far from clear how TII proposes to maintain unrestricted access for emergency vehicles in light of the proposal to close Eccles Street to traffic or how it is proposed that the Hospital will re-route patients, staff and deliveries to it.

More generally, the impact of construction traffic on patients and the Hospital Building itself is a matter of concern and will need to be addressed comprehensively in conditions imposed on any Railway Order granted by the Board.

## **2. Construction impacts**

Chapter 4 of the EIAR (Description of the Metrolink Project) states the following in relation to construction of the Mater Station, which will occur at no more than 20 meters from the Hospital façade:



*Given the sensitivity of the Mater Hospital, the methodology for the piling for the construction of the station box to the front of the hospital is to be devised in conjunction with a conservation engineer and is to take into account the nature of the construction of the retaining wall at the front of the hospital and the nature of the hospital building. Vibration monitors are to be provided in the hospital building in the vicinity of the works with alarms to identify any vibration that exceeds acceptable levels. In the event of the alarms being triggered works are to cease until the cause of the vibration is identified and systems modified to prevent recurrence. (Refer to Chapters 13 and 14 of the EIAR for further information on air and ground borne vibration). The potential impacts on the health of patients at Mater Hospital during the construction of the station is considered in Chapter 10 of the EIAR (Human Health).*

*Mitigation measures will be put in place to control the risk of construction dust entering the Mater Hospital site which utilises passive ventilation on Eccles Street. This will include sealing the windows to the facades that are in close proximity to the hospital. Dust mitigation measures will also be considered as mitigation with respect to Aspergillus as they will minimise the potential for spread of the fungal spores. (Refer to Chapter 16 of the EIAR, Air Quality, for further information on dust management).*

It is welcomed that the sensitivity of the Hospital is recognised in this way. However, our clients remain concerned that the extent of impacts have not been clearly identified, nor, more importantly, have the mechanisms for ensuring that adverse impacts on the Hospital and its patients can be avoided.

It is critically important that all patients are given the best possible environment from a health perspective. In Chapter 10 of the EIAR (Human Health), this is reflected in the description of the Hospital as a Very Highly Sensitive Receptor.

It is noted that psychiatric services as well as the National Isolation Unit are provided in the part of the Hospital closest to the Mater Station construction works and to the tunnel alignment, thus patients potentially the most sensitive to disturbance from construction activities may be the most likely to be affected. In addition, the Hospital's research and training facilities are situated in the Misericordiae wing as well as the entire finance team for the Hospital.

i. Noise

Although the sensitivity of the Hospital, and of psychiatric patients in particular, is recognised in the EIAR, there is a lack of clarity with

regard to how noise impacts will be mitigated during the construction phase. It does not appear as if construction noise levels which reflect the sensitivity of the receptor, or which are designed to suit the hospital environment, have been proposed. Increased noise levels will lead to negative consequences for patients and staff within the Hospital. In this regard, the Hospital is concerned that the proposed mitigations for airborne noise will not be effective to mitigate any impacts from ground borne noise. Noise monitoring and controls will be needed for the entire construction period.

ii. Vibration

Given the sensitive nature of the health care equipment within the Hospital, the vibrations from construction activity and tunnelling are a major concern. Sensitive equipment may be negatively impacted by vibrations from construction activity and from the proposed tunnelling. Any impact on sensitive equipment will have critical implications in relation to patient care. It will also impact the Hospital's training and teaching department which uses sensitive equipment. Ensuring equipment remains calibrated will also be of vital importance. It is noted that vibration monitoring is proposed, but specific commitments regarding monitoring, calibration and the consequence of exceedance must be included in any Railway Order. In this regard, it is essential that the Order provide for a cessation of activities which may affect sensitive equipment *before* any such effect takes place, *i.e.* that thresholds are set at a level which entirely avoids the risk of exceedance. In addition, ongoing monitoring of vibrations will be needed throughout the operation of the proposed Metrolink.

Construction hours including use of the tunnel boring machine ("TBM") is of greater significance in this case. The standard construction hours set out in the EIAR will likely not be appropriate in relation to minimisation of adverse impacts on the Hospital, when medical or surgical training procedures are in session. Consideration should be given to establishing the most appropriate times to use the TBM and blasting of rock (see below).

Section 7.5.3.2 of the Non-Technical summary highlights the potential use of '**blasting**' to enable rock excavation as well as drilling. The Mater Station is noted as a location for blasting. This will likely generate higher levels of noise and vibration, however, the period of disruption will be over a shorter duration. The potential impact of the blasting must be carefully considered, in particular for potential damage

to the fabric of the Hospital's Misericordiae wing as well as to the houses on Eccles Street.

Section 7.5.5 of the Non-Technical Summary suggests a boring rate of 'about 70m per week'. As such, it is reasonable to think the actual boring works in the vicinity of the Hospital will be in the order of a number of weeks. Clearly, the construction of the Mater Station box will take a considerable period of time. TII's documents suggest that the disruption due to noise will be mitigated by its proposed top down construction sequence. While this will mitigate much of the airborne noise, it will not mitigate the impact of ground borne noise and vibration and it is far from clear how it is proposed to mitigate this impact.

iii. Air Pollution and Dust Control

It is obvious that any impact on air quality in proximity to a major hospital could have adverse implications for patient care. In addition, the creation of dust from construction activities could have adverse impacts, particularly if it leads to elevated levels of *aspergillus*. Although this risk is identified in the application documents, our clients consider that insufficient attention has been paid to the nature of the Hospital buildings in assessing this risk. The Misericordiae wing of the Hospital is an old building relying mainly on natural ventilation from open windows. The proposal to "seal windows" in order to mitigate risk from construction dust and *aspergillus* is simply not feasible. In the circumstances, our clients will require that mitigation measures capable of being put in place at the Hospital are proposed and assessed as part of the consideration of the application. Specific dust control and monitoring will be needed on an ongoing basis and precise commitments will be needed in this regard.

In addition, given the nature and context of the building, any agreed protection measures should be undertaken in consultation with a Conservation Architect. TII need to agree with the Hospital the proposed purpose and nature of the protection measures to ensure that the patient wards, the administration offices as well as the teaching/training spaces can be maintained in use for their current function.

As this part of the Hospital is a protected structure, any interventions to the building fabric, including the window protection measures need to be agreed with the appropriate planning authority. TII need to carry out detailed condition surveys of the adjacent Hospital buildings prior to the works commencing. These should have detailed sections on the

building fabric, including windows, stonework etc. and include both external and internal elements. Similarly, it has been recommended to the Hospital that TII carry out condition surveys of all public realm areas adjacent to the works that may be susceptible to settlement due to the construction activities.

Having regard to the protected status of the structure, the uses to which they are being put, and the vulnerability of those who use its services, our clients have very limited flexibility in relation to how they can absorb impacts. It is noted that proposed mitigation of construction impacts at sensitive locations involves temporary re-housing of sensitive locations or people where mitigation is not possible. It is not clear what "re-housing" is proposed, or whether it will be appropriate or even feasible in a very busy hospital. Precise details of what is proposed will be required in order for the Hospital and the Board to assess the merits of this proposal.

More generally, a detailed condition survey of the Hospital will be required before any works commence and, in the event the Railway Order is granted, detailed conditions regarding the timing of any works will need to be imposed.

### **3. Operation of Metrolink**

In addition to our clients' concerns regarding the potential construction impacts, the operation of Metrolink, and in particular Mater Station, has the potential to permanently affect the Hospital and its operations. Although this clearly has the potential to benefit the Hospital, it will be necessary to ensure that the project is operated and managed in a manner which does not compromise the Hospital's operations. Commitments and safeguards will be required as part of any Railway Order.

### **4. Acquisition of Lands**

Our clients are, in addition to their concerns about the impacts of the proposed works, very concerned about the proposal to acquire *permanently* the Four Masters Memorial Park.

The park is for the benefit of the Hospital's patients and staff. In 1815, Sir William Wilde commissioned the Four Masters Memorial High Cross which was erected in 1876 and from which the park takes its name. This high cross, on a large plinth, commemorates the Franciscan friars of Donegal town, who between 1632 and 1636 compiled from early sources a history of the ancient kingdom of Ireland which became known as the Annals of

the Four Masters. The Annals are chronicles of the medieval history of Ireland. Sir William Wilde (father of Oscar Wilde) was the chief instigator of the memorial to the four writers who created the Annals. Wilde was an eye and ear surgeon and an antiquarian, who took an active role in sculptural commissions in Dublin. He was passionately interested in the history of Ireland and was a very active member of the Royal Irish Academy, hence the theme of this sculpture.

There is little or no recognition in the application documentation as to the historical import of this Park or that the Park is within our clients' ownership and used by them periodically for the benefit of the Hospital and its patients for symbolic and historical Hospital occasions – this is not recognised in the Planning Report accompanying the documentation at all.

Our clients' understood that the Park would be required *temporarily* during the construction of the proposed project, but that it would be returned to our clients' use and ownership thereafter. The necessity for a permanent acquisition has not been explained in the application documentation and a basis for confirmation of the CPO element of the Railway Order has therefore not been made out.

### Conclusion

As noted above, our clients continue to review the application documents and are engaging their own experts to assist in this process. There may be additional matters which they will require to be addressed by the Board in its assessment of the Railway Order. It looks forward to the opportunity to engage further on these and other issues at an Oral Hearing and our clients are more than willing to have a preliminary meeting of the parties and observers in advance of the main oral hearing.

Our clients remain broadly supportive of the development and look forward to seeing their concerns comprehensively addressed. We enclose herewith the required fee of €50 and confirm our clients' request for an oral hearing.

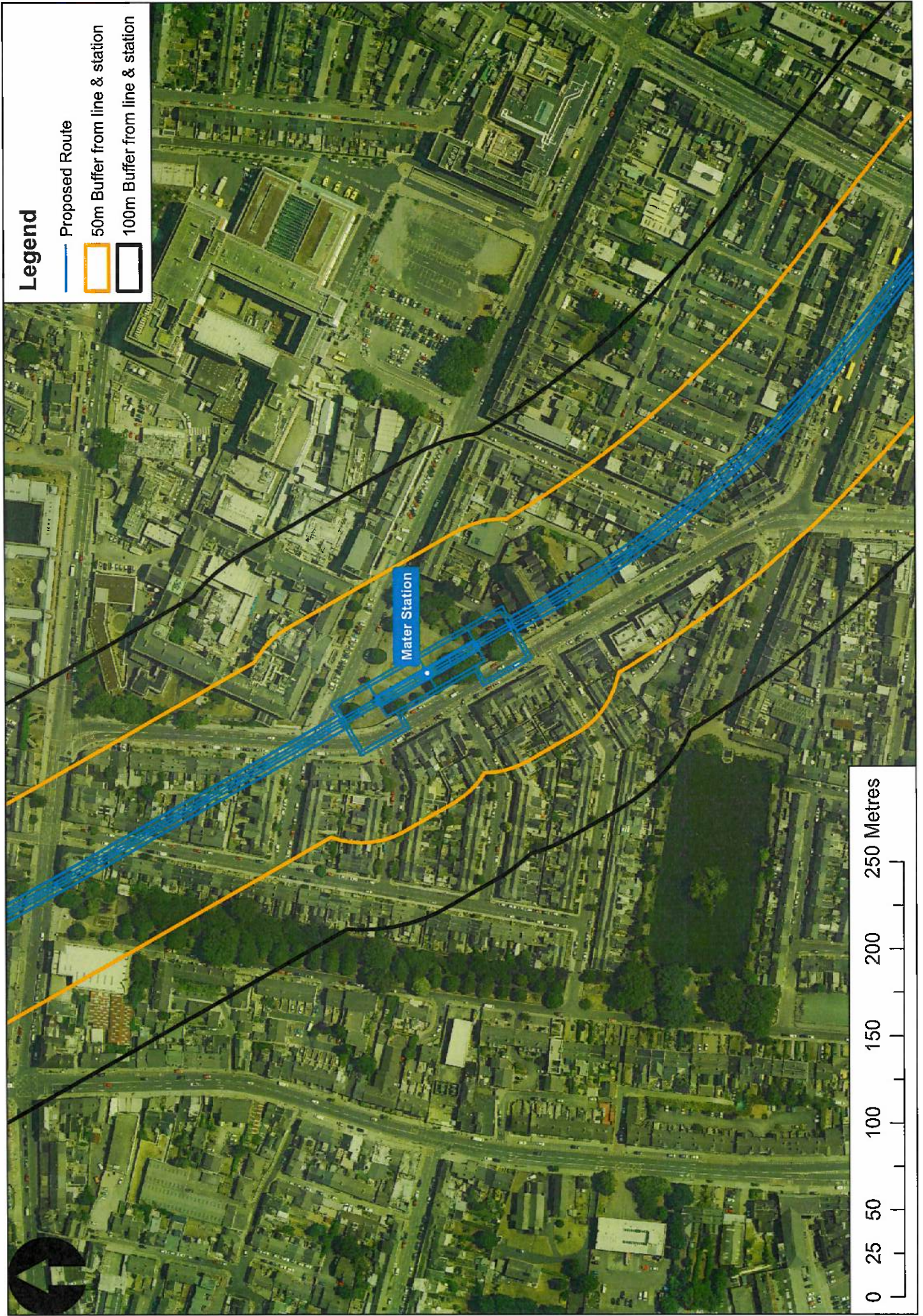
Yours faithfully



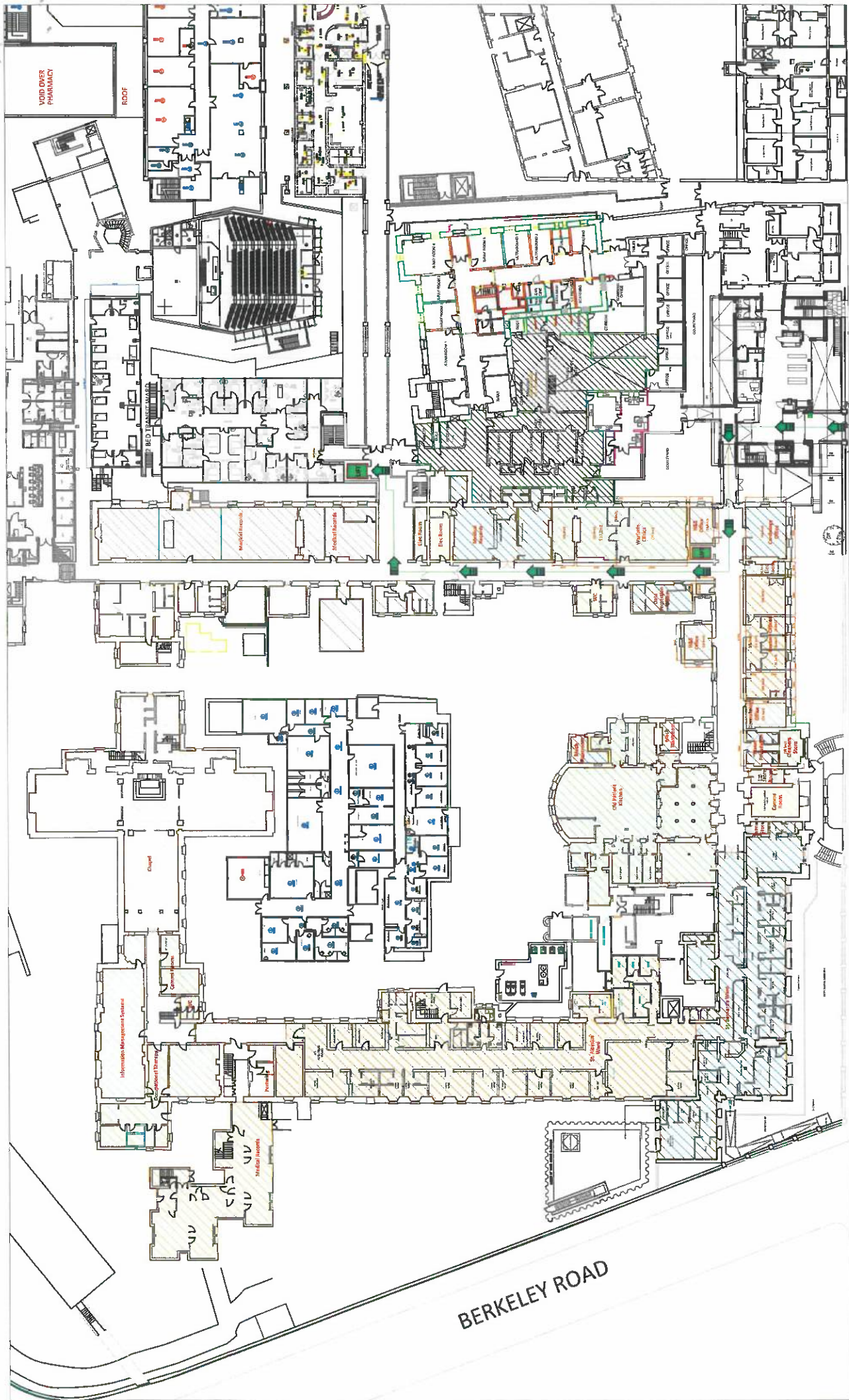
**Gore & Grimes Solicitors LLP**

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# Mater Misericordiae

Mater Misericordiae University Hospital, Estates & Facilities, Estate Street Dublin 7, E: [est@mcg.ac.ie](mailto:est@mcg.ac.ie)

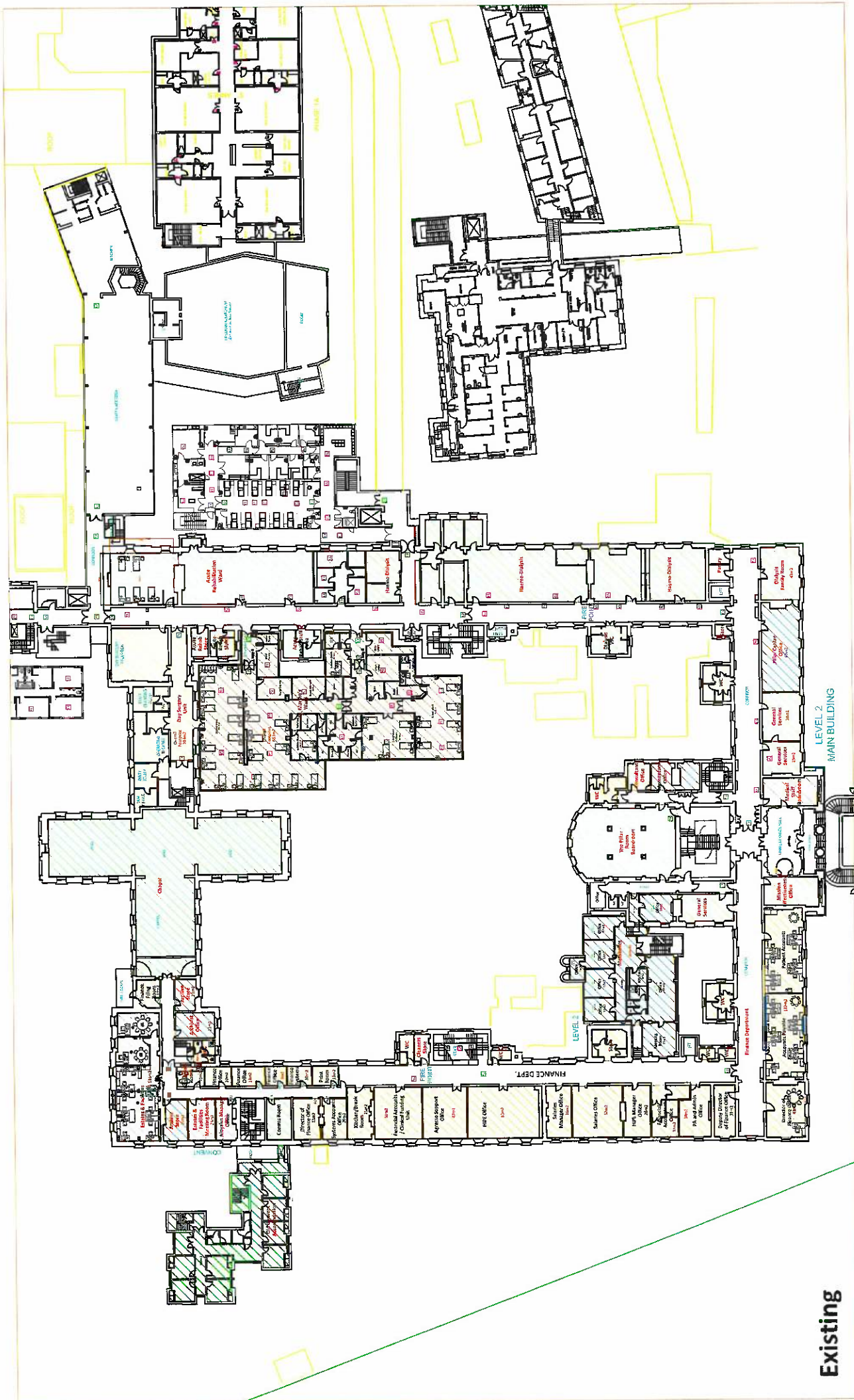
job title	Misericordiae L1	job no	N/A	drawing no	D01
drawing title	Misericordiae L1	drawn by	RB	scale	1/500 @A3
date	24.11.2022			revision	0

## REVISIONS

rev	date	description
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## NOTES

1. This drawing is not to be scaled. Use figured dimensions only. Obtained site survey to be carried out to establish locations. Figured dimensions are in mm. All dimensions shall be verified on site before proceeding with the work. This document shall be retained as part of the project records.
2. All dimensions are given in millimetres unless otherwise stated. Dimensions are given to the centre of the line unless otherwise stated.
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Existing

# Mater Misericordiae

Mater Misericordiae University Hospital, Estates & Facilities, Eccles Street Dublin 7 E: [info@mater.ie](mailto:info@mater.ie)

job title: Mater Misericordiae L2  
drawing title: Mater Misericordiae L2  
drawn by: RB  
date: 24.11.2022  
scale: 1/500 @A3  
revision no: 001  
revision: 0

## REVISIONS

nr	date	description
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## NOTES

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2. This drawing has been produced for sole use on this project and is not intended for use by any other person or for any other purpose.







