

SAINT PATRICK'S MENTAL HEALTH SERVICES AT SAINT EDMUNDSBURY

LUCAN ROAD, LUCAN, CO. DUBLIN

20-77

Architectural Design Statement

April 2026

TOT ARCHITECTS

St Patrick's Mental Health Services

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1 INTRODUCTION

1.1 PREFACE

This document has been prepared on behalf of the Governors of St. Patrick's Hospital, and it relates to the preliminary design of a new Mental Health Hospital with connected facilities at the Saint Edmundsbury site in Lucan, Co. Dublin.
The project presented consists of a new Mental Health Campus on a site of 8.10 ha, including a new 200-bed Adult In-Patient Hospital, a new 14-bed Adolescent In-Patient Unit, the restoration of a derelict barn that will function as a facility unit, the restoration of an old coach house that will house therapy rooms and a public café, and minor restoration works to the facade of the Historical House.
The purpose of this document is to outline the design rationale identifying the key elements of the client's brief and influencing factors that have informed the project.
To develop an appropriate design proposal, TOT Architects have examined the wider context, the adjacent context, the sensitivities of the surrounding lands and buildings, and the site's current state, including natural amenities and the existing protected structures. All the design choices follow the best practice approach for Mental Health Hospitals to guarantee a high-quality facility for the service users, staff, and visitors.



St Edmundsbury Aerial view

1.2 STATEMENT OF DESIGN INTENT

St Patrick's Mental Health Services (SPMHS) is Ireland's largest independent provider of mental healthcare. The organisation operates across two primary campuses: St Patrick's University Hospital on James' Street in Dublin 8 and St Patrick's Hospital Lucan, Co. Dublin. In addition, SPMHS delivers a range of community-based mental health services through its network of Dean Clinics, located throughout the country.
St Patrick's University Hospital has been based in the heart of Dublin since its foundation in 1746, established using a bequest from Jonathan Swift following his death in 1745. Since its inception, SPMHS has been committed to providing the highest quality mental healthcare to the people of Ireland, continuing Swift's visionary legacy.
Each year, SPMHS delivers acute inpatient care to over 2,300 adults across its hospitals in Dublin 8 and Lucan, and provides tailored mental healthcare and support to over 900 service users in the comfort of their own home through its Homecare service. The organisation also delivers more than 17,000 day-care group therapy sessions and approximately 16,000 individual community-based treatment and care sessions through the Dean Clinics. The services provided cover a broad spectrum of mental health conditions, including Addictions and Dual Diagnoses, Anxiety Disorders, Bipolar and other Mood Disorders, Eating Disorders, Depression, and Psychoses. Specialist services are also offered for young adults, adolescents, and older adults.
In response to evolving needs, many services are now delivered via Technology-Mediated Interventions (TMI), enabling individuals to access care remotely from their own homes, either individually or in group settings. This has significantly expanded the reach and flexibility of SPMHS's services, promoting accessibility and continuity of care.
The Board and Management of SPMHS are committed to consolidating its services into a national centre of excellence for mental healthcare, research, and education. As part of its commitment to continuing Swift's vision, SPMHS now seeks to redevelop and modernise its physical infrastructure to meet future demands. This redevelopment represents the next stage in the evolution of SPMHS, aiming to increase capacity, enhance service delivery, and transform the physical environment for the benefit of service users, staff, and the wider community.

The Rise of Mental Health Conditions
Mental health has been recognised as a public health priority and a critical component of global health and development, as evidenced by its inclusion within the UN Sustainable Development Goals. Increased international responsiveness to mental health and its social and structural determinants has been called for and committed to, as prevalence of mental health difficulties has been increasing, most concerningly amongst children and adolescents.
According to the World Health Organisation, globally 1 in 7 people live with a mental health condition, with 1 in 6 living with a mental health condition in the European region.
People living with mental health conditions, especially severe and enduring mental health conditions, are also more like to have other adverse health outcomes including a marked decrease in life expectancy. National research indicates that 42% of adults meet diagnostic criteria for a mental health disorder, with the most common being Insomnia Disorder (15%) followed by Major Depression Disorder (12%), and approximately 1 in 9 report suicide attempts at some point in their lives.
Up to 75% of mental health conditions have their onset before age 25 and early intervention is essential, however young people's mental health globally is declining. One in 7 adolescents worldwide have a mental health condition, suicide is the third leading cause of death amongst young people globally, and the leading cause of death among people age 15-29 years. (Within Ireland, research indicates 19.6% of 15-19 year olds report poor mental health, 12.1% repetitive self-harm, and 8.4% a lifetime suicide attempt. Ireland ranks 24th out of 43 OECD countries for adolescent wellbeing, placing it in the 'bottom half globally', one in three 15 year olds in Ireland report low life satisfaction, and the country's youth suicide rate stands at 6.4 per 100,000 — above the international average.
'Mega-trends' over the last 20 years including inadequate action on climate change, unregulated social media, declining social cohesion, socio-economic uncertainty, along with more recent global aid cuts, increasing conflict and geopolitical instability, have all been identified as major threats to young people's mental health and wellbeing. This underscores the significance of addressing social, structural and commercial determinants of mental health, and the need for cross-sectoral collaboration beyond the healthcare sector, in areas such as housing, education, employment, social protection, climate mitigation and adaptation, environmental quality and online safety.

Although many mental health conditions are treatable at relatively low-cost, access to mental health services remains a major challenge worldwide. This is partricularly true in low and middle-income countries, while global investment in mental heatlhcare overall remains disproportionately low. In Ireland also, timely access to care is problematic for many, with 6 % reporting unmet needs for mental healthcare, slightly below the EU average of 7 %. Key services and community-based supports can be under-resourced and many people are waiting too long for appropriate care.

The role of effective recovery - and human rights-based quality mental healthcare has never been more important, and SPMHS is committed to doing its part to contribute to meeting growing needs. Mental health is a human right - everyone regardless of who they are or where they live, has the right to the highest attainable standard of mental health. This right encompasses access to available, accessible, acceptable and good quality care. SPMHS' services are based upon a recovery-oriented and human rights-based approach, and advocating for the rights of those experiencing mental health difficulties is a core pillar of SPMHS' mission. People experiencing mental health difficulties should be treated with respect and dignity, be protected against discrimination, have full inclusion, equality, autonomy and the opportunity to make decisions about their care and treatment.

SPMHS is committed to progressing approaches to mental healthcare which are grounded in human rights and adhere to key human rights conventions, with care provided in the least intrusive and least restrictive settings appropriate to people's needs.

St Patrick's Hospital Lucan

The proposed redevelopment of the St Edmundsbury Hospital site seeks to create a modern, integrated mental healthcare campus for both adult and adolescent inpatient services. This will include day-care facilities, Dean Clinic services, research and educational programmes, and advocacy initiatives. Central to this vision is the enhancement of dignity and experience for service users, and the reduction of stigma and public misconceptions about mental health difficulties and the environments in which mental healthcare is delivered.

SPMHS acknowledges the unique challenges posed by the site's location within the "Natural, Cultural and Built Heritage - Liffey River Valley and Special Amenity Order" zoning, as designated in the South Dublin County Council Development Plan 2022-2028. However, the organisation is confident that these challenges can be addressed successfully. The design is based on best-practice clinical principles and extensive consultation with SPMHS clinicians, who recognise the therapeutic value of nature in mental health recovery.

The presence of protected structures on the site adds both complexity and opportunity. Historic buildings that have fallen into neglect will be sensitively repurposed, respecting their architectural heritage while adapting them for modern use. Careful design ensures that any intervention preserves the legibility of the original fabric. Environmental mitigation measures and enhancement of the surrounding woodland are also proposed to support biodiversity and ensure harmony with the site's natural context.

Key components of the development include:

- A 200-bed inpatient psychiatric hospital for adults, situated in and around the existing historic walled garden;
- Refurbishment and repurposing of historic farm buildings to support hospital operations;
- Construction of a new 14-bed adolescent inpatient psychiatric unit on the site of the existing 52-bed unit;
- Continued use of St Edmundsbury House to expand day-care service delivery.

People First

The design of every element of the new Lucan campus is focused on achieving the best possible clinical outcomes in the provision of mental health services. At the heart of this approach is a commitment to people. This includes service users, staff, visitors, and the wider community.

Addressing mental health involves more than simply treating illness. It includes enhancing the dignity and experience of service users, creating a sense of welcome and individuality for all, ensuring a safe and secure environment, promoting openness, and eliminating stigma. It also seeks to transform how society perceives mental health and the spaces in which mental healthcare is delivered. These guiding principles have informed a range of clinical and architectural design considerations, each tailored to the diverse needs of those who will use the campus. A vital element in many service users' care plans is participation in social engagement and interaction. Most inpatients are encouraged to access the full range of campus services, depending on the severity of their condition and clinical risk assessments. These services include the hospital street, with its associated amenities and gardens, shared by staff and visitors alike. Facilities such as the main restaurant, coffee dock, shop, and hairdresser, along with a series of courtyards and informal conversation spaces, help to create an off-ward experience that supports recovery and well-being.

SPMHS places strong emphasis on creative therapies, particularly art therapy. A regularly updated display of service user artwork is exhibited along the main circulation areas. These works reflect the shared themes and personal experiences

of a diverse service user community and contribute to a sense of recognition, participation, and identity. Security and personal space are essential components of the design. Bedrooms are arranged along the outer edges of ward buildings, enclosing inner courtyards, with shared living areas at the centre. This layout offers multiple benefits, such as secure access to outdoor space, the possibility of gender-based separation when needed, improved daylight and views of nature, enhanced visibility, and a greater sense of safety and comfort.

Constructing the wards as single-storey buildings is considered best practice. It allows direct access to the outdoors, reduces the perception of height or institutional scale, and strengthens the physical and emotional connection to the surrounding environment.

Carefully managed transparency between spaces and clear sightlines to natural settings promote a sense of openness and calm. This passive supervision also contributes to a more relaxed and supportive atmosphere for both service users and staff.

The layout also establishes a clear hierarchy of spaces to manage visitor access and public circulation. A thoughtful progression is created from fully public outdoor spaces to semi-public indoor areas. From the open green spaces and public café, visitors can enter the main foyer, access educational rooms, and reach the hospital canteen. This arrangement fosters positive encounters while maintaining clinical boundaries and privacy.

The interface between service users and the wider public is strengthened through a consciously designed public realm. A fully accessible walking loop allows members of the community to experience areas of restored woodland and access shared facilities, including a public café. These spaces provide opportunities for meaningful interaction and shared experiences in a welcoming and inclusive setting. The goal is to create an environment where everyone, regardless of background or purpose, can move freely and feel a sense of connection and respect.

All these considerations, from clinical protocols to architectural and landscape design, contribute to the broader mission of St Patrick's Mental Health Services. The campus is intended to promote and support the individual, social, and structural factors that influence mental health. It is designed to reduce risk, strengthen resilience, and establish a healing environment that upholds dignity, supports recovery, and empowers every person who enters the space.

Mental Health Matters to All

Positive mental health is essential for individuals, families, and communities to thrive. It enables us to function, cope with life's challenges, build relationships, and adapt to change. Access to mental healthcare is not a luxury; it is a fundamental human right.

The creation of a new mental healthcare campus in Lucan will provide thousands of people, both locally and across Ireland, with access to comprehensive, high-quality mental health services. It is designed to deliver care that is not only clinically effective but also respectful, inclusive, and centred on the needs and experiences of service users. The surrounding environment, with its integration of natural features and thoughtful architecture, supports recovery, wellbeing, and a sense of connection to place.

This development signals a broader commitment to addressing mental health as a vital component of public health. It also recognises the responsibility of society to eliminate stigma, ensure access, and uphold the dignity and autonomy of people who experience mental health difficulties. The Lucan campus will be a place where professionals and service users collaborate to improve care and foster greater awareness and understanding of mental health across society.

SPMHS's investment in this project demonstrates a clear intention to lead by example. It is a commitment to lasting impact, grounded in clinical excellence, human rights, and the belief that people deserve better environments in which to heal.

Note:
References for all reserch available on request.

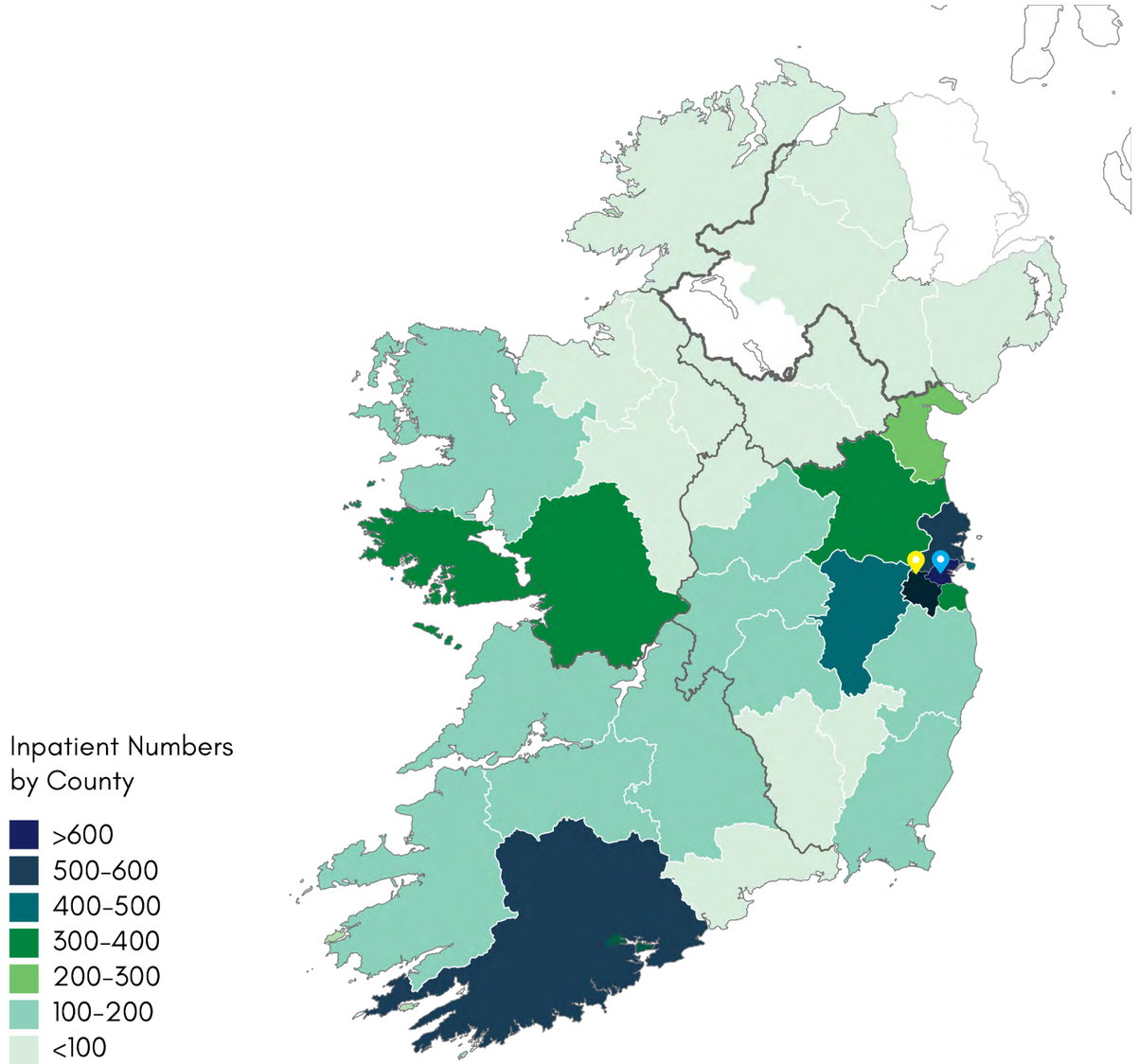
1.3 NATIONWIDE SPMHS SERVICE PROVISION

CURRENT IN-PATIENT SERVICES

St Patrick's Mental Health Services provides in-patient care through its three approved centres:
St Patrick's University Hospital, SPUH, Dublin 8 (241 beds)
Willow Grove Adolescent Unit, Dublin 8 (14 beds)
St. Edmundsbury House, St. Patrick's, Lucan, (52 beds)

St Patrick's Mental Health services in-patient care is accessed nationally, with 80% of in-patients travelling from outside of Dublin City Centre.

Inpatients Dublin County and Nationally	c. 72%
Inpatients Dublin City	c. 28%
EU/UK	< 0.1%



Data calcuated from SPMHS anonymous patient statistics on home county / Dublin region address (2020-2025). Dublin City defined by postal codes within Dublin City council boundary.

CURRENT OUT-PATIENT SERVICES, ST PATRICK'S, DUBLIN 8

Community and outpatient care are provided through the Dean Clinics, and day patient services through the Wellness & Recovery Centre.

Out-patient Services provided at St. Patrick's University Hospital Campus:

Assessment and Therapy for:

Eating disorder
Mood Disorders
Anxiety Disorders incl. OCD
Adjustment Disorders
Stress related disorders
Substance Abuse
Dual diagnoses
Psychosis
Physical Health Monitoring clinic
Trauma

Therapies and Groups:

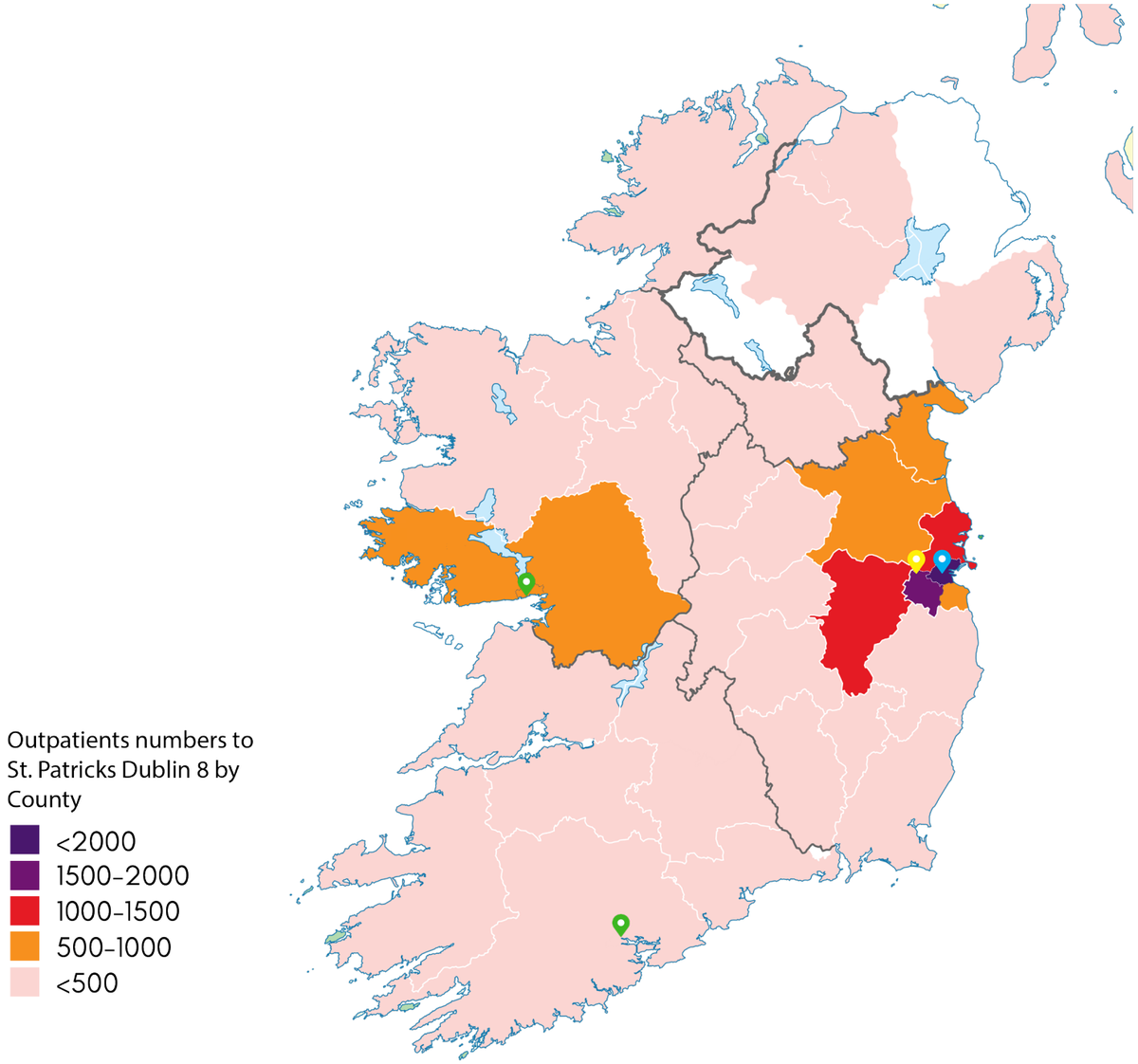
Psychology
Addiction counseling
Cognitive Behavioral Psychotherapy (CBT)
Acceptance Commitment Therapy (ACT)
Focused Commitment Therapy (FACT)
Group therapy
Occupational therapy
Dietetics
Maudsley Model of Anorexia Nervosa Treatment for Adults (MANTRA)
Family therapy

WHERE DO OUTPATIENTS TO ST. PATRICK'S DUBLIN 8, TRAVEL FROM?

Outpatient statistics indicate that 81% of outpatients to St.Patrick's Dublin 8, travel from outside the Dublin City area.

Total Outpatients to SPUH Campus -	6,460
Oupatients Dublin County and Nationally -	5,211 (81%)
Outpatients Dublin City -	1,249 (19%)

Data calcuated from SPMHS anonymous patient statistics on home county / Dublin region address (2020-2025). Dublin City defined by postal codes within Dublin City council boundary.



CURRENT OUT-PATIENT SERVICES, ST. PATRICK'S LUCAN

Out-patient Services provided at St. Patrick's, Lucan:

Assessment and Therapy for:

Mood Disorders
Anxiety Disorders incl. OCD
Adjustment Disorders
Stress related disorders
Substance Abuse
Dual diagnoses
Psychosis
Trauma
Woman in mid-life

Therapies and Groups:

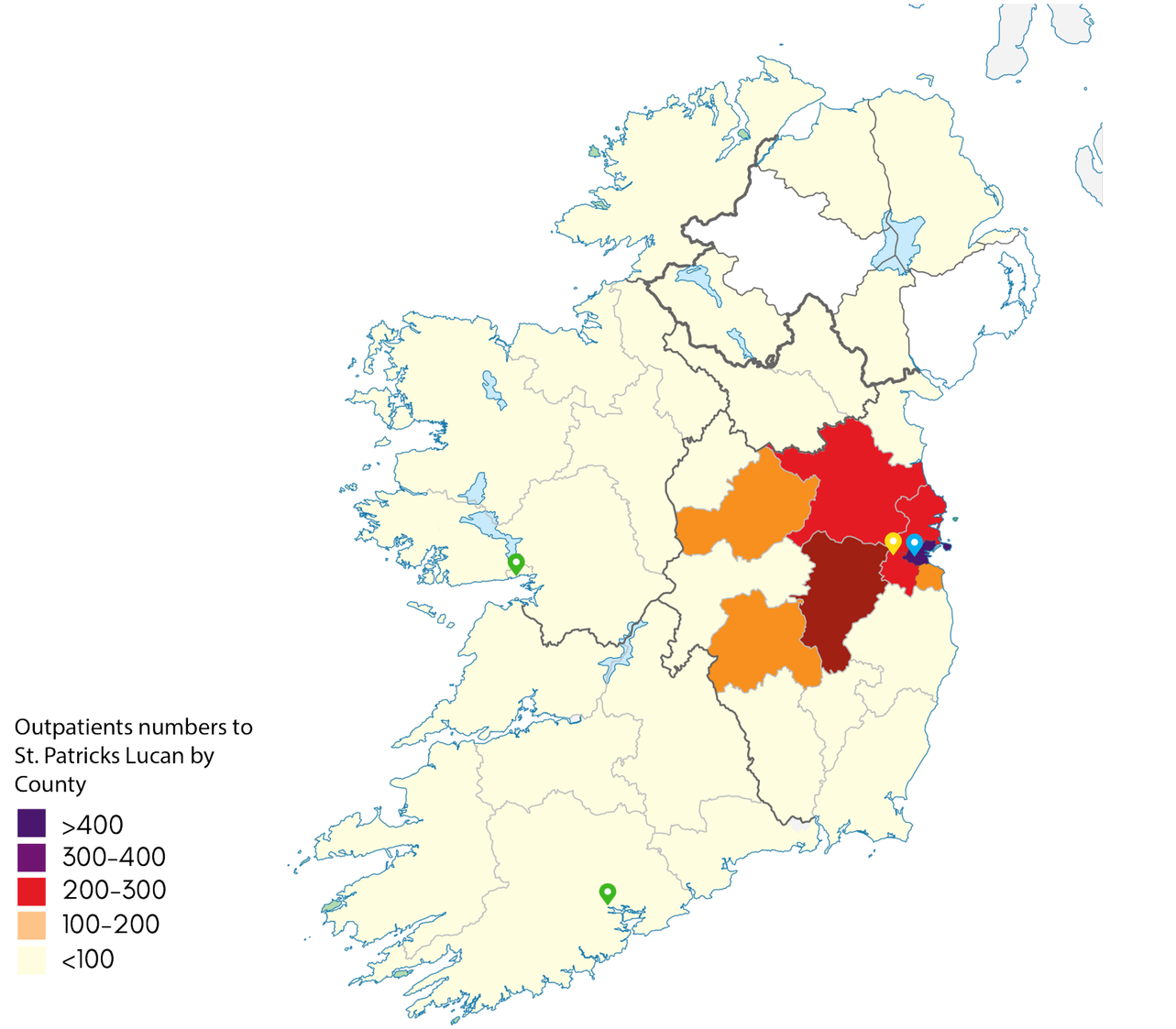
Psychology
Cognitive Behaviour Psychotherapy (CBT)
Group therapy
Occupational therapy

WHERE DO OUTPATIENTS TO ST. PATRICK'S LUCAN TRAVEL FROM?

Outpatient statistics indicate that almost 97% of outpatients to St.Patrick's, Lucan, travel from County Dublin and National regions. The number of patients travelling to Lucan from Dublin City Centre is 15%.

Total Outpatients to Dean Lucan -	1,014
Outpatients from Dublin County and Nationally	987 (97%)
Outpatients from Dublin City -	26 (3%)
Outpatients from EU	1 (<0.1%)

Data calcuated from SPMHS anonymous patient statistics on home county / Dublin region address (2020-2025). Dublin City defined by postal codes within Dublin City council boundary.



1.4 SPMHS DEVELOPMENT PLAN

James' Street Campus

The James' Street Campus dates from 1757 and currently operates a total of 208 adult in-patient bed spaces and 14 adolescent in-patient bed spaces in tandem with the many out-patient clinical & group sessions that also overlap with In-patient services. This is coupled with extensive research, training, and educational departments. Inpatient services are spread across eight wards, some of which are still located within the original George Semple 1757 historic core. As the Campus has developed over the centuries, the standard of accommodation varies significantly in age, size and provision ranging from:

- single bedroom with shared sanitary provision,
- shared dormitory with shared sanitary provision,
- single bedroom with ensuite provision.

The campus can be divided into 3 distinct groupings namely: Adult In-Patient, Adolescent In-Patient, and Day Care Services. Supporting these departments are the many important services including Nursing, Clinical, Education, Sports, Catering, Administration, Human Resources, Housekeeping, Grounds + Garden Maintenance, and various Technical Services. The departments are spread around the campus in a diverse manner with little or no physical connections in some instances. Development of the campus has occurred on a needs basis with the result that growth has been 'ad-hoc' with little consideration given to coherent development of the site. With an ever-increasing demand for mental health service provision, this has added increased pressure on the existing facility and capacity to operate in a more flexible manner, as the hospital responds to changing needs. Heretofore, the hospital has managed to utilize space within existing buildings coupled with significant expenditure in upgrade of older building stock. Where SPMHS is to realize its vision as it progresses into the 21st Century, a significant reorganization of existing infrastructure and accommodation standards shall be required.

Saint Edmundsbury Campus

Built by Edmund Sexton Pery (1719-1806) the St Edmundsbury Estate House and a significant portion of associated lands, were acquired by SPMHS in 1898. The first in-patients were admitted in March of 1899, initially comprising of convalescing female in-patients from James' Street. The surrounding site comprised of a working farm with walled gardens that serviced the hospital's needs. Sadly, the original farm and gardens have fallen into disrepair along with the dispersal of parts of the original land holdings.

Currently, St Edmundsbury is home to a 52 Bed In-Patient Adult Facility (built 1985) linked to the Historic Building. The Historic Building is also home to Inpatient and Staff facilities in addition to accommodating a dedicated Day Service Unit.

A standalone Dean Clinic, located at the main entrance to the site, completes the community services provision on site.

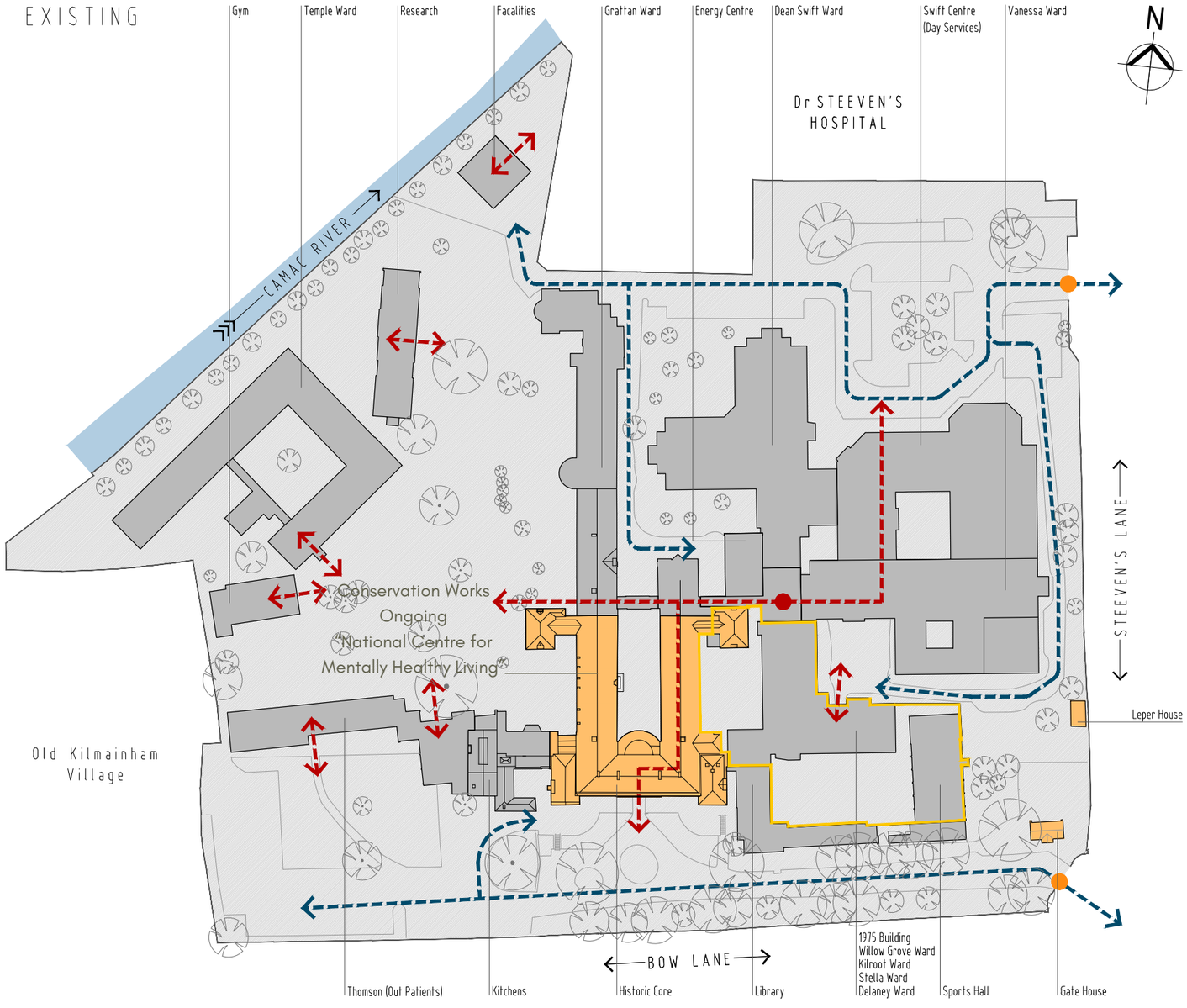
Development Program

In considering the future infrastructural and operational needs of SPMHS and how this will be best achieved, the following options have been considered.

- Do Nothing.
- Dublin 8 Redevelopment.
- St Edmundsbury Lucan Redevelopment.

Do Nothing

Put simply, this is not an option for the future viability of SPMHS, particularly as an In-patient Service Provider. Their existing real estate, comprising in the main of old and outdated buildings are nearing end of life and no longer provide the requisite efficiencies or built environment for mental health service provision. Where the option to do nothing is pursued, the goals set out by SPMHS vision will not be achieved and the ability to maintain provision of services in the long term will become increasingly diminished.



2026 Existing Saint Patrick's University Hospital Campus, Dublin 8

Dublin 8 Redevelopment

Since 2017, TOT Architects have worked closely with the Board and Management of St. Patrick's Mental Health Services to put in place a comprehensive Development Control Plan (DCP) for their Dublin 8 Campus. This is comprised of nine (9) Main Development Phases complete with decanting, demolition, and construction subphases.

In order to maintain the existing provision of services on site, a continuous building program in excess of fifteen (15) years would be required to complete the redevelopment of the campus. This is primarily due to maintaining existing operations and the associated safety and logistical challenges in achieving same. While SPMHS have applied for and obtained Grants of Permission for the initial phases of the proposed DCP, it has become increasingly apparent that funding a rebuilding program of such magnitude and complexity, is proving cost prohibitive without a significant down scaling in provision of their current services over a several year period. This is also set against a marked increase in demand for quality mental health provision within the State. This realization has led to a renewed focus on the SPMHS folio and how best to achieve their stated vision in a more viable manner.

Under the Proposed Development Control Plan, SPMHS have applied for Planning Permission to Dublin City Council for the following:

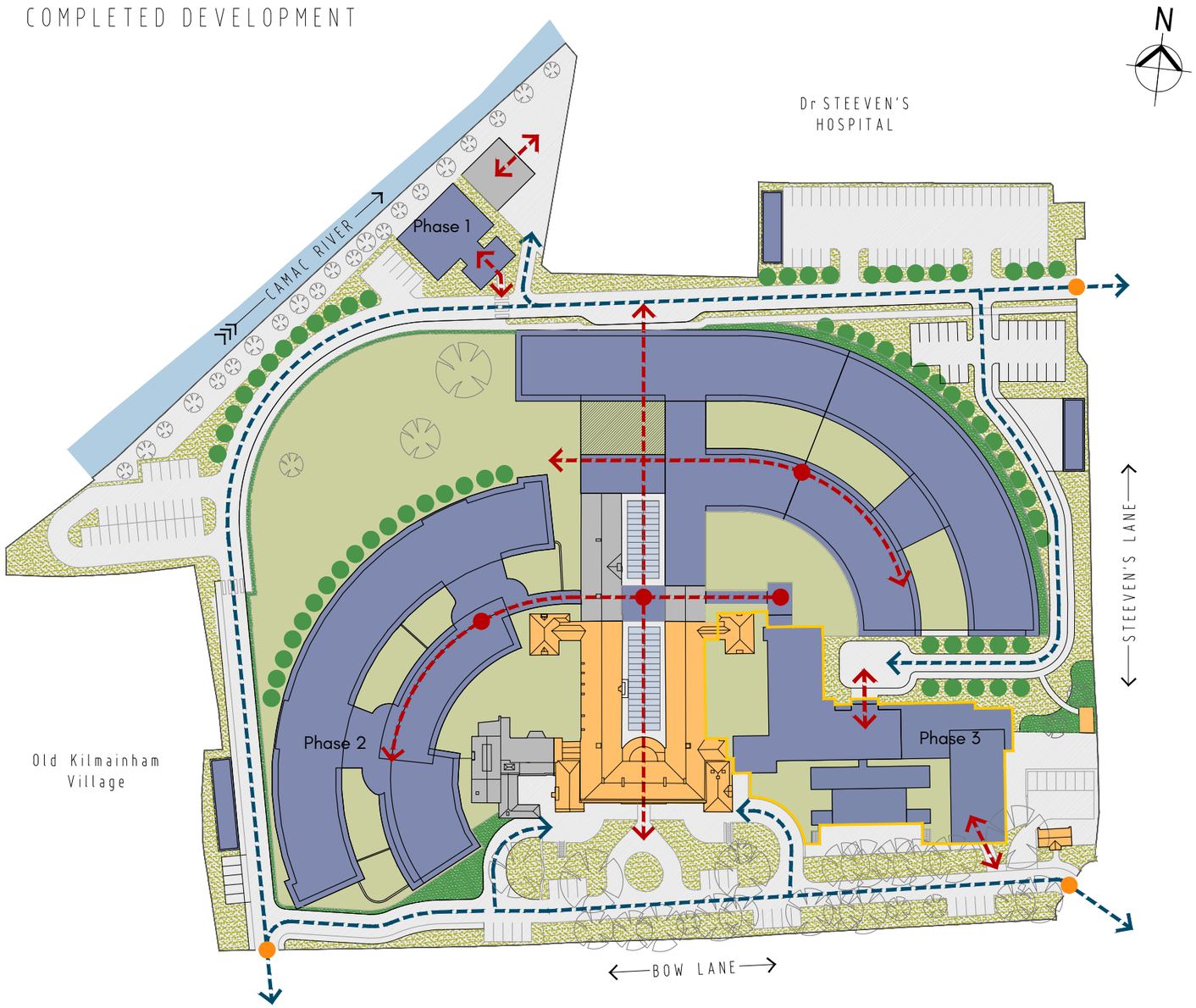
• Phase 1: Relocation of Existing & Enhancement of Day & In-Patient Clinical Services. Grant of Permission: Ref - 3609/17

• Phase 2: Construction of a new Special Care Unit and General Adult Wards complete with new Clinical Hub. Grant of Permission: Ref - 3760/17

• Phase 3: Construction of In-Patient Extension to Existing Adolescent Unit and Establishment of a National Hub for Mentally Healthy Living. Grant of Permission: Ref - 2881/19

• Phase 4: The maintenance and upgrade works, to the original historic building (Protected Structure) Grant of Permission: Ref - 3387/22.

Stemming from the above, SPMHS are currently reviewing redevelopment options for their Dublin 8 campus with a clear commitment to maintaining a permanent presence within its Historic Core. This has led to a renewed focus and further detailed analysis of their Lucan facility and how this may become a more viable option for the continuance of SPMHS operations. Such a move would entail relocating the majority of existing services that are currently provided in Dublin 8, to a purpose built, state of the art facility in St Edmundsbury.



c. 2017 Iteration of Proposed Development Control Plan, Saint Patrick's University Hospital Campus, Dublin 8

St Edmundsbury Lucan, Redevelopment

The proposal as outlined here, is to create an Adult and Adolescent Inpatient mental health facility complete with Daycare, Dean Clinic Services, Research, Educational and Advocacy programs on the site of St Edmundsbury Hospital. These will complement retained services in Dublin 8. Paramount to this will be the enhancement of service user dignity, experience and the breaking down of public misconceptions surrounding mental health issues. In achieving this, it is recognized that Saint Edmundsbury holds no less challenges than exist in Dublin 8, in particular, integration of such a facility within the 'Natural, Cultural and Built Heritage- Liffey River Valley and Special Amenity Order' zoning (South Dublin County Council Development Plan 2022 - 2028). Best Evidence Based Clinical Design recognizes that a greater connection to, and integration of biophilia, set within a positive sense of place, contributes significantly to the wellbeing and positive experiences of mental health service users.



Saint Patrick's Mental Health Services, Saint Edmundsbury, Lucan



Saint Patrick's Mental Health Services, Dublin 8

2 CONTEXT

2.1 THE SITE

The subject site located in Lucan Co. Dublin comprises an overall site area of 80,100m^2 (c. 8.10 ha).
The site comprises the grounds and premises of St Edmundsbury Hospital and is bounded by greenfield to the north, by farm buildings and a school to the east, by Lucan Road (R835) to the south, and by the River Liffey with its adjacent land, ESBN facility and pre-school to the west.
To the East, St Andrew's National School build in 2013, has 16 classes from junior infants to sixth class.
On the other side of the site on Chapel Hill, is the Canon Despard Centre, including The Village Montessori Pre-School and a special-needs pre-school, Nexus ASD Pre-school.
Further down Lucan Road is Scoil Mhuire Girls National School from Junior Infants to Sixth class with 685 children, and St Joseph's College for girls from 1st to 6th year.



Site Location Plan

Lands in Ownership of Applicant
Lands subject of Application
Area with Letter of Consent

2.2 HISTORICAL BACKGROUND

St Patrick's Mental Health Services (SPMHS) was founded in 1746 at the original St Patrick's University Hospital site in Dublin 8. Throughout the 19th century, the hospital grew significantly, requiring a number of extensions. By the 1870s, there was a growing demand for mental health services and a recognition that further space for delivering inpatient mental healthcare was needed. In this context, SPMHS aquired the Lucan site in 1898.

St Edmundsbury House was built by Edmund Sexton Pery (1719-1806). The first patients were admitted in March 1899. The house was refurbished and used as a convalescent hospital over the following years to offer care for service users, along with recreational facilities, such as communal areas and a tennis court. For some time, a working farm on the St Edmundsbury grounds also provided food for the hospital. Situated on an elevated site, the gardens drop dramatically to the river.

In 1985 a new adult ward extension was completed with the existing building converted for staff use and occupational therapy. It is a beautiful site with a sylvan character and comprises approx 8.48 hectares.

Today the hospital provides a comprehensive range of mental health services; inpatient care (52 beds), day patient programmes, and outpatient Dean Clinic community services that cater for a wide range of mental health issues including anxiety, depression, alcohol/chemical dependence, dual diagnosis, the mental health of older adults, and bipolar mood disorder.



St Edmundsbury House, c 1920

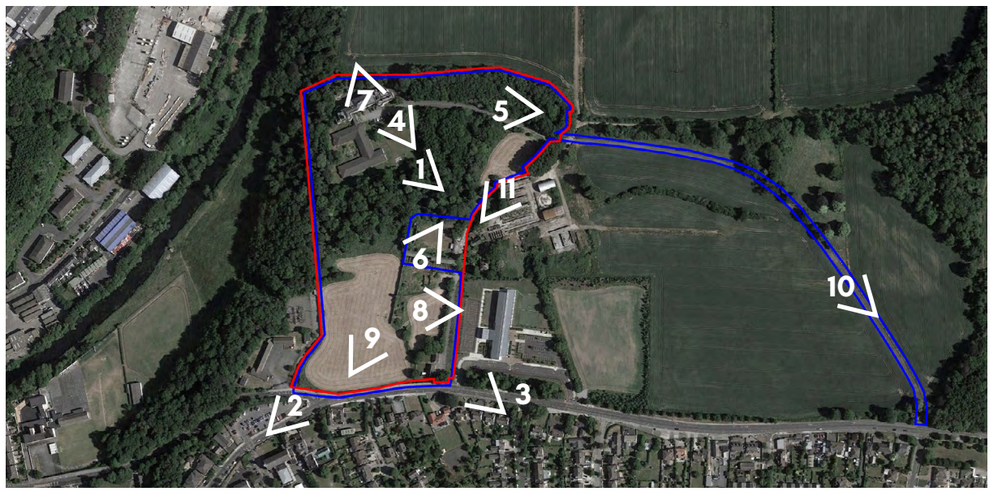


2.3 SITE PHOTOS

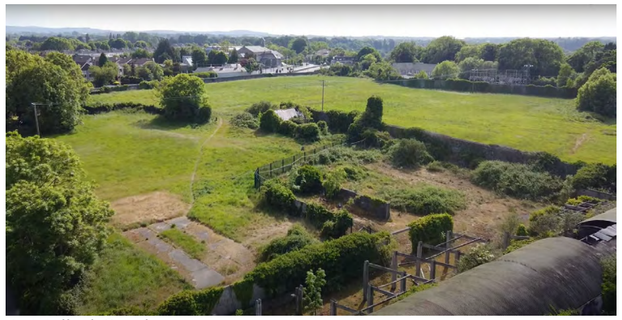

1- Existing Ward and St Edmundsbury House


2- Lucan Road West


3- Lucan Road East




4- St Edmundsbury House


6- Walled Garden


8- Bell Tower


10- Historic Driveway


5- St Edmundsbury House and existing Ward


7- Existing Ward


9- Walled Garden


11- Internal Road

2.4 DEVELOPMENT PLAN

The site is zoned Objective HA-LV (High Amenity)
Objective: To protect and enhance the outstanding character and amenity of the Liffey Valley.

SDCC Development Plan 2022-2028, Proposed new SLO (Specific Local Objectives) for the site:
NCBH7 SLO2: (Natural, Cultural and Built Heritage- Liffey River Valley and Special Amenity Order)
To work in collaboration with the owners of St Patricks Hospital lands at St Edmundsbury, Lucan in the preparation of a Masterplan to examine the potential for the future provision of mental health services and accommodation on the existing hospital campus lands. The Masterplan will have full regard to the setting and integrity of the Protected Structures on the lands, the highly sensitive environmental characteristics of the site in relation to the Liffey Valley and Green Infrastructure principles and the need to provide appropriate public access including an area of accessible public realm within the lands and connectivity to adjacent lands to further the overall objective of developing a Liffey Valley public park.



South Dublin City Council Development Plan 2022 - 2028

Use Zoning Objectives

Objective HA (LV, DV, DM) — To protect and enhance the outstanding natural character and amenity of the Liffey Valley, Dodder Valley and Dublin Mountains areas

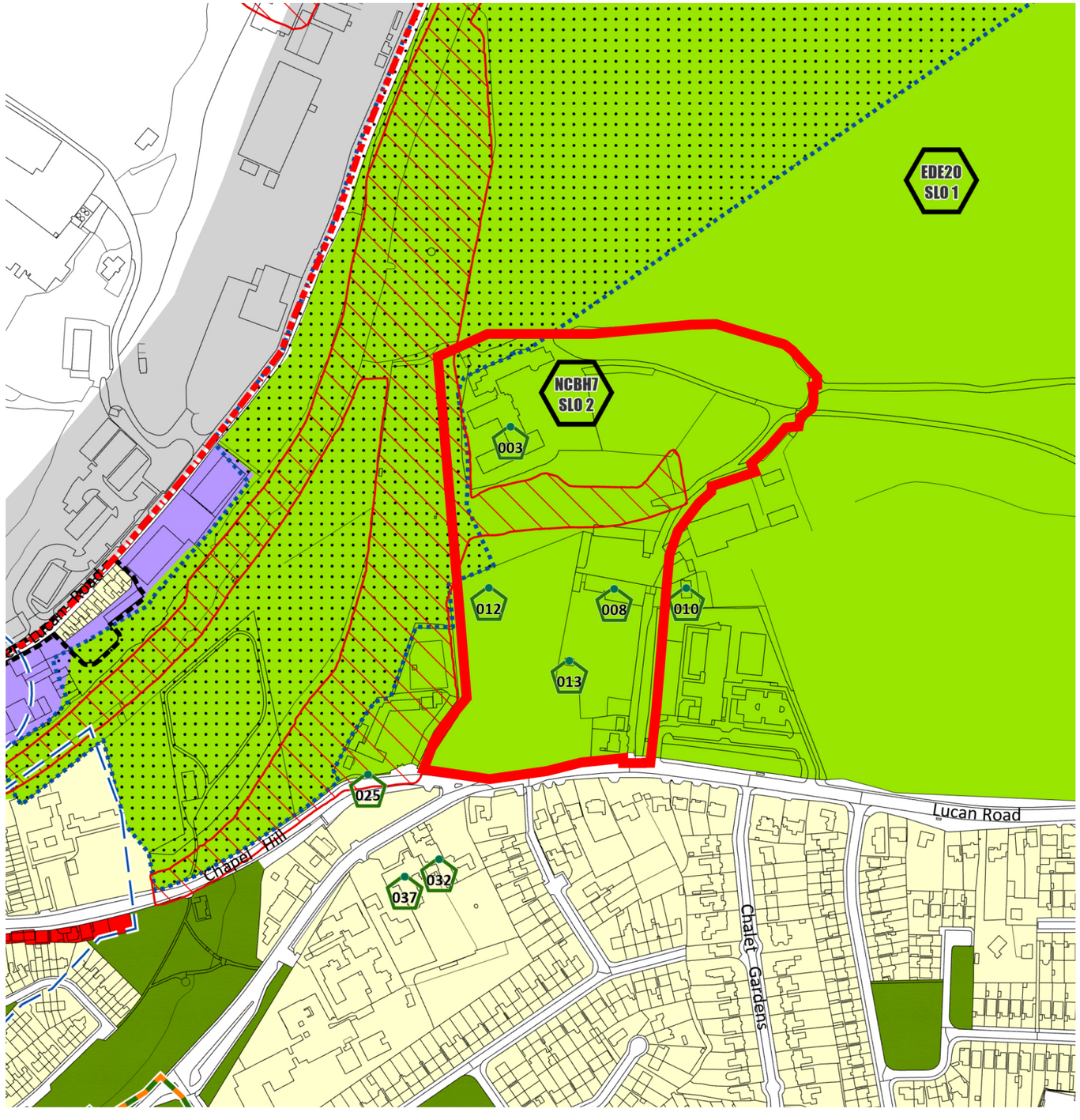
Specific Objectives

Proposed Natural Heritage Area (pNHA)

Liffey Valley Special Amenity Area Order 1990 (SAAO)

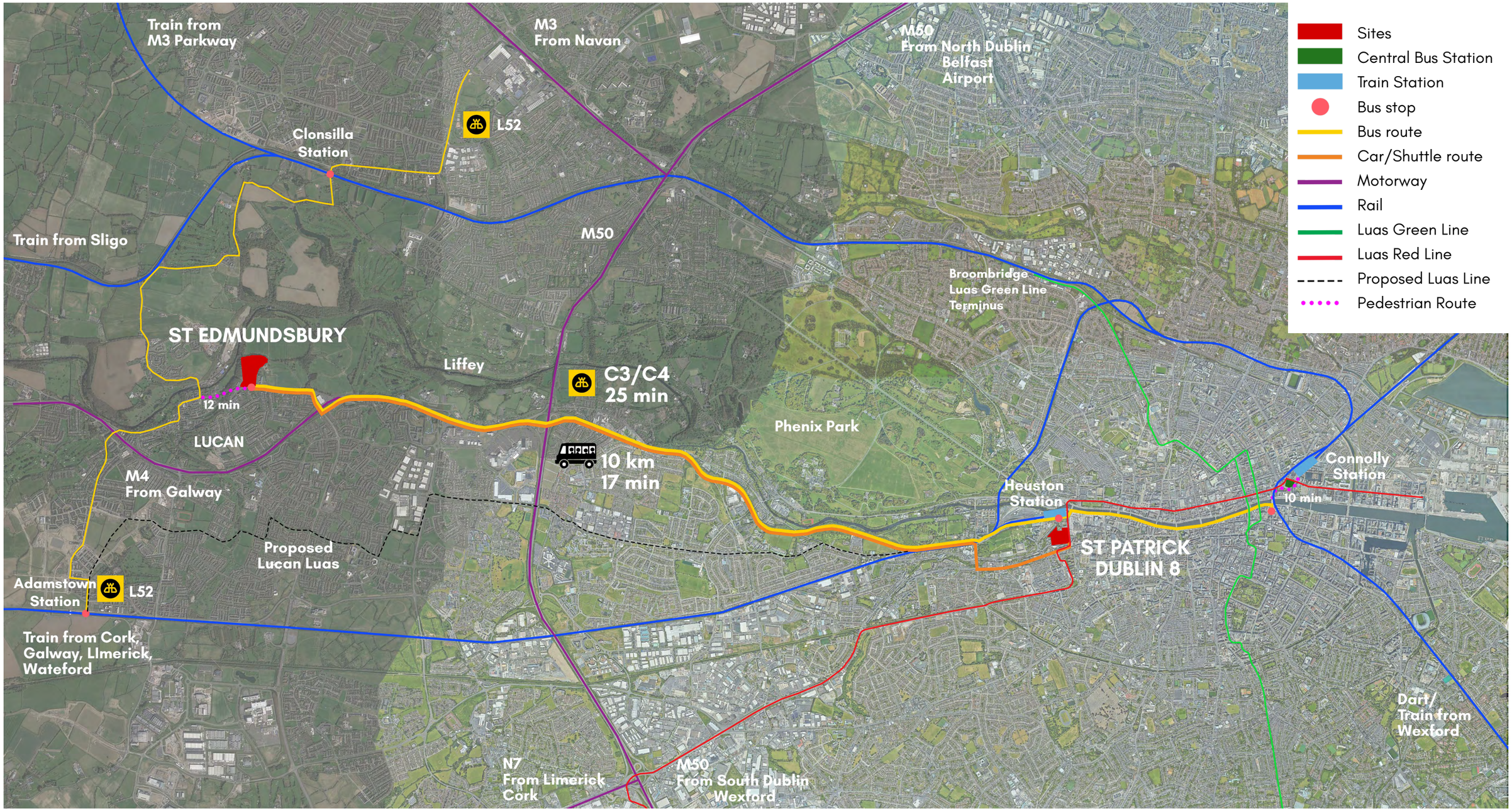
2.5 RECORD OF PROTECTED STRUCTURES

RPS Ref.	Sub-Ref.	Address / Location	Description	Sheet
001		Anna Liffey Weir, Lucan	Fishery Site & Weir (RM)	Map 01
002		Hermitage Golf Club, Off Lucan Road	Detached Multiple-Bay Two-Storey Country House	Map 02
003		St. Edmondsbury House, Old Lucan Road	Three Storey House, Porch with Colonnades, & Out- offices	Map 01
004		Leixlip Bridge, Leixlip	Stonebridge & Former Bridge Site (RM)	Map 01
005		Leixlip Road, Lucan	Ashlar Limestone Gate Piers	Map 01
006		Lower Road Palmerstown	Metal Bridge over River Liffey	Map 02
007		Fonthill/Palmerstown	Disused Mill Race	Map 02
008		St. Edmondsbury, Off Lucan Road	Barn & Coach House	Map 01
009		Salmon Leap Inn, Leixlip	Public House	Map 01
010		Off Lucan Road, St. Edmondsbury	Detached Two-Bay Two-Storey House & Stable Block	Map 01
012		Walled Garden, Lucan Road, St. Edmondsbury	Walled Garden	Map 01
013		Wall & Bell Tower, Off Lucan Road, St. Edmondsbury	Uncoursed Rubble Limestone Boundary Wall with Attached Bell Tower	Map 01
014		Leixlip Road, Lucan	Granite Milestone	Map 01
016		Hill's Mills, Lucan	Chimney	Map 01



2.6 COUNTY-WIDE TRANSPORT CONNECTION

As the Lucan site will expand, the Dublin 8 site remains an important and strategic city hub in the operation of the Hospital. The two sites will keep a strong link, made possible with very efficient bus connectivity and road networks.



2.7 RECEIVING ENVIRONMENT

MAIN ROADS CONNECTIVITY

Located to the North East of Lucan Village Centre, the site is served primarily by the adjoining Lucan Road (R835), the R120 to the west, the R136 to the East and the N4 to the South; the main road connection on the East-West axis between Dublin and the M4.

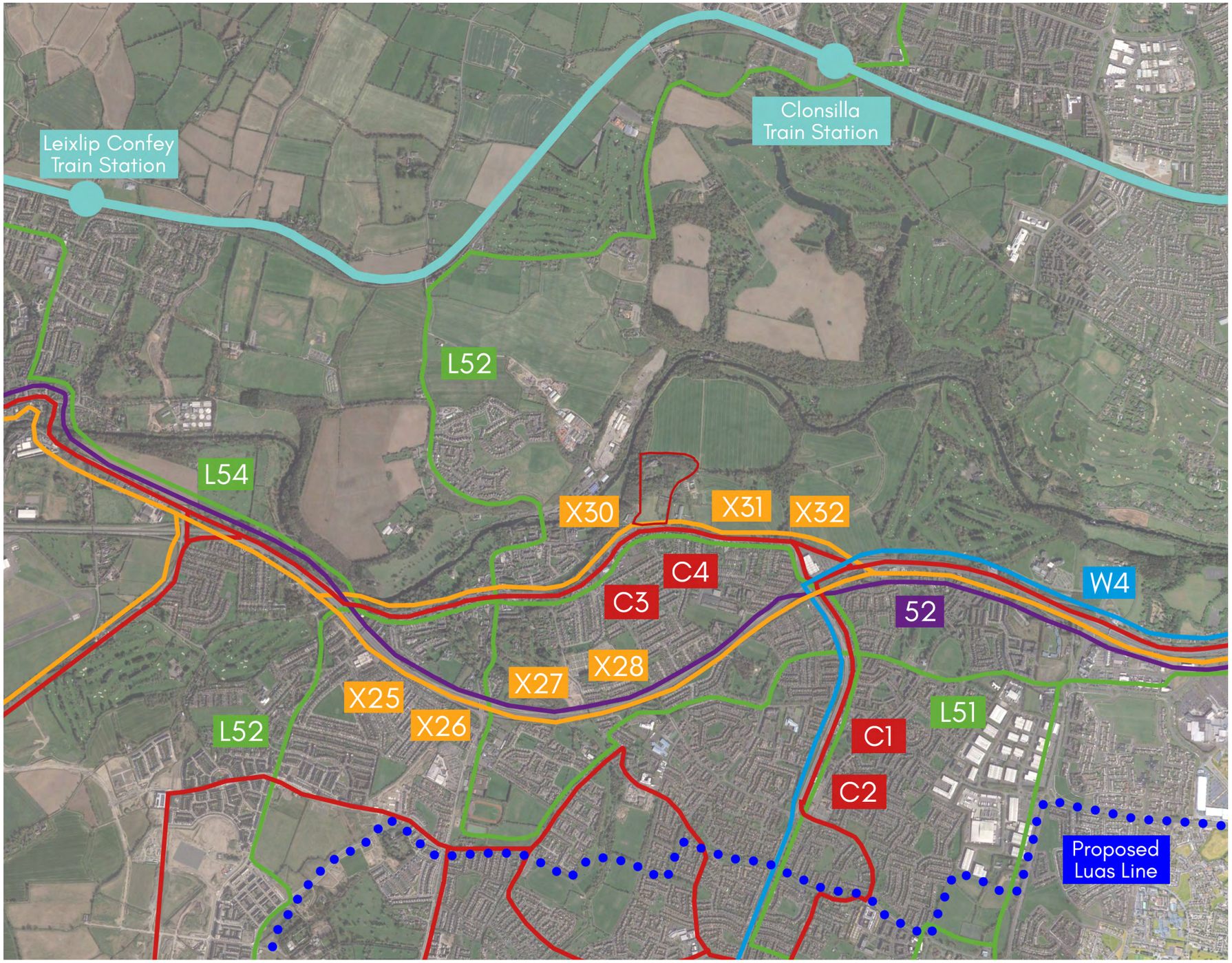


Main Roads Network Map

PUBLIC TRANSPORT CONNECTIVITY

The Greater Dublin Area Transport Strategy 2016-2035 includes a light rail proposal for the western suburbs of Dublin. The Lucan Luas will provide a high capacity link into the centre of Lucan's large residential areas to the south of the N4.

The site is well located with respect to the strategic bus corridor serving the Lucan Area with direct access to the BusConnects C spine. Routes C3 and C4 of the C Spine run along the Lucan Road (R835) along with several peak hour express services to the city centre and University College Dublin. In terms of frequencies bus services operate every 15 minutes along the Lucan Road and 8 minutes on the N4 National Road (where all 4 services operate).



Public Transport Map

URBAN AND NATURAL CONTEXT

The urban context is mostly developed to the south of the site, with terraced and semi-detached houses as the main type of housing. The density is mainly low and medium rise, typical of the suburban context.

A portion of the Liffey Valley proposed Natural Heritage Area (pNHA) is situated to the north of the site. The Liffey Valley Special Amenity Area Order (SAAO) site is also located to the north, and it covers almost all the pNHA lands as well as areas of grassland.

Lands outside of the site consist of semi-improved grasslands in the northern portion of the lands with more improved grasslands supporting agriculture in the southern portion of the lands near the Lucan Road.

As the dominant feature of the area, the River Liffey bounds the western and northern sides, flowing in an easterly direction to its mouth some 15 km downstream. It supports important aquatic flora and fauna and is an important part of Dublin's ecological network.



Urban Context Map



Natural Context Map

2.8 APPLICANT SITE

IMMEDIATE CONTEXT ANALYSIS

The Site

Liffey Valley pedestrian route

Neighbourhood pedestrian route

Public Access to
St Edmundsbury Lands

Bus Route / Bus Stop

School

Lucan Village

River Liffey

Accessible Green Space

Proposed Liffey Valley Park

Proposed Park

Proposed trail path

Proposed foot bridge



Site Map

EXISTING SITE FEATURES AND CONSTRAINTS

- Lands Subject of Application
- Lands in Ownership of Applicant
- Woodland
- Protected Woodland
- Protected Structures
- Existing 52 bed Unit
- Overlooking sensitivities



Site Map

EXISTING CONNECTIVITY

Lands Subject of Application

Lands in Ownership of Applican

Access to Site from Lucan Road

Internal Private Roads

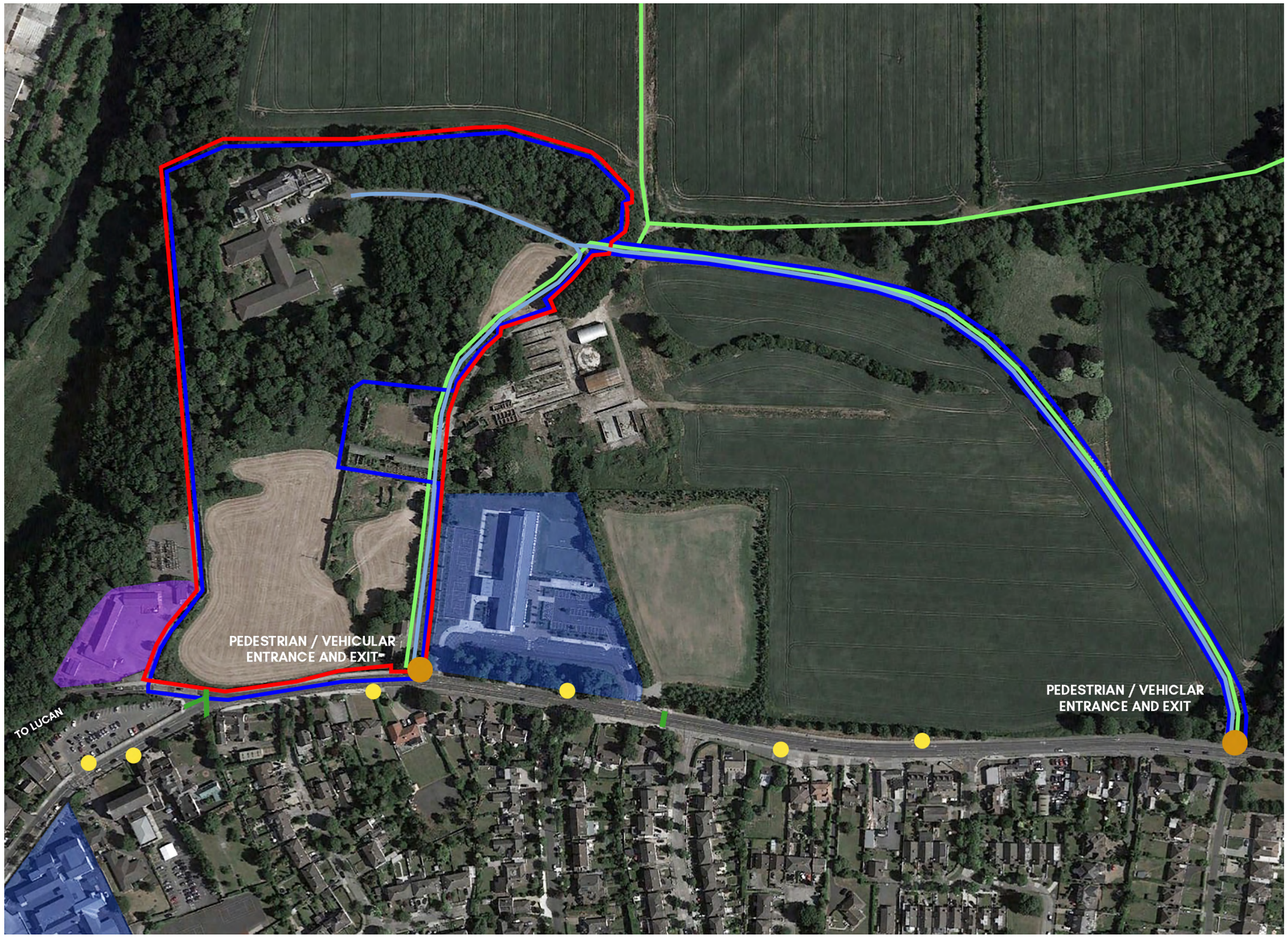
Primary Public Access Route

Bus stop Route C3/C4

Pedestrian crossroad

School

Pre school and Community Center



Site Map

3 DESIGN PROPOSAL

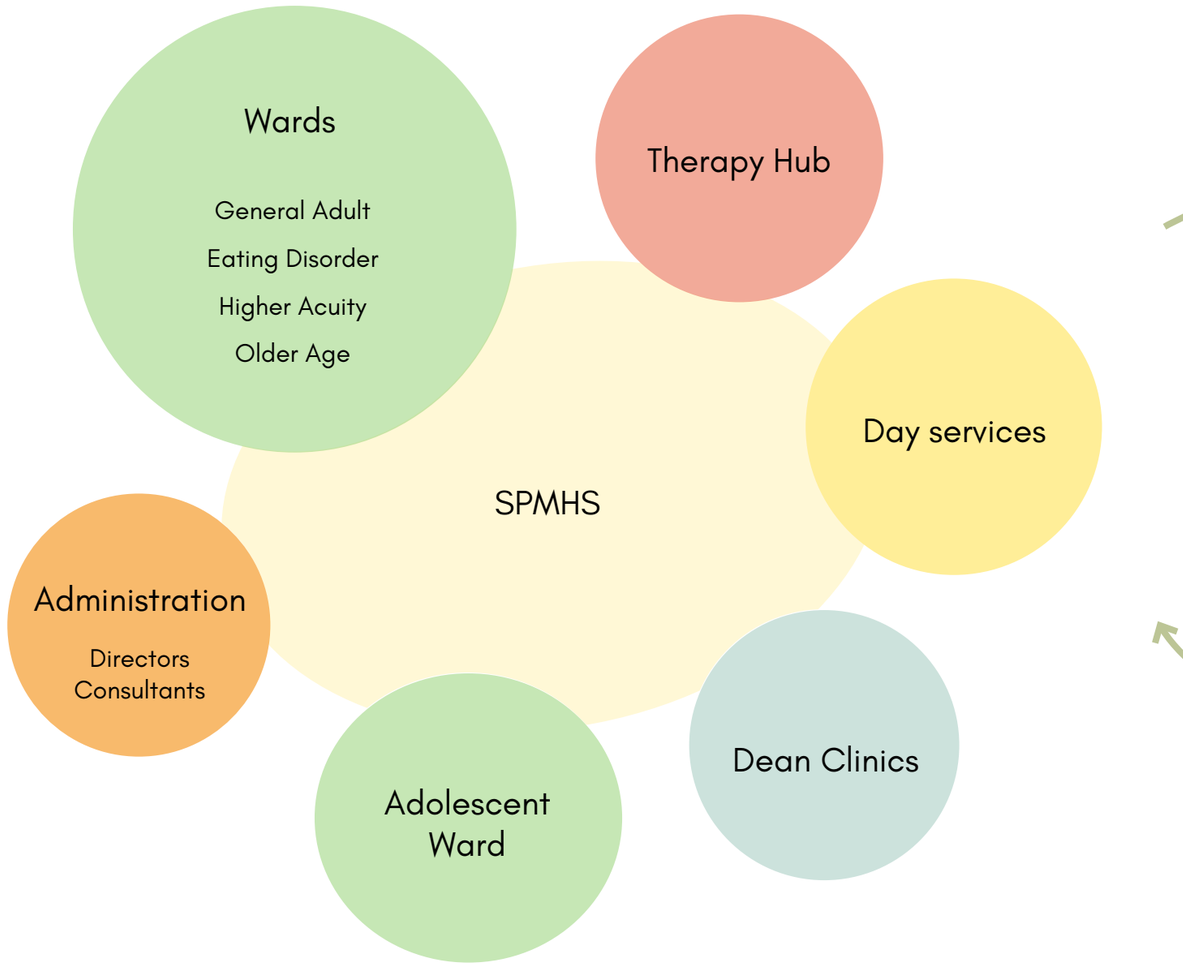
3.1 NEW SERVICES DIVISION AT SPMHS LUCAN AND SPMHS DUBLIN 8

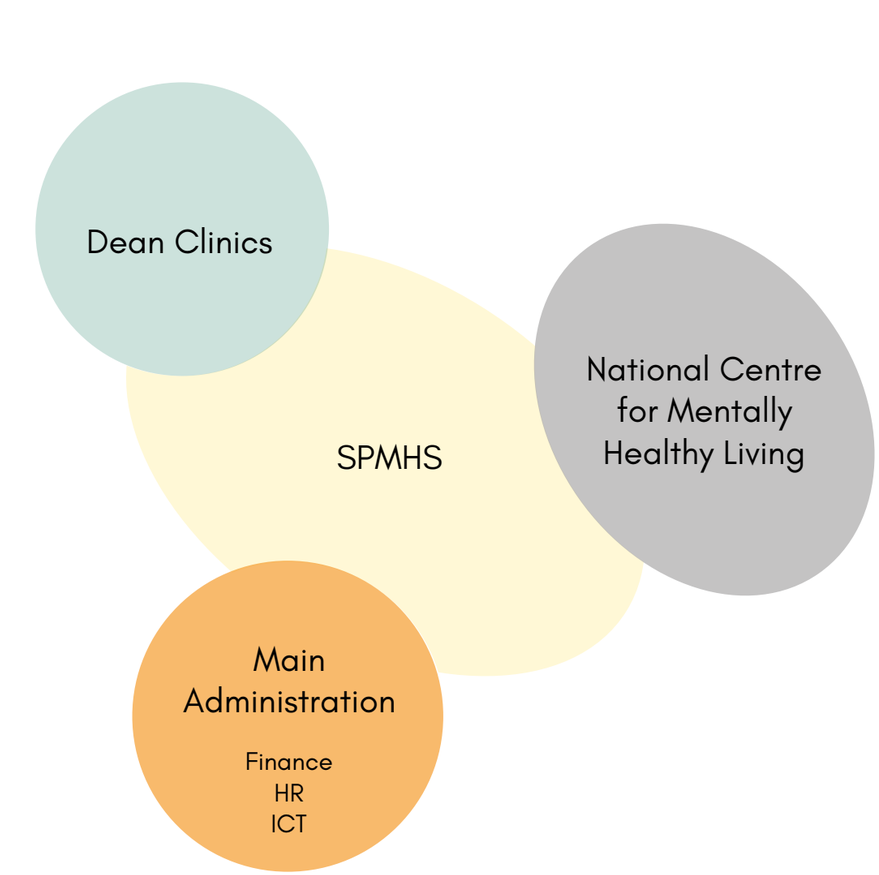


SPMHS, St Edmundsbury, Lucan



SPMHS, Dublin 8





3.2 ST. EDMUNDSBURY'S CAMPUS, LUCAN

TOT Architects' ambition for St. Patrick's, Lucan, is to create an in-patient mental health campus, within a sylvan setting. The landscaping will maximise service users exposure to nature by providing a series of high-quality, secure outdoor spaces. Service users will have access to walking-routes, horticultural therapy and leisure outdoor activities in line with the principles of landscape and mental health.

It is intended to provide:

- Adult and Adolescent Inpatient Services
- Adult and Adolescent Day Services
- Higher Acuity Services
- Eating Disorder Services
- Age Care Services
- General Psychiatric Care Services
- Consultants and Hospital Administration
- A full range of Therapeutic Services, including music, arts, crafts and horticulture.



St Edmundsbury Aerial view

Contemporary Mental Health Facitity examples



MAAJ, Health Centre Taverne, France



Huber Staudt Architekten, Psychiatric Centre Friedrichshafen, Germany



Arkitema Architects, Vejle Psychiatric Hosptial, Denmark

3.3 SITE PLAN KEY PRINCIPLES

• Green areas will have an established hierarchy guaranteeing the accessibility and security for both service users and the public. These will consist of:
- **Public Open Space** maintaining the existing walking loop and access to the future Liffey Valley Park.
- **Open garden** (green lungs connecting the new hospital and the existing buildings, accessible by service users and staff only),
- **Private gardens** (secure garden directly accessible from the new hospital by service users and staff only),
- **Private Courtyards** (secure private green spaces within the ward areas).

• Based on best practice, the majority of wards will be located at ground floor level. Further, to minimise the potential of overlooking and visual impact issues, the proposed development will be predominantly a single storey/ part two storey building with associated roof level plant areas.

• All car parking will be located at ground level. The overall total number combined with existing St Edmundsbury facility will be 214 car parking and 2 bus spaces.

• The intention is to incorporate elements of the Walled Garden and Bell Tower into the scheme and to preserve the historical values of the site.

• To mitigate potential noise and overlooking issues, a series of green buffer strips are proposed around the perimeter of the new development.

• The development will incorporate a sustainable drainage system in the form of a green roof to also enhance biodiversity of the area and to minimise the extent of hard surfacing.

• The existing protected St Edmundsbury House is proposed to be converted into Adult Day Services.

• The existing St Edmundsbury 52-bed unit is proposed to be demolished and replaced with a new 14-bed Adolescent unit.



3.4 CONNECTED NEIGHBOURHOOD



Masterplan

The proposed development will prioritise the provision for sustainable modes of transport, including active travel of walking and cycling. These connectivity strategies will help reduce the contribution of carbon related transport emissions whilst also improving air quality in and around the site. Sustainable transport and connectivity objectives will be addressed by adopting several strategies as follows:

1. The proposed design will provide for appropriately scaled, safe pavements / shared surfaces within the site to ensure that the needs of pedestrians and cyclists are prioritised. These needs are supported by the provision of suitable short and long-stay bicycle parking, changing & showering facilities.

2. Long-Stay Bicycle Parking (104 spaces) is designed for private use by employees located in secure covered and lockable shelters, that are easy to access, are well lit in highly visible areas, with good passive surveillance.

3. Short-Stay Bicycle (56 spaces) Parking is designed for ease of use by the public and visitors to the site located in secure covered shelters that are easy to access, are well lit in highly visible areas, with good passive surveillance.

4. Electric vehicle usage is promoted throughout the development with the provision of no. 49 EV charging points for cars, heavy goods vehicles and commercial vans.

5. The proposed development provides for accessibility to existing and proposed public transport infrastructure and shared mobility services.

6. 6. A shuttle bus service will be provided between the St Edmundsbury facility and Dublin 8, connecting the two sites for services.

The development provides for safe, secure and integrated connectivity throughout the site by way of clear and legible segregation of pedestrian / cycle routes from the estate road network. While there is no existing dedicated cycle network connecting the proposed development leading up to / from Lucan Road, the proposal allows for connection at a future date. Pedestrian connectivity ties into the existing local network and is designed to provide for safe and dedicated route to the local neighbourohood.



Aerial View of the Proposed Development with Indicative Chapel Hill Junction Improvement

3.5 INCLUSIVITY AND ACCESSIBILITY

The Saint Edmundsbury Campus is designed as an inclusive and accessible mental health facility that supports the dignity, autonomy, and wellbeing of all users, regardless of age, ability, or background. Accessibility has been considered from the earliest design stages, with a clear emphasis on creating an environment that is welcoming, safe, and easy to navigate for service users, staff, and visitors alike. The overall strategy meets or exceeds the requirements of Technical Guidance Document Part M (2022) and responds to accessibility standards outlined in the South Dublin County Council Development Plan. All entrances, internal circulation routes, and key amenities are designed to provide level access. The building layouts, both clinical and non-clinical, support intuitive navigation, generous corridor widths, and rest areas where appropriate.

Circulation and External Access

- External paths are gently graded, well-lit, and surfaced with materials suitable for wheelchair and mobility aid users.
- Pedestrian and vehicular movement across the site is clearly separated, particularly around key drop-off points, crossings, and the main car park. Shared surface zones use changes in material and texture to signal pedestrian priority.
- Accessible parking bays are located close to all public entrances, including the main hospital, consultant building (coach house), and facility building (barn).
- Wayfinding across the site has been designed to be clear and legible for users of all abilities, incorporating visual cues and logical spatial organisation.

Internal Accessibility

- All buildings are fully accessible via step-free entrances and internal lifts where required.
- The main hospital includes a variety of accessible WC and changing facilities, positioned throughout public and staff areas.
- A mix of quiet spaces, waiting areas, and multi-use rooms are designed to accommodate users with different sensory or cognitive needs.
- Doors, fittings, and room layouts meet standards for manoeuvrability and safe access.

Inclusive Environment

- The building and landscape design aim to reflect and respect the diversity of users, with particular sensitivity to the needs of those experiencing mental health challenges.
- The internal layout separates public, semi-public, and clinical zones in a way that preserves privacy while avoiding a sense of institutional separation.
- The historical walled garden acts as a gentle visual and spatial threshold, reinforcing a sense of progression and orientation across the campus.
- The walking route around the site remains open to the public and provides an accessible natural amenity that supports health and wellbeing.
- The public café in the consultant building and communal spaces in the main hospital further encourage inclusive use and reduce stigma around mental health facilities.

Staff and Visitor Considerations

- A dedicated set-down and pick-up zone is provided at the hospital entrance, with appropriate drop-off space for ambulances, taxis, and private vehicles.
- Secure bike storage and staff changing facilities are provided to support sustainable travel for all employees.
- External and internal lighting is designed to enhance comfort and visibility.



3.6 HEALTHY PLACEMAKING AND EFFICIENCY

The project aims to create a therapeutic environment that actively supports both physical and psychological wellbeing for all users of the site. The health and wellbeing strategies include:

- The integration of the buildings into a natural, restorative setting that promotes recovery and reduces stress through daily exposure to greenery, daylight, and fresh air.
- Landscape and site strategies that mitigate the negative effects of traffic, noise, and air pollution, while providing biophilic environments adjacent to occupied spaces, ensuring access to views, natural light, and ventilation.
- A focus on healthy and efficient internal environments through the use of non-toxic, durable, and sustainable materials that contribute to better air quality and comfort.
- Provision of shared, accessible outdoor areas that support recreation, relaxation, and social interaction, including walking loops, gardens, courtyards, and outdoor seating areas.

The development integrates green and blue infrastructure to deliver strong environmental, social, and operational benefits. A Green Space Factor of 0.73 is achieved, which exceeds the minimum score of 0.7 mandated by the SDCC Development Plan, supporting, supporting:

- Enhanced biodiversity and ecological resilience across the site.
- Reduced surface water runoff and improved capacity to adapt to climate change impacts.
- Visual and acoustic screening from surrounding areas and infrastructure.
- A vegetated buffer to reduce the effects of noise and air pollution.
- Improved outdoor air quality and on-site water management.

These measures together ensure that the site functions not only as a high-quality clinical environment, but also as a restorative landscape that reinforces the campus's human-centred and sustainable ethos.



Proposed Main Entrance Approach

3.7 PARKING

Bike Parking

A dedicated cycle lane within the site allows bicycles to access the parking areas safely. A total of 56 short-stay cycle parking spaces are provided, located close to the main entrance of each building for convenience and visibility, with the majority sheltered. In addition, 104 long-stay cycle parking spaces are provided for staff, all of which are sheltered and secure.

Car Parking

The surface parking areas comprise a total of 214 spaces for staff and visitors, including 75 existing spaces to be retained. These are located in close proximity to each building and are extensively landscaped to minimise visual impact. An additional 2 spaces will be designated for hospital operations, including ambulance, minibus, and van parking.

Access to staff and visitor parking from Lucan Road will be controlled.

To reduce reliance on private cars, a Mobility Management Plan will be implemented, including:

- A shuttle bus service between the St Patrick's site in Dublin 8 and St Edmundsbury in Lucan.
- Promotion of the Bike to Work Scheme.
- Encouragement of alternative modes of transport, with bus routes and timetables communicated to all visitors and staff.

The hospital will operate on a 12-hour shift basis, helping to distribute traffic flow outside of peak hours.



3.8 RATIONALE FOR A LOW-RISE MENTAL HEALTH HOSPITAL

Best practice and clinical perspective

- The majority of the functions and services located on the ground floor maximises accessibility, and service users flow throughout the building, promoting interaction and social exchange.

- A lower building maximises the use of natural light and natural ventilation, two cornerstones for improving the service users' mental health.

- More wards on the ground floor mean more service users can directly access outdoor areas.

- Some wards must be located on the ground floor for clinical purposes: the high-acute ward, older age ward, and eating disorder unit.

- A lower building eliminates the issue of major overlooking onto sensitive wards (i.e. high-acute and older age).

Planning context and neighbouring area

- The surrounding area presents mainly woodlands, farmland, meadows, and low-rise housing.

- On the East and West of the site, two schools of one-storey and two-storey create potential overlooking.

Site features

- The site's many features, such as the woodlands, meadows, and historical structures, allow the new building to interact with them and become positive additions to the scheme.



Ronald Mcdonald House, Keppie, Glasgow, United Kingdom



Pole De Sante Liberal Ambulatorie, MAAJ Architects, Charleval, France



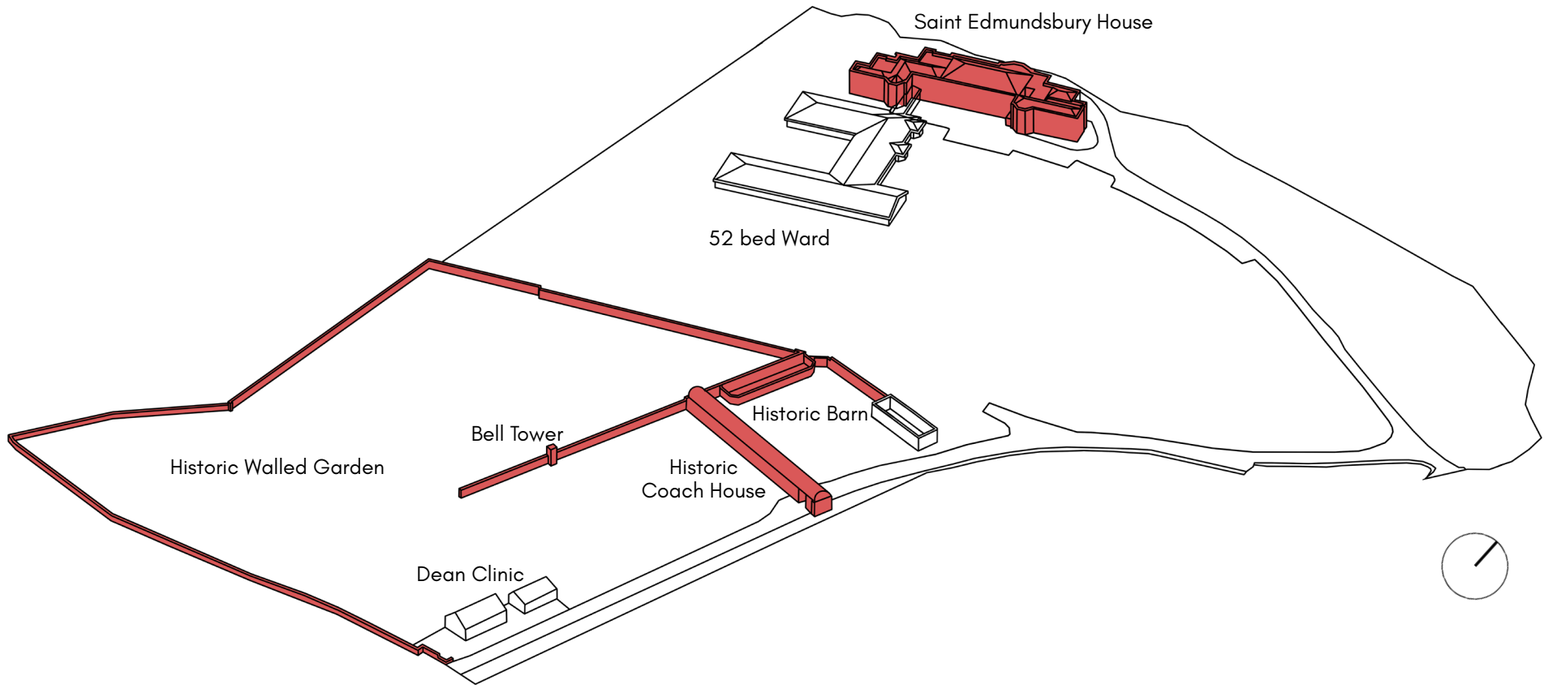
Psychiatric Centre Friedrichshafen, Huber Staudt Architekten, Germany

3.9 MASSING AND SCALE

Ref. Appendix A for Alternative Design Approaches

Existing Site

The St. Edmundsbury estate extends from the historical country home located to the north, to the edge of the historic walled garden, fronting onto Lucan Road, to the south. The site comprises a mix of protected structures (highlighted in red), contemporary farm buildings and extensive fields and sensitive woodland.

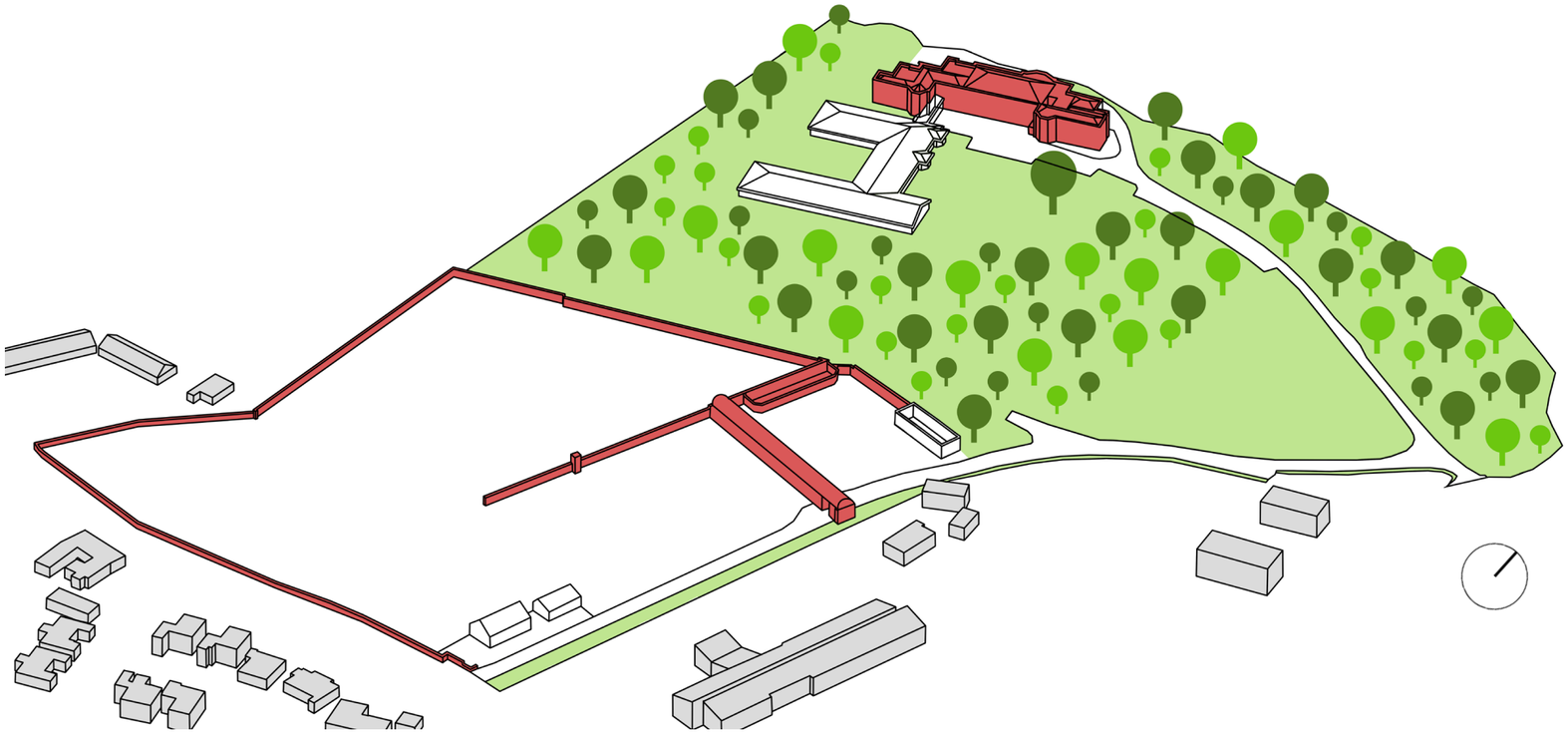


Relevant Context

- The woodland between the historic walled garden and the country house is both a limit and a feature.

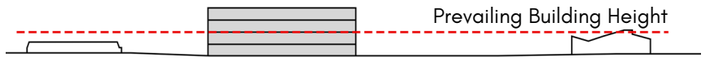
- The most relevant protected structures such as the country house, the bell tower, the garden wall, and the adjoining farmyard building will be retained and included within the new scheme.

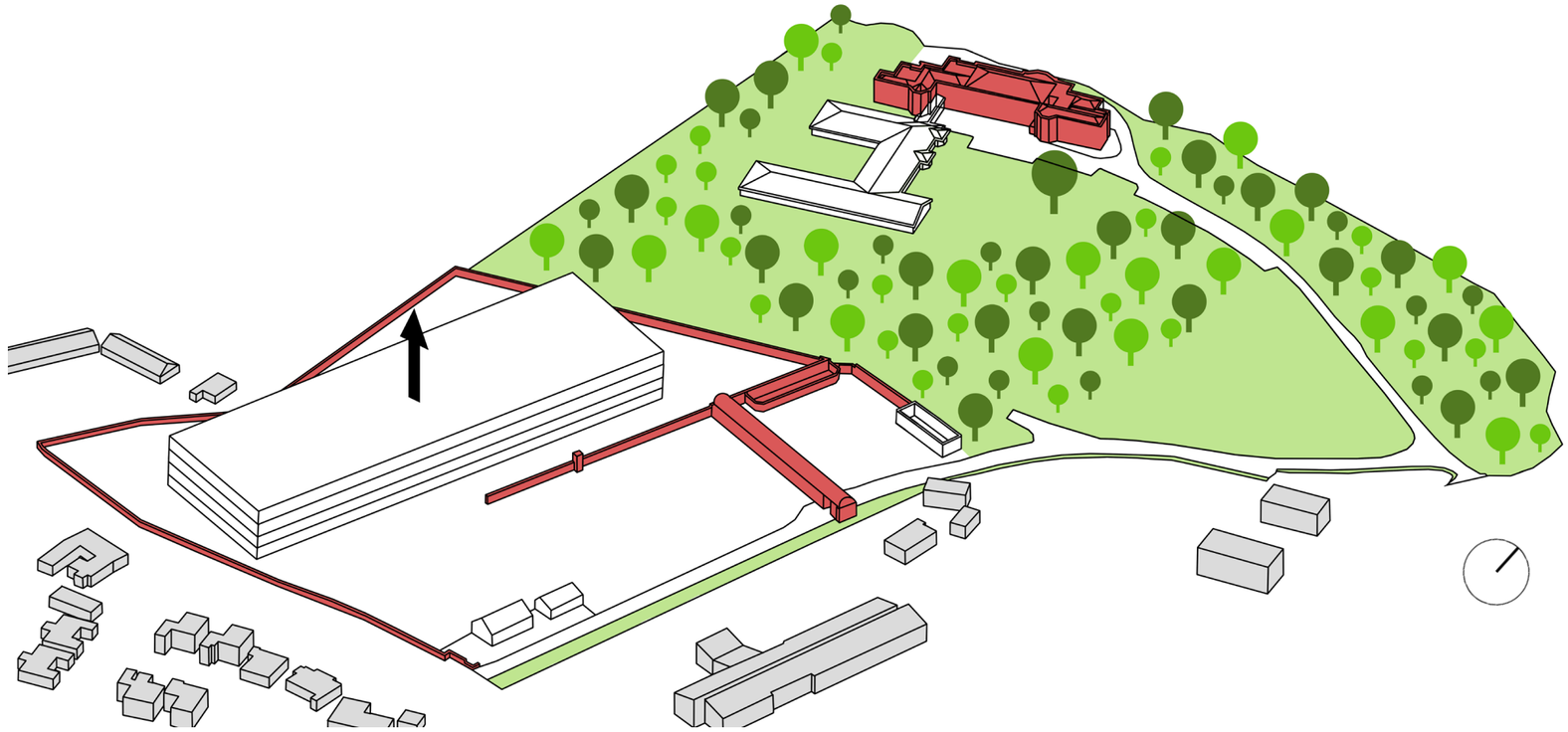
- The existing site and neighbouring context; a mix of housing, schools and contemporary farm buildings, established the height limit to a predominantly two storey structure.



Volume

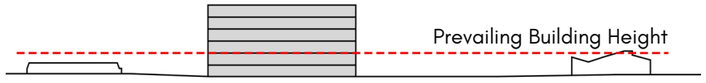
Proposed site location within the walled garden.

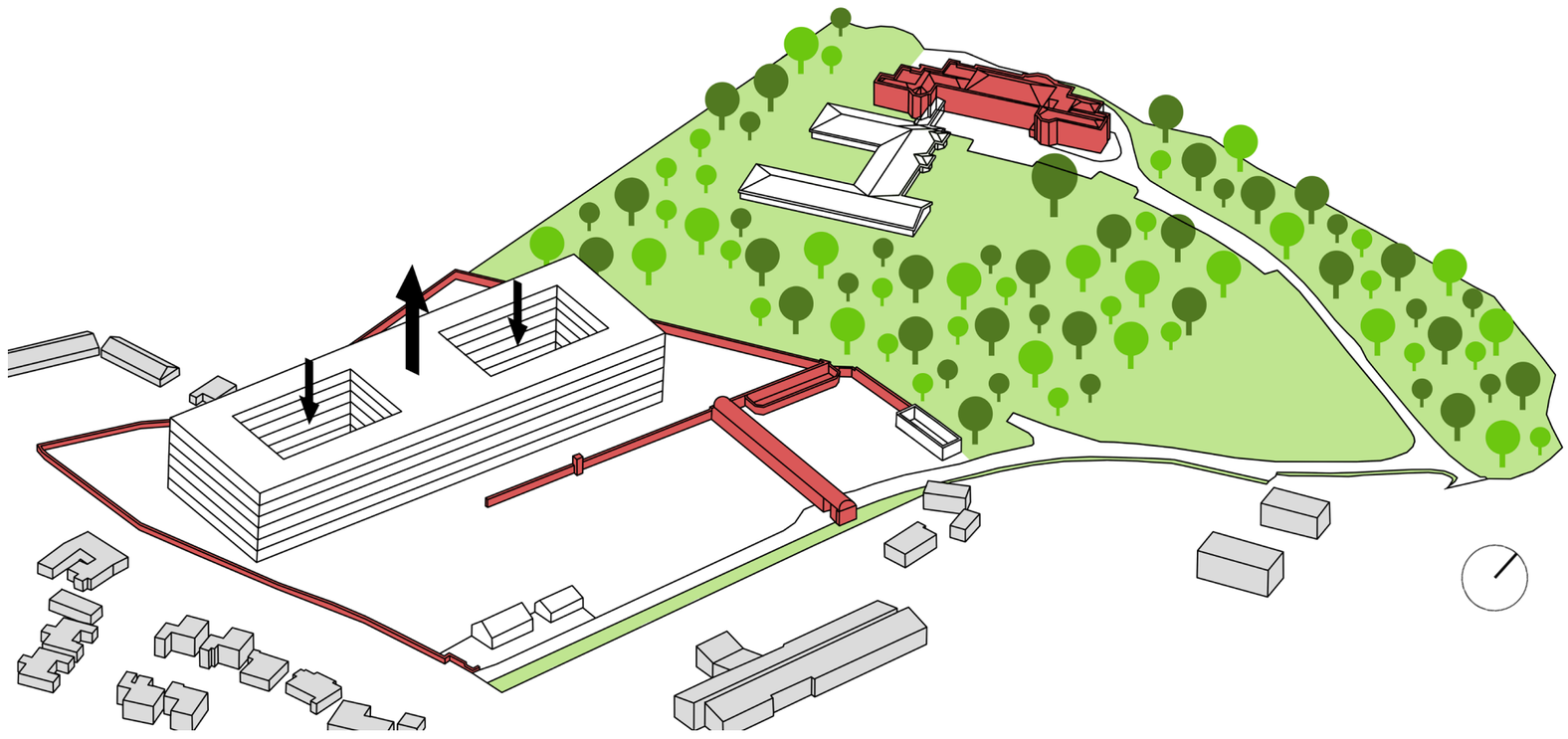




Light

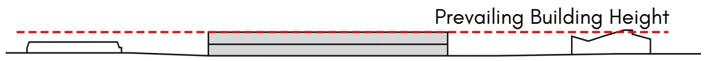
The need of natural light inside the building's volume increases the overall height to compensate the loss of area.

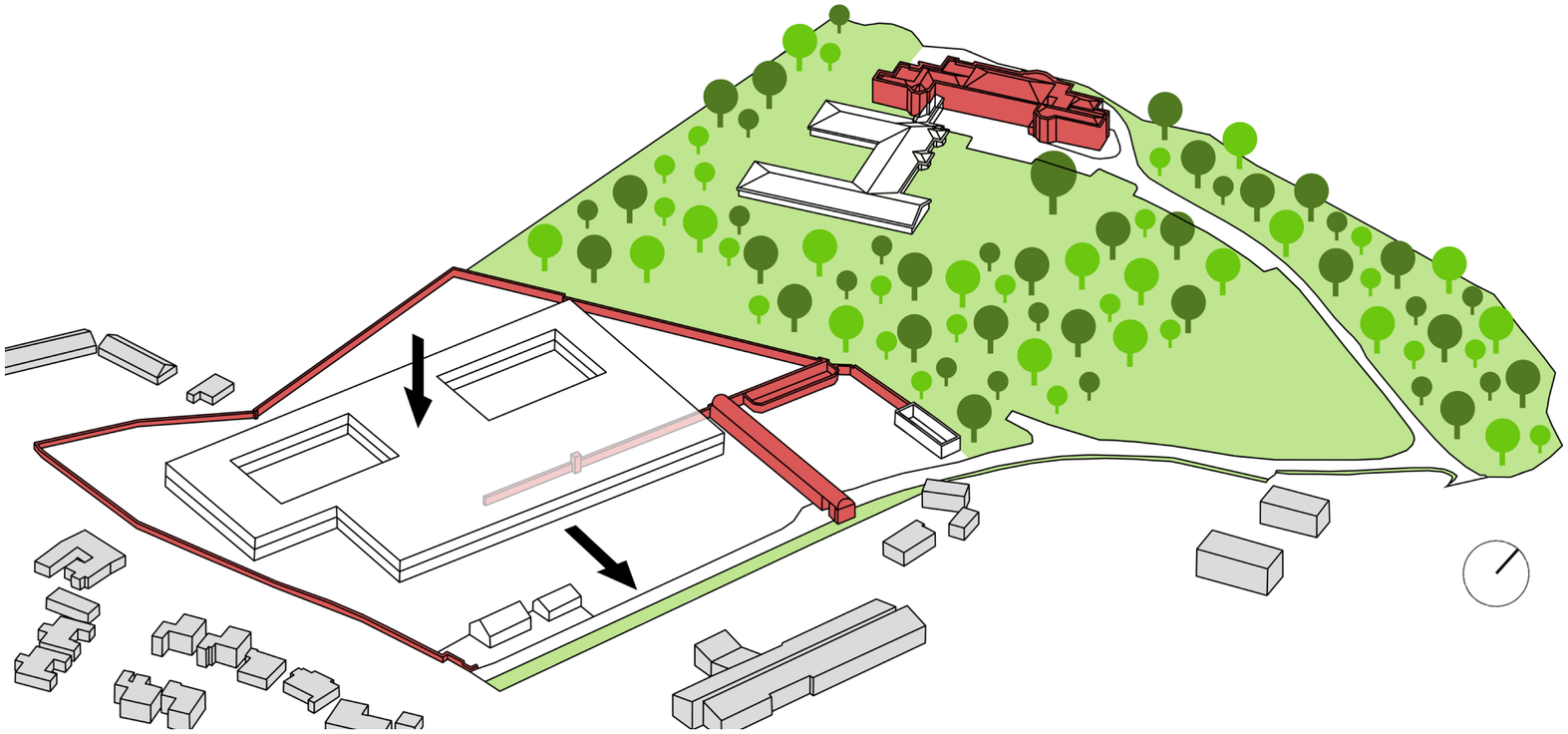




Height

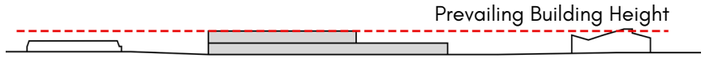
In considering the site and adjacent context, the volume of the building is set to two storeys. This requires an extension of the footprint beyond the wall and bell tower. These protected elements will become a prominent feature of the interior.

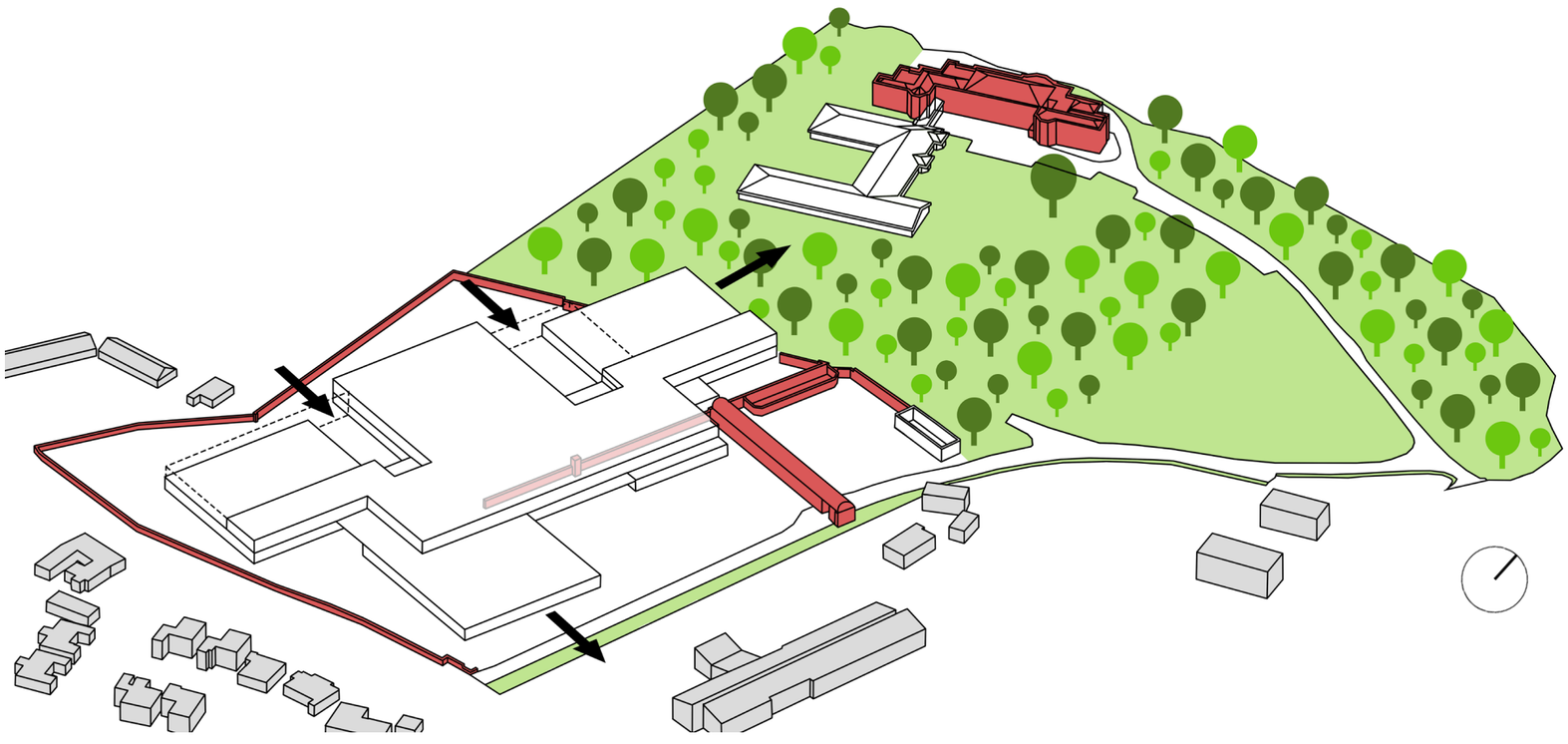




Articulation

Following the brief from SPMHS combined with best practice design for in patient mental health facilities, the footprint of the building needs more natural day lighting, articulation and expansion.

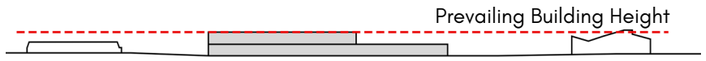


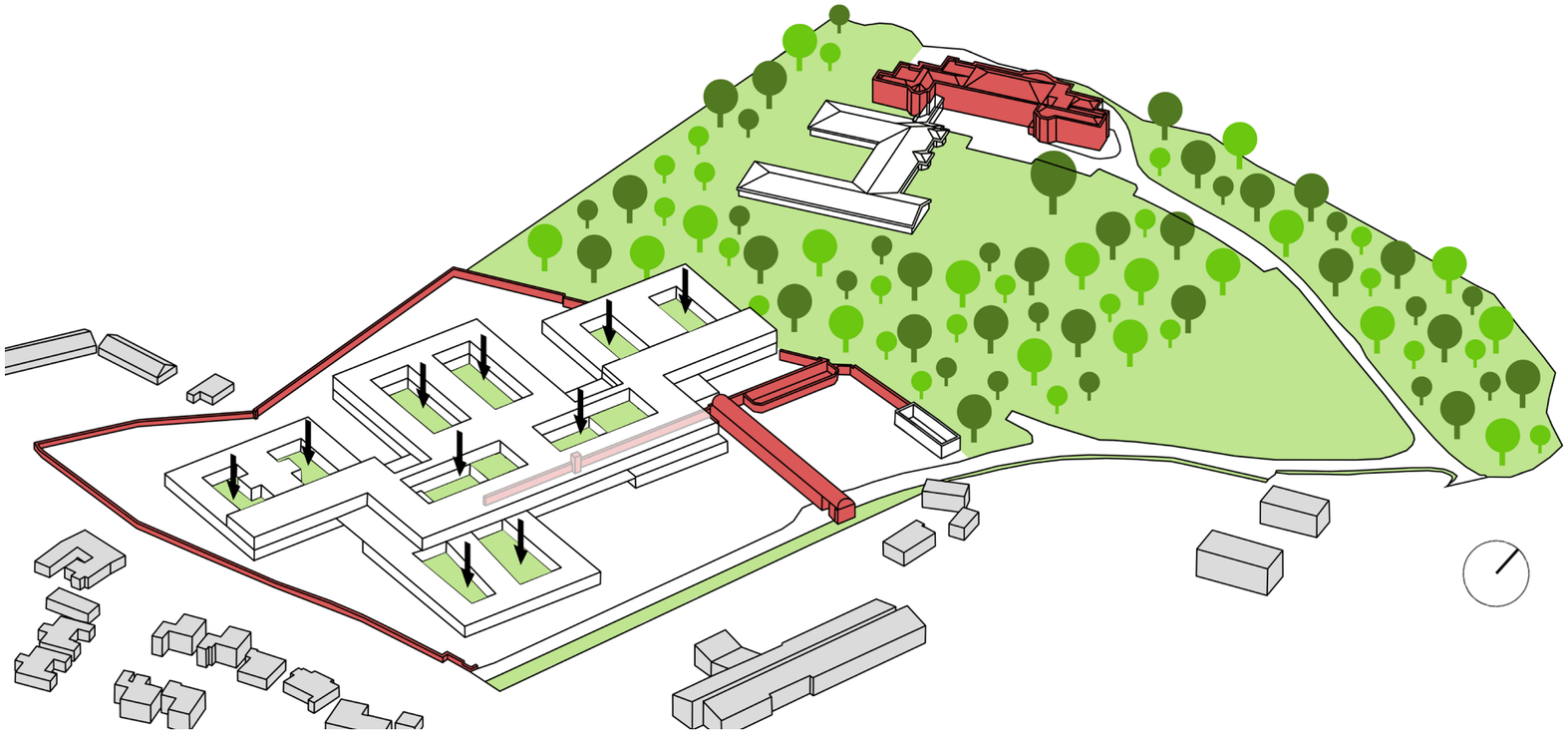


Security

Each ward is provided with secure landscaped courtyards at ground and first floor levels, allowing for quality views, access to nature and better natural daylighting to internal spaces.

Two further courtyards located within the heart of the Hospital will also provide for quality views, daylighting and social interaction spaces along the main Hospital street.

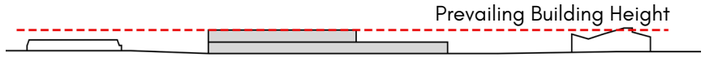


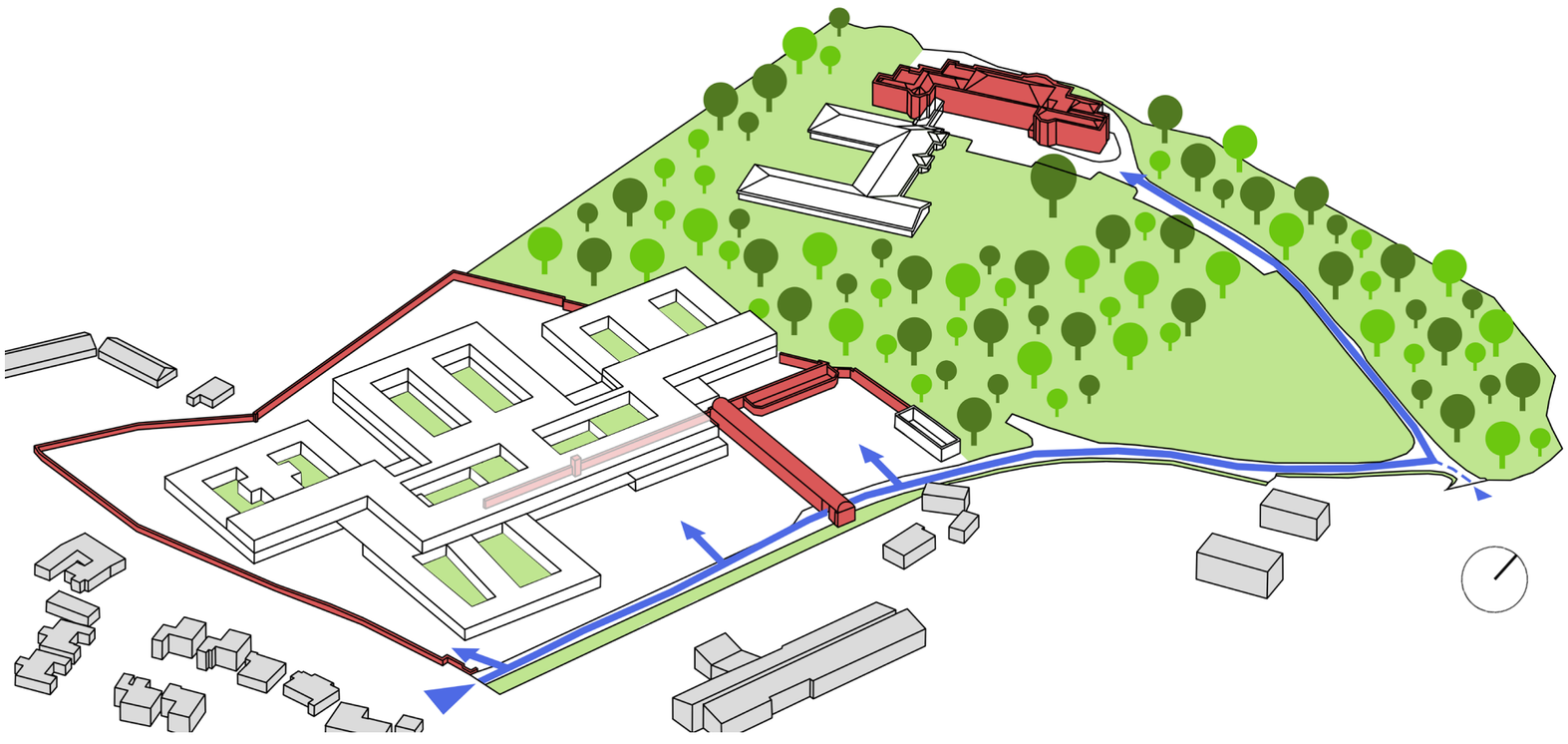


Connectivity

The primary vehicular and pedestrian access to the proposed and existing facilities is to be located in its current position, off the old Lucan Road.

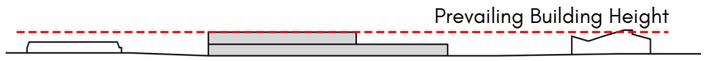
This will form a primary access to staff, service users and the general public. It is proposed to maintain the established walking route through the site.

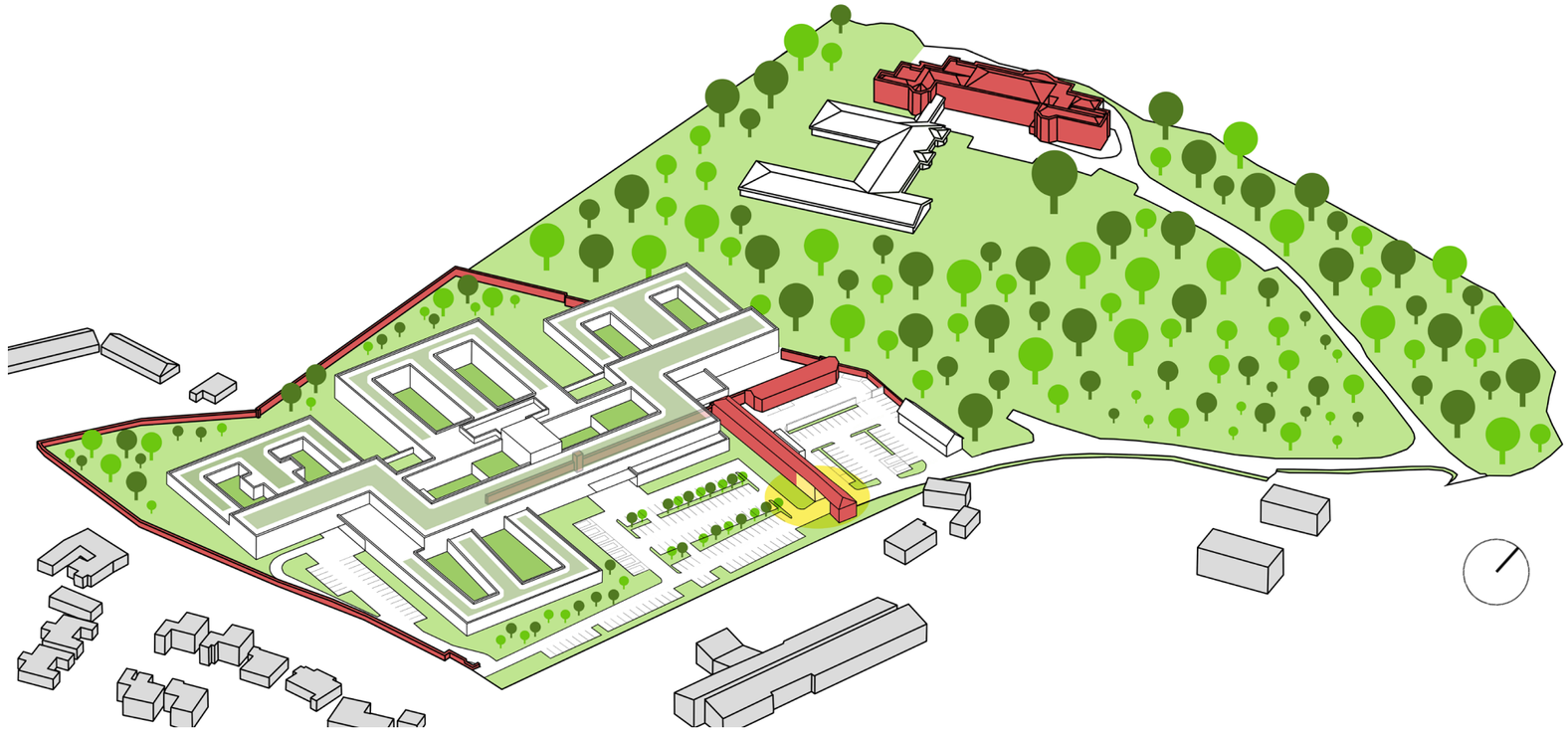




Public Realm

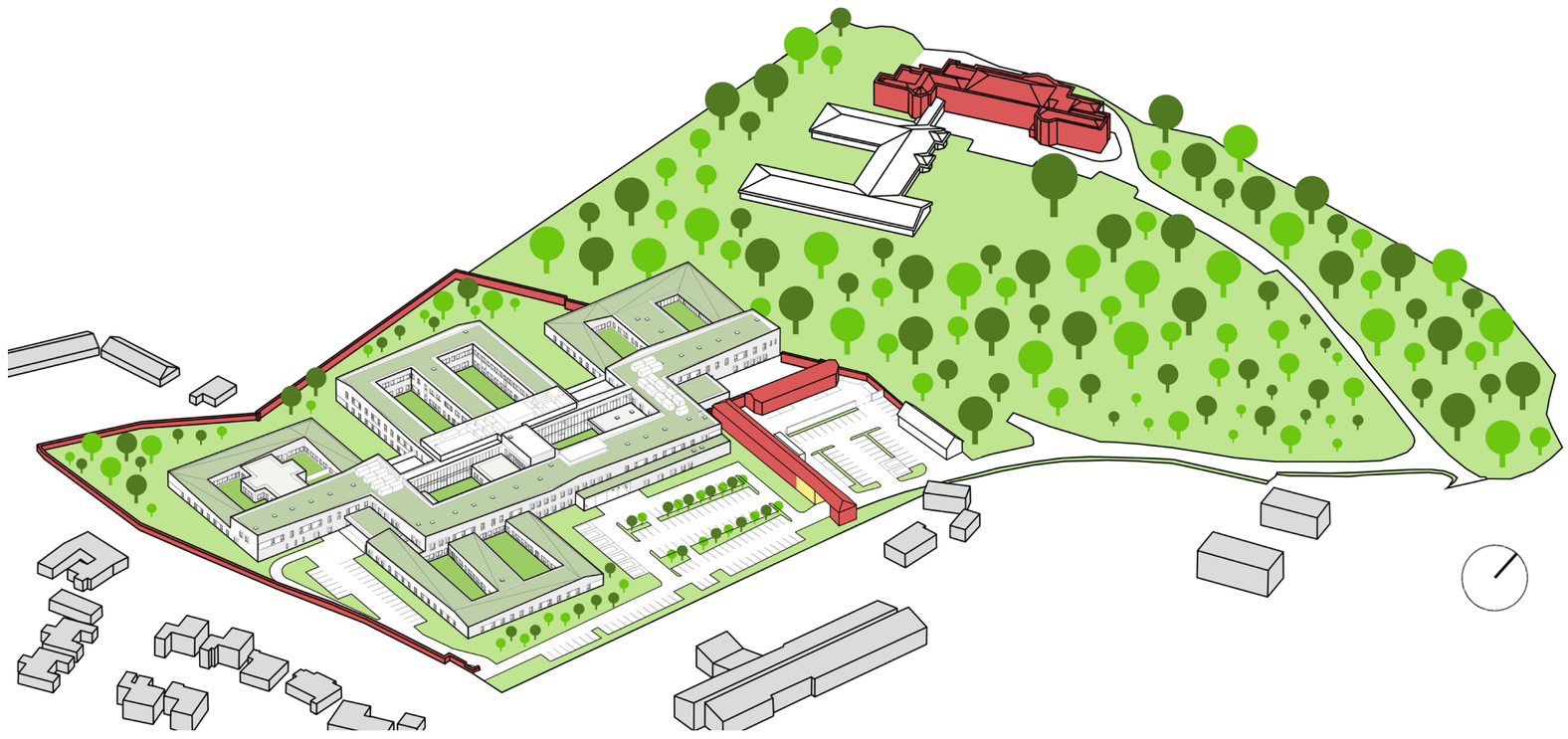
In addition to a more visible and open Hospital entrance, a publicly accessible cafe, located in the refurbished historic farm building, will serve as a new social hub for the locality and interface with SPMHS.





New Main 200 bed Adult In-patient Hospital

The final form presents a low-rise, articulated building that fits within the historic walled garden while integrating key heritage features like the bell tower and garden wall. Courtyards bring light and nature into the heart of the hospital, and the massing steps down at the edges to respect the surrounding context.



3.10 PUBLIC REALM

The proposed development gives careful consideration to the design of the public realm, aiming to create a welcoming and accessible environment that respects both the needs of the local community and the surrounding natural setting. The layout of the site balances the clinical requirements of the facility with opportunities for public use, quiet enjoyment, and landscape improvement.

Along the eastern boundary, an existing walking route that has long served local residents and schools is preserved in its entirety and remains fully accessible. Where this path meets the restored historic coach house, which will be adapted for use as an individual therapy building, a public café is introduced. This shared amenity is intended to be used by both service users and visitors, creating a point of interaction and offering a positive, non-clinical presence within the site.

Further north along the walking loop, an additional landscaped area with a new pond is proposed. This space is designed to support biodiversity and improve the site's environmental value, while also providing a peaceful natural setting for visitors and staff. The adjacent protected woodland to the north of the main hospital will remain untouched and will not be accessible to the public, in order to preserve the sensitive flora and fauna found within.

Key clinical buildings located at the far north of the site, including St. Edmundsbury House and the adolescent unit, will continue to operate privately and will not form part of the public realm. However, the main hospital building itself is designed to allow public access to selected areas such as the main entrance, café, foyer, and canteen. This approach supports the aim of reducing the stigma around mental health care by encouraging openness and transparency.

Internally, the building layout clearly distinguishes between public zones and clinical areas, ensuring privacy and security where required. The retained historic walled garden structure plays an important role in this arrangement, acting as both a visual feature and a marker of the transition between public and private spaces.

Overall, the public realm has been carefully designed to integrate the facility into its setting, encourage responsible public use, and promote a calm, inclusive atmosphere for all who use the site.



Proposed Public Realm Wetland Feature

3.11 LOOK AND FEEL

The Foyer

The entrance of the St. Edmundsbury main hospital is the primary interface between the public areas and those dedicated to the service users.
Here, the Historical Stone Wall and the Bell Tower, part of the former Walled Garden, are the prominent elements that define the character of the foyer.
A double-height space accommodates the Bell Tower's full height with a generous glazed wall to the back to bring natural light inside the entrance.
Apart from being a feature element, the stone wall is a threshold between the hospital's public and clinic areas.
New openings are created to bring natural light inside and open up views towards the public courtyard with its soft landscaping.



Impression of the entrance incorporating Historic Garden Wall acting as threshold

The Courtyard

The Walled Garden typology is one of the main drivers of the project and is proposed in the Main Hospital as a series of spacious courtyards.
The two public courtyards function as an open buffer zone between the Historical Stone Wall, delimiting the public area and the Main Hospital Street, which delimits the Public area from the clinical one.
Apart from bringing natural light and natural ventilation into the hospital, these sizable open spaces are fully accessible by both the service users and the hospital staff, allowing them to enjoy a safe, soft-landscaped environment.



Impression of public Courtyard viewed from Hospital Street incorporating Historic Garden Wall acting as both enclosure and threshold

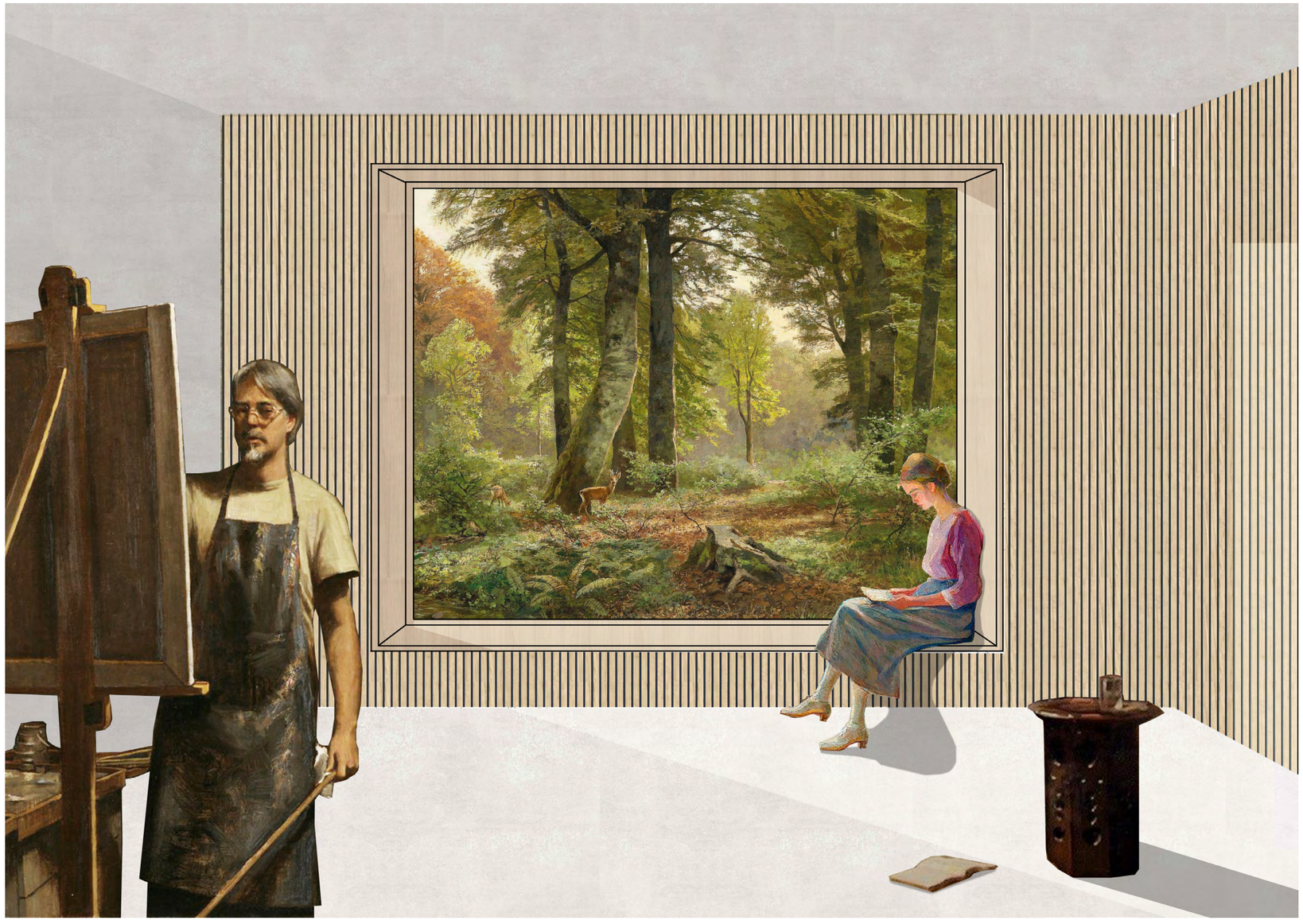
The Psychotherapy Space

The Psychotherapy Space is the area in the hospital where service users engage in various therapeutic activities both at an individual and group level. They also engage in many and varied activities of daily living during their inpatient stay as part of their recovery journey.

The space comprises group therapy rooms and individual therapy rooms (which are used for a range and variety of individual and group psychotherapeutic interventions), an art therapy room, a music therapy room, a pottery workshop and multi-purpose rooms used to enhance and promote the inpatients' psychological recovery.

These rooms are located on the site's northern side, near the existing woodland, and each space has a picture window looking onto this landscape.

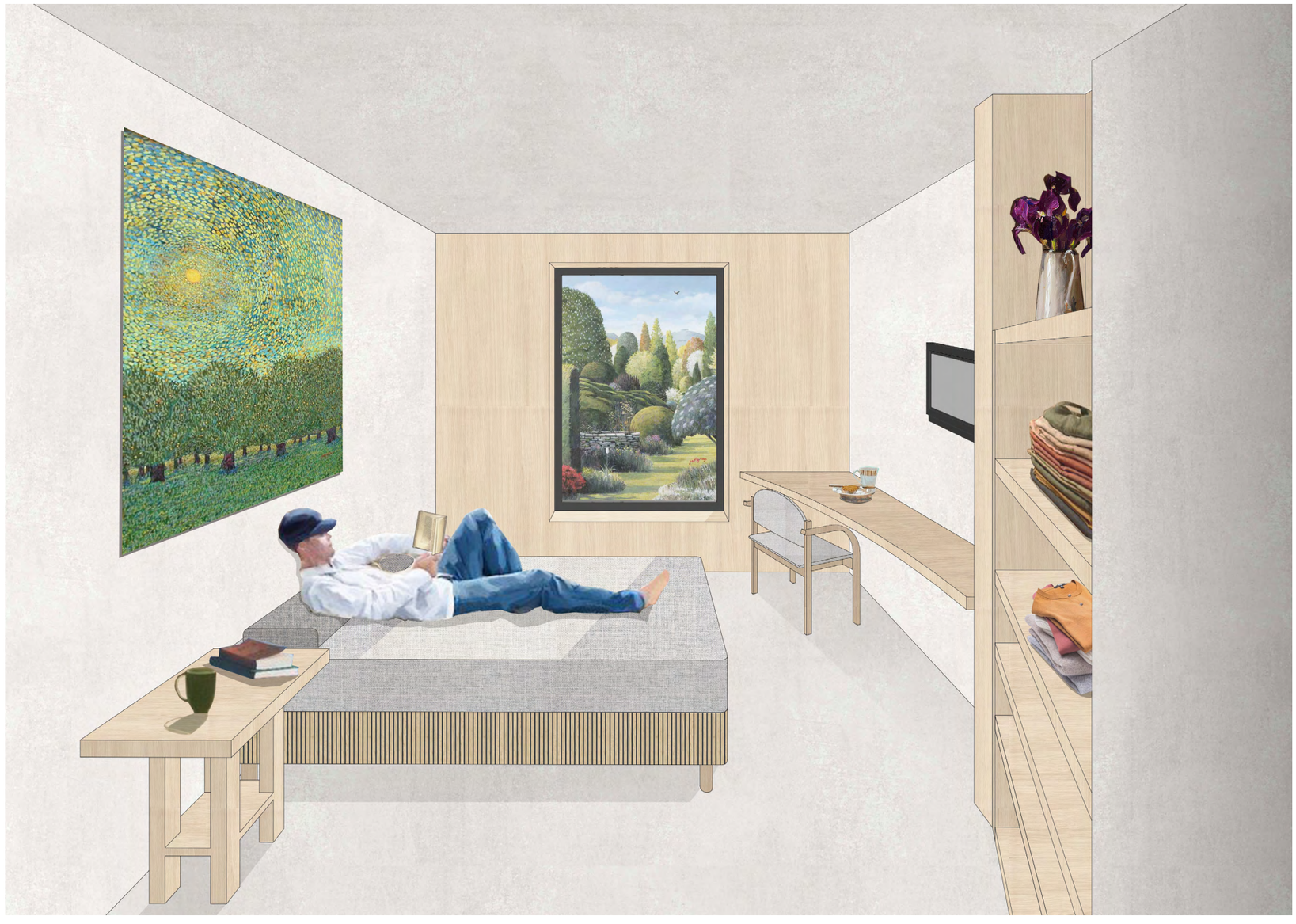
Positioning the therapy space in the proximity of the woodland rather than other parts of the site reflects the clinical prerogative of enabling the users of our service to express themselves openly and productively in an emotionally warm and calming environment.



Impression of Typical Clinical Therapy Space with view out towards existing Woodlands

The Bedroom

The bedroom forms the most personal space within the hospital enviroment. Here the service user must be able to rest, relax and seek privacy.
The room furniture is simple but comfortable; the neutral colours of the timber and the wall finishes are intended to transmit a sense of calmness.
The neutrality of the finishes allows the occupant room for personalisation of the space.
Once again, the room's focal point is on to the surrounding nature and landscaping.



Impression of typical bedroom with view out towards garden area

4 SUSTAINABILITY

4.1 SUSTAINABILITY RATIONALE

Sustainability is embedded in the design and development of the new mental health hospital, with an emphasis on creating a high-performance, low-impact, and resilient healthcare environment. While detailed environmental certifications such as LEED or BREEAM are subject to further assessment, the design has been developed to align with their principles and will be ideally positioned to achieve high ratings under both systems.

Energy Efficiency and Carbon Reduction
The hospital design incorporates a wide range of passive and active strategies to reduce operational energy use and support long-term environmental performance. Key measures include:

- Extensive use of roof-mounted solar photovoltaic (PV) panels to generate renewable electricity onsite.
- A modern, high-efficiency heating and cooling system that minimises fossil fuel reliance.
- Building layout and envelope optimised for thermal performance, daylight access, and natural ventilation to reduce energy loads.
- A low-rise, compact footprint that supports energy efficiency and enhances connectivity with the landscape.
- These measures combine to reduce the building's operational carbon footprint while improving user comfort and overall energy performance.

Embodied Carbon and Material Strategy
Material selection has prioritised low embodied carbon where possible, with domestic and tangible materials carefully considered across structure, façade, and finishes. The use of durable and easily maintainable materials, such as render, brick, and timber, supports a long service life and minimises replacement cycles. The overall form is efficient and adaptable for alternative healthcare uses in the future, further supporting lifecycle sustainability.

Resilience to Climate Change
The project addresses resilience through both building design and landscape strategy. The low-rise, thermally efficient buildings are designed to mitigate overheating, manage increased rainfall, and withstand more extreme weather conditions over time. In parallel, the site landscape integrates climate-adaptive solutions to protect both the environment and the people using it. These include:

- SuDS to manage surface water runoff.
- Rainwater drainage strategies that reduce flood risk during heavy rainfall.
- A robust green infrastructure approach that maintains biodiversity, improves air quality, and supports psychological wellbeing.

Circular Economy and Resource Efficiency
The design follows circular economy principles, reducing waste during construction and enabling future reuse or adaptation. Material use has been optimised across all building layers to lower resource consumption and reduce environmental impact throughout the building's life cycle.

Designing for Robustness
Due to the nature of the facility, all materials and details are designed to withstand intensive use, support user safety, and require minimal maintenance. High-quality, proven materials have been selected to ensure longevity while supporting a therapeutic and welcoming environment.

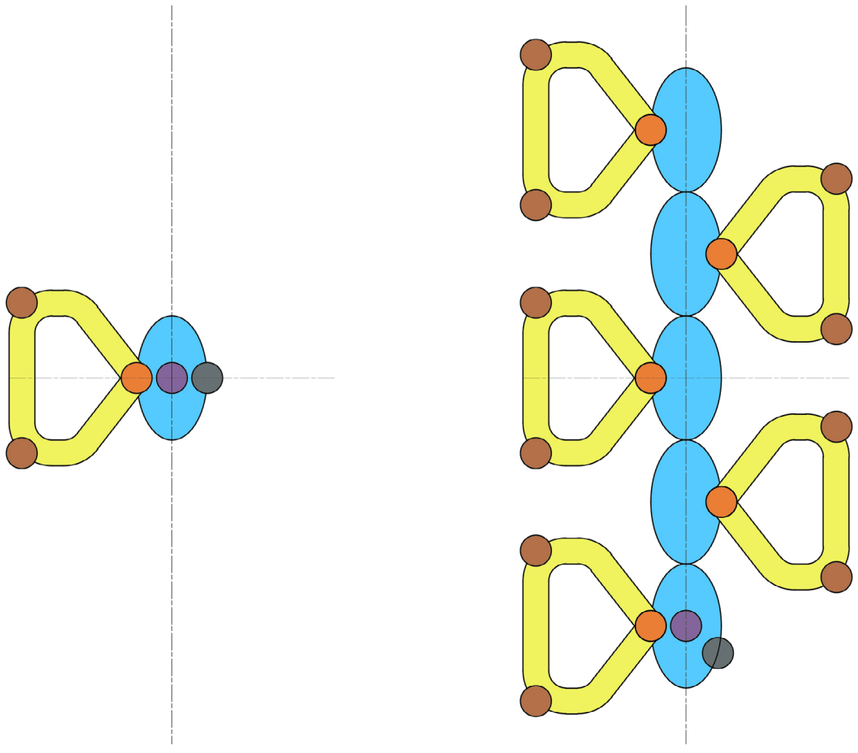
By integrating these strategies from the outset, the development contributes meaningfully to national and global sustainability objectives, offering a healthcare setting that is efficient, durable, and future-ready.

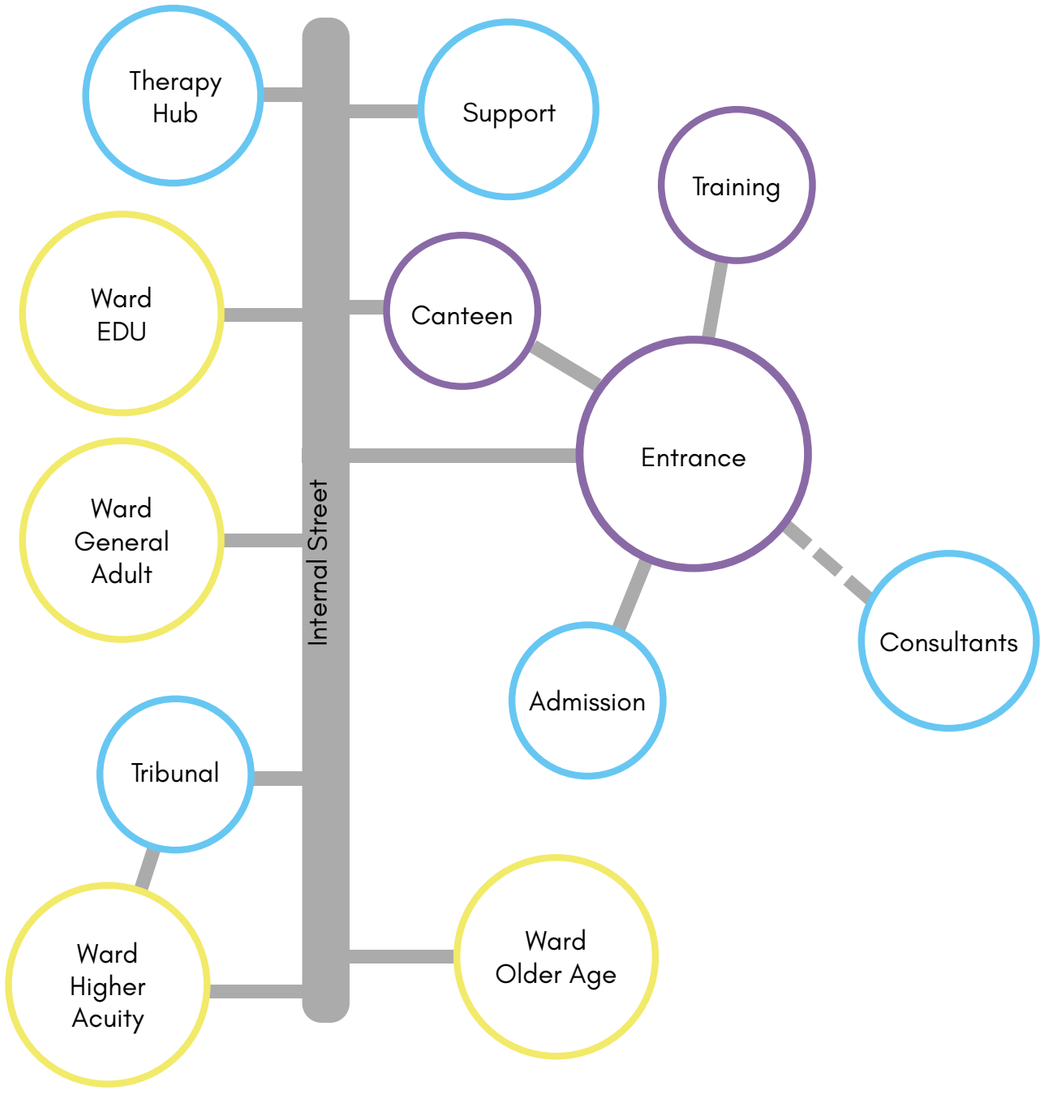
5 DETAILS OF THE PROPOSED 200-BED ADULT IN-PATIENT HOSPITAL

5.1 LAYOUT PRINCIPLES

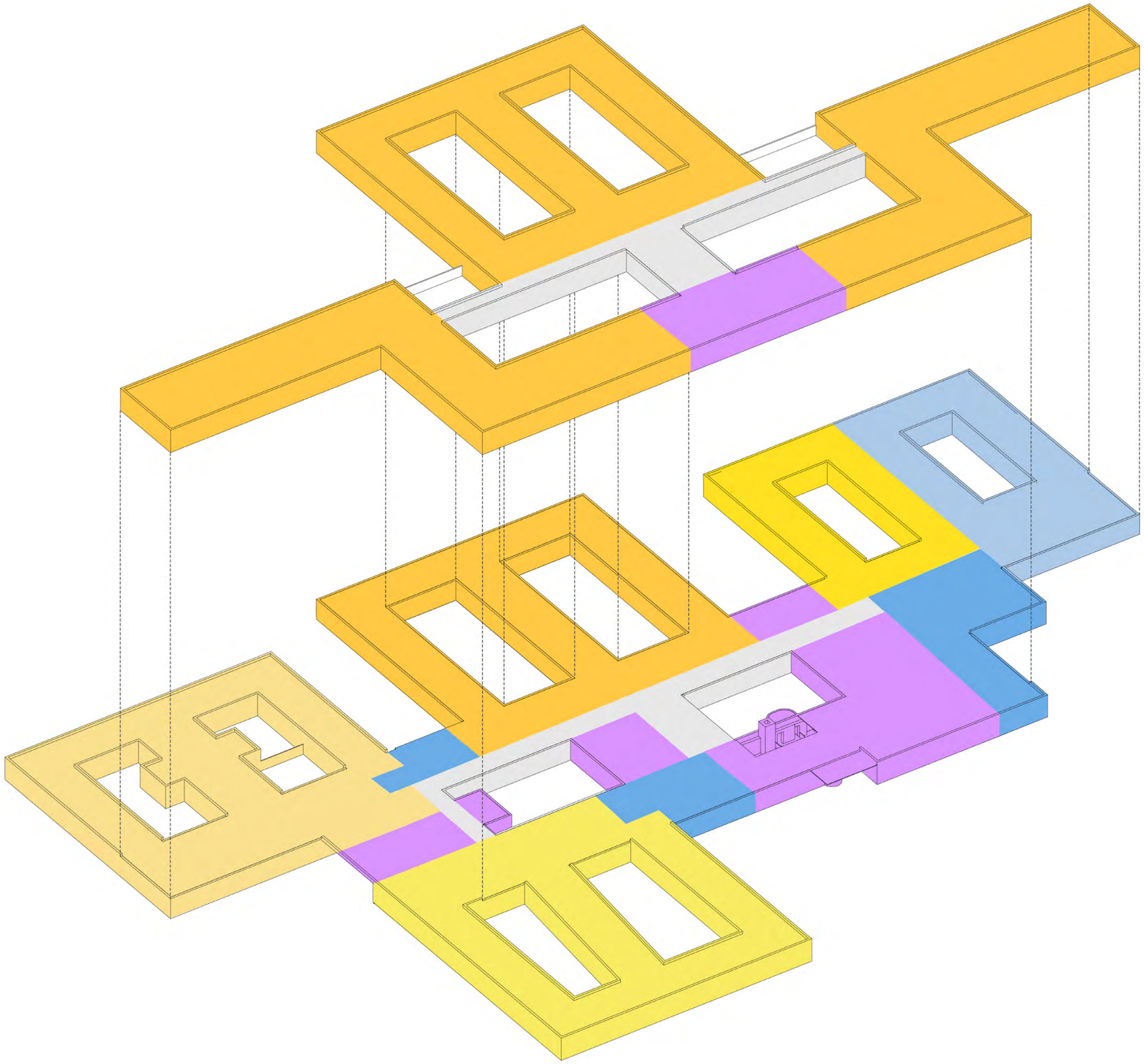
The layout of the Main Hospital is based on the Key Model Diagram outlining “Hub & Spoke” principle.
As a hierarchy of spaces emanate from the center these in turn, establish primary routes between functions.

Clear way finding and connectivity to the various Hospital functions is provided by a wide Internal Street at ground and first floor levels. Coupled with courtyards and lightwells, the street becomes a further social hub within the fabric of the Hospital.
The wards are typically arranged around a secure glazed courtyard enclosure. This predoninant layout allows for better flexibility, segregation (as may be required), views out, natural day lighting and supervision.





Ground Floor Diagram



Function within the building

- General Adult Ward
- High Acute Ward
- EDP Ward
- Older Age Ward
- OT Area
- Support / Program
- Social / Office
- Main Circulation

5.2 LAYOUT PLANS

The building will accommodate:

At Ground Floor:

- Public entrance
- Cafeteria
- Admissions
- Training rooms
- Therapy Hub
- Pharmacy
- ECT
- Kitchen and housekeeping facilities
- 4 no. Wards
  - Eating Disorder Unit, 12 Beds
  - Older Age Unit, 32 Beds
  - Higher Acuity Unit, 28 Beds
  - General Adult Unit, 32 Beds

At First Floor:

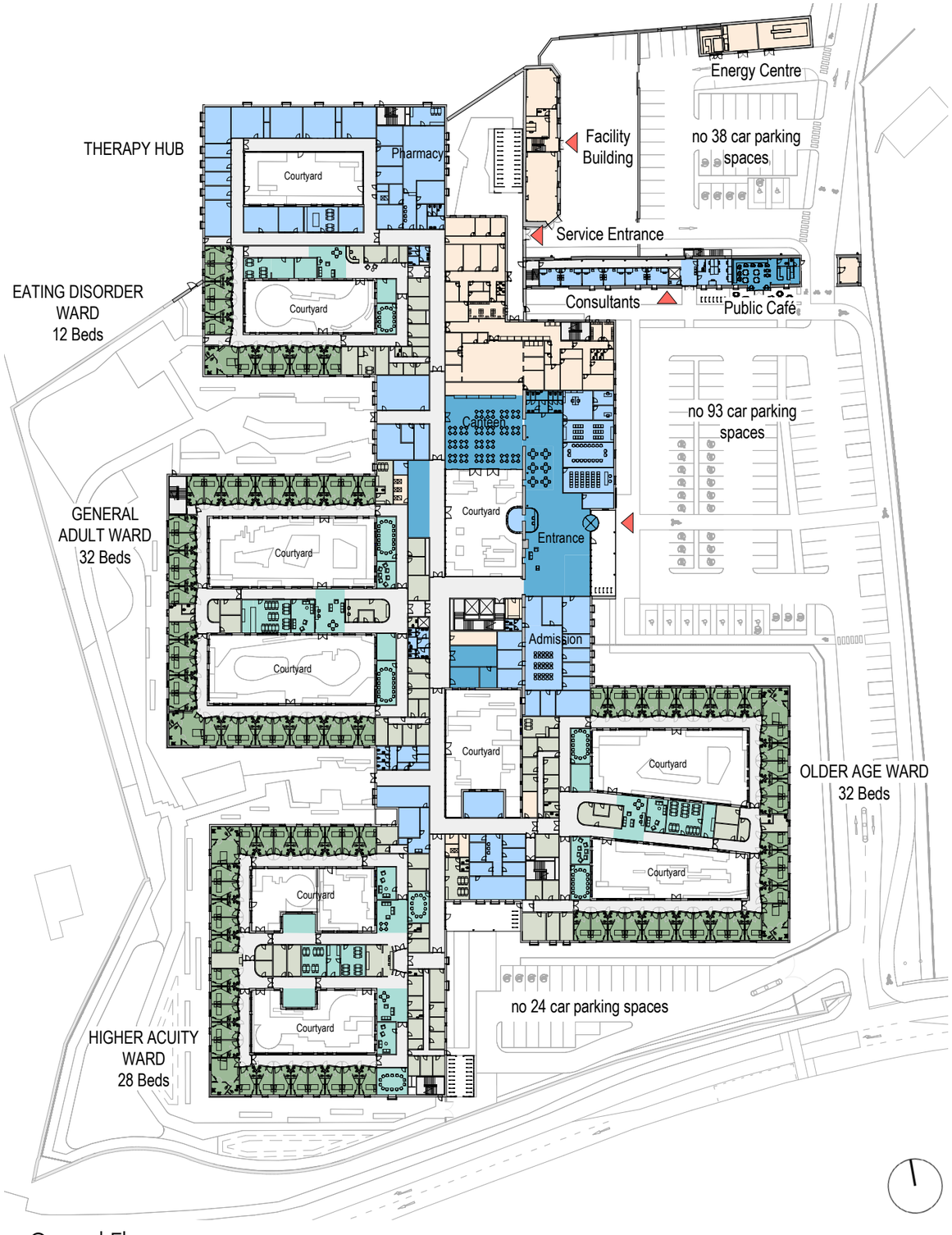
- Directors offices
- 3 no. General Adult Wards, 32 Beds Each

At Roof level:

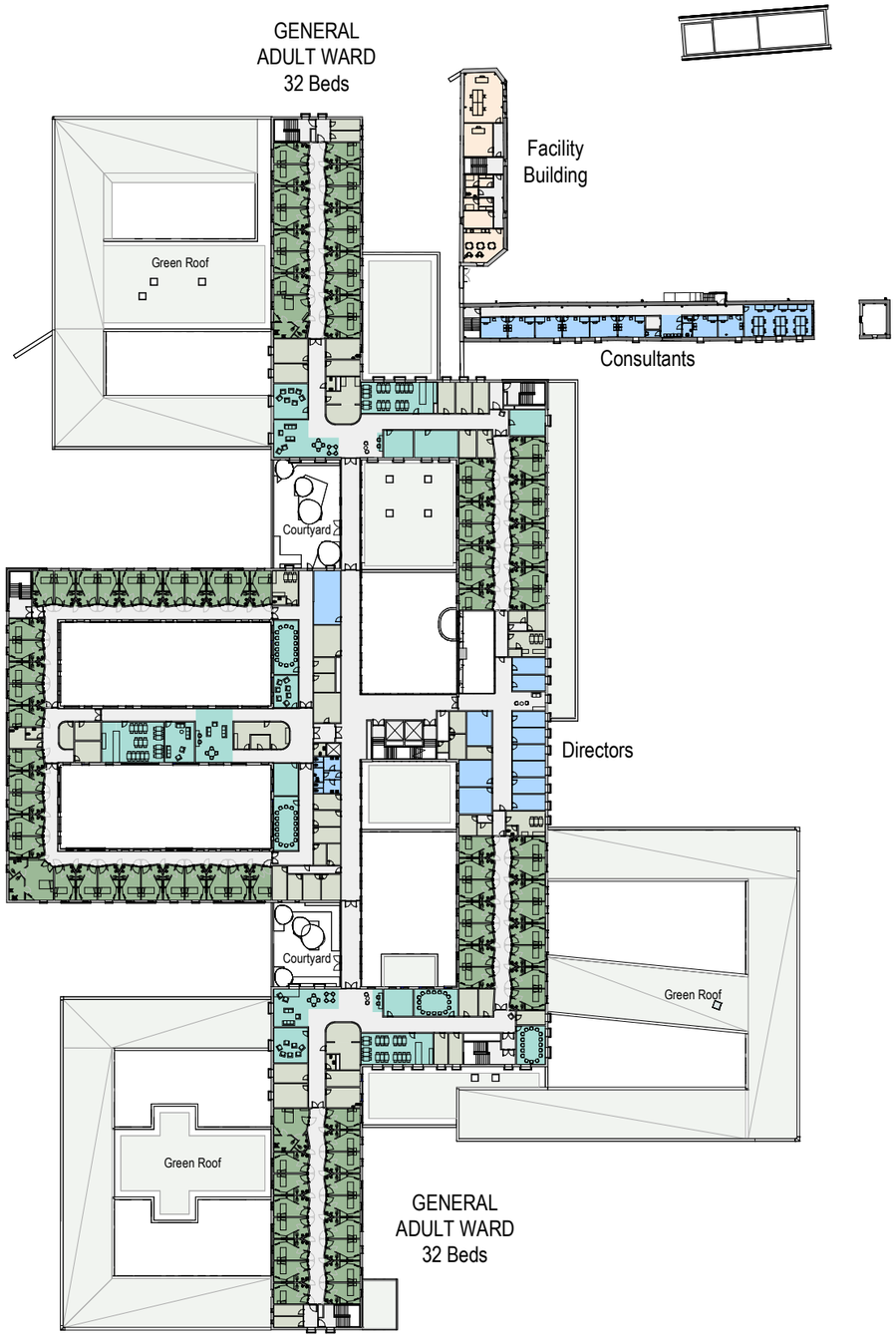
- Plant room

The Historic Coach House will serve as individual therapy rooms for Consultants and a Public Cafe.

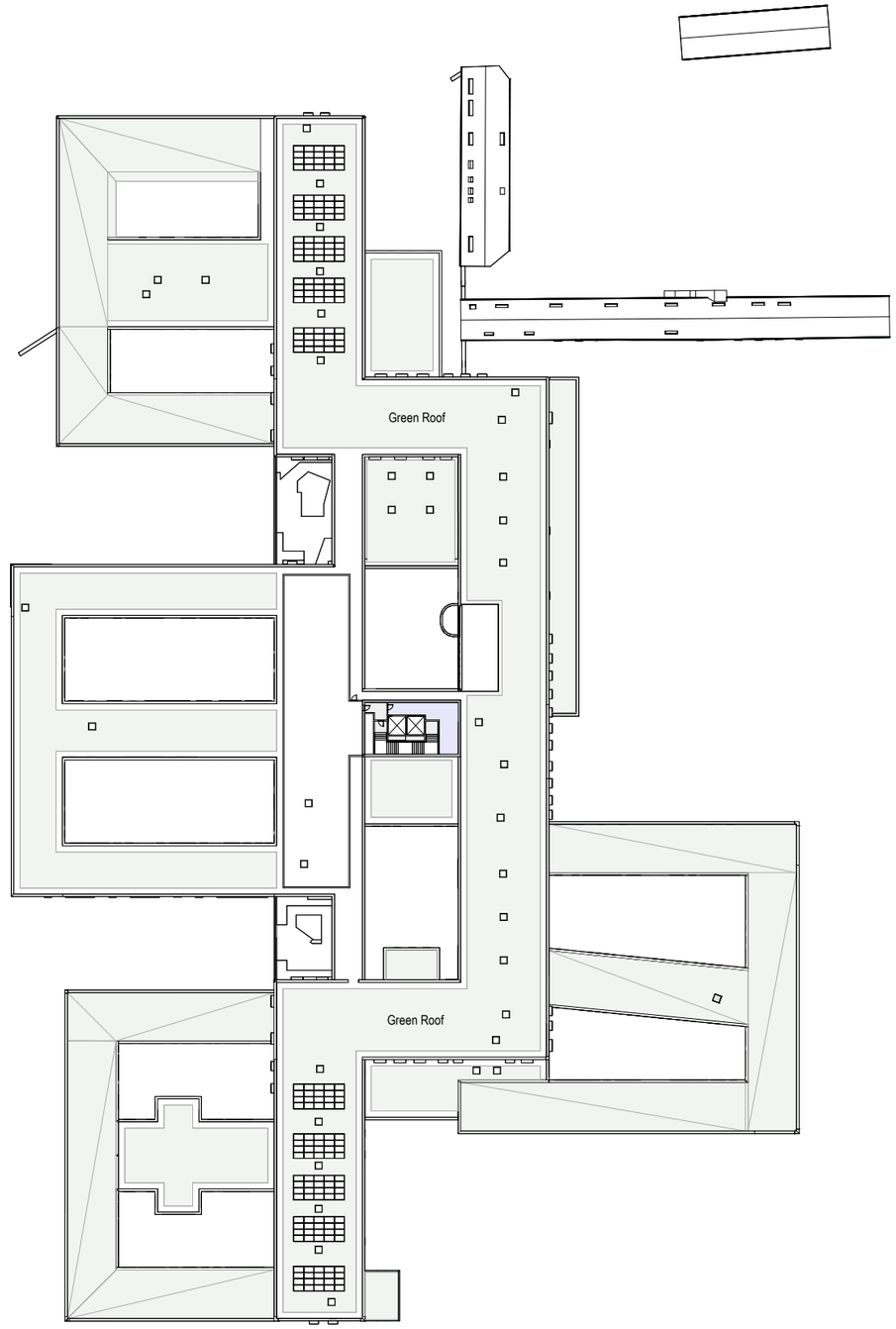
The Facility Building, located within the Historic Barn, will accommodate Environmental Services and Facility Maintenance.



Ground Floor



First Floor



Roof Plan

- Social Hub
- Program
- Bedroom
- Daily Living
- Care Team
- Support
- Circulation

5.3 ENTRANCE / ADMISSIONS / MAIN CIRCULATION

The entrance area is a transitional space where service users, staff, visitors, and members of the public converge. This open zone is defined by the existing wall garden and bell tower, marking the threshold at which public access ends.

From the entrance, several key areas are directly accessible. These include the hospital canteen, which opens onto one of the public courtyards; the training rooms, primarily intended for staff development but also suitable for multipurpose use; the main hospital street; and the admissions area. The admissions area is where new service users arrive for initial assessment before being admitted to the hospital and assigned a ward.

The primary circulation route is structured around the hospital street, a four-metre-wide corridor that runs from north to south. It connects all wards, service areas, the therapy hub, and various non-clinical spaces that contribute significantly to each individual's recovery journey. These spaces include a hairdresser, gymnasium, oratory, café, and other areas designed to support positive social interaction. An art space located on to the hospital street will host exhibitions throughout the year, further enhancing the therapeutic environment.



Ground floor plan extract - Entrance and Admission areas

- Social Hub
- Program
- Bedroom
- Daily Living
- Care Team
- Support
- Circulation



Proposed Public Canteen Courtyard



Proposed Public Canteen

5.4 SERVICE AREA

Located to the north of the hospital canteen, the service area accommodates the core logistical and operational functions essential to the daily running of the facility. This area includes spaces dedicated to food preparation and distribution, laundry services, general storage, the household office, and staff changing rooms. These support functions are consolidated within this centralised zone to ensure efficiency, ease of access, and separation from clinical and therapeutic areas.

The central service area operates in a hub-and-spoke model, serving smaller satellite service points situated within each ward. These satellite areas are primarily dedicated to: pantry, laundry, cleaning operations, and the short-term storage of essential supplies. This decentralised support system ensures that each ward remains well-supplied while reducing unnecessary circulation through the main service core.

Deliveries and logistical access are managed through a secondary entrance located within the farm courtyard. This discreet service access point allows for the smooth and unobtrusive movement of goods to and from the hospital, minimising disruption to public and clinical areas. The design of the delivery route prioritises efficiency, hygiene, and clear separation from patient-focused environments.

- Social Hub
- Program
- Bedroom
- Daily Living
- Care Team
- Support
- Circulation



Ground floor plan extract - Service Area

5.5 WARDS

The majority of the wards within the proposed development are designed as open wards, promoting a therapeutic environment that encourages autonomy, dignity, and social connection. Visitors for inpatients will have direct access to these wards via the family room area. This layout enables inpatients to walk freely with their visitors across the campus and engage in shared activities such as visiting the coffee shop or other communal spaces that foster positive social interaction. For those residents whose movement is more restricted, each ward includes designated visiting areas that maintain privacy while supporting meaningful contact with relatives and friends.

General Adult Ward (Ground Floor)

The proposal includes a single General Adult Ward located on the ground floor. This is conceived as an open ward, allowing residents to move freely within the ward and throughout the wider hospital campus. Access to and egress from the ward is subject to staff supervision to ensure safety while supporting engagement in the broader therapeutic environment when clinically appropriate.

The ward design balances clinical functionality with a comfortable, residential character. Spaces are designed to be safe, compliant with regulatory standards, and supportive of recovery, while remaining welcoming and domestic in scale.

The ward is organised around two internal landscaped open courtyards, which bring natural light, fresh air, and visual relief into the heart of the building.

- Social Hub
- Program
- Bedroom
- Daily Living
- Care Team
- Support
- Circulation



Ground floor plan extract - General Adult Ward

The daily living area sits between the courtyards, forming the central communal space of the ward and providing a strong visual and physical connection to both outdoor areas. Surrounding these spaces, a single-sided corridor provides access to individual bedrooms, offering privacy while maintaining proximity to shared facilities.

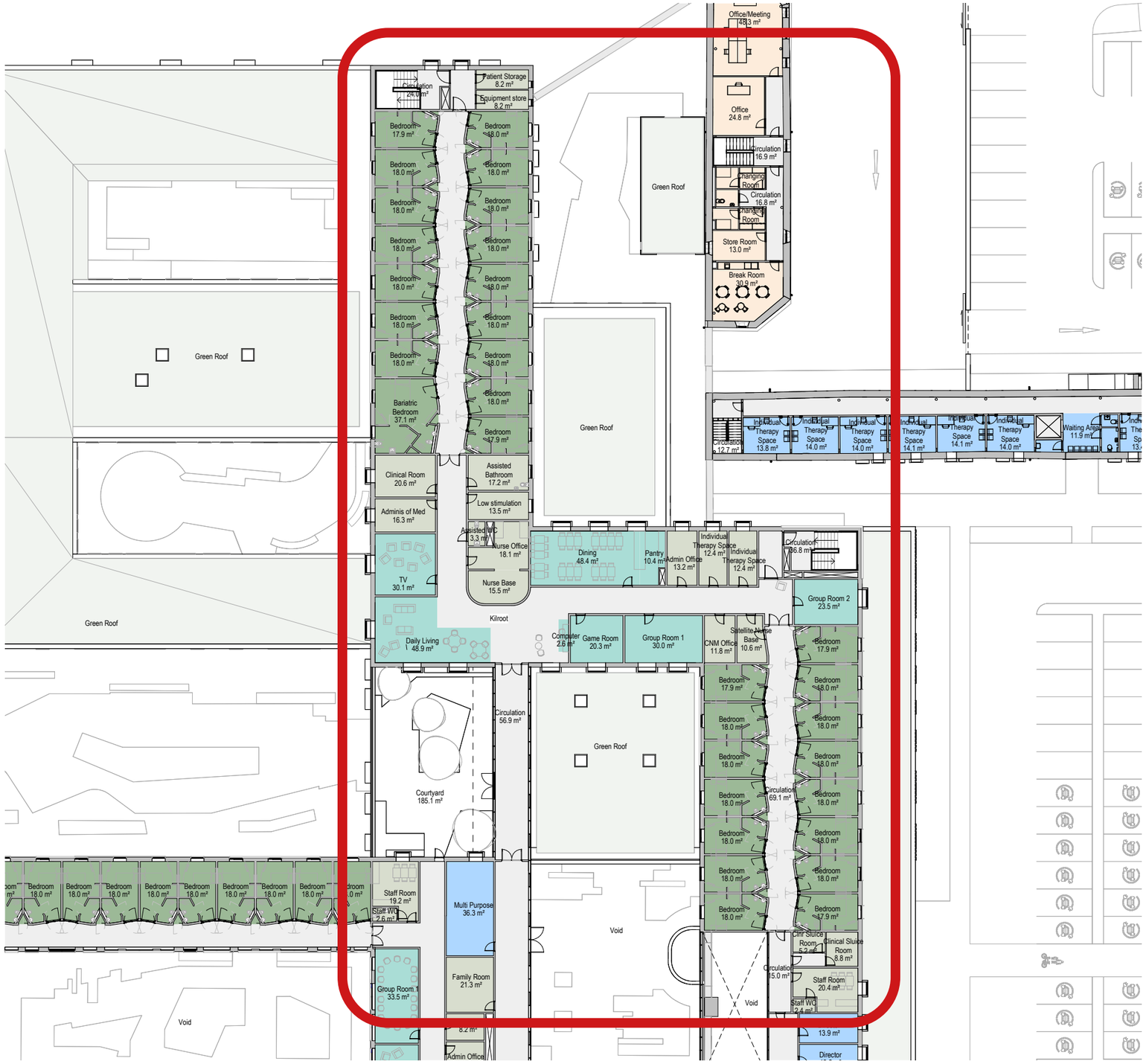
The design places particular emphasis on shared spaces and varied settings that support social interaction, personal choice, and therapeutic engagement throughout the day.

General Adult Ward (First Floor)

The first floor accommodates three General Adult Wards. One ward follows the same layout as the ground floor, organised around internal courtyards with the daily living area forming the central communal space.

The other two wards adopt a different configuration in response to their less acute elevated position and surrounding context. To reduce overlooking of the ground floor wards and neighbouring properties, the bedroom areas are arranged along a double-sided corridor, providing privacy while maintaining efficient circulation. In these wards, the common areas are centrally located and act as the main shared space for residents. As with the ground floor ward, these are open wards, allowing residents to move freely across the campus. The wards also provide access to landscaped courtyards at first-floor level, offering outdoor space for relaxation and informal activity.

- Social Hub
- Program
- Bedroom
- Daily Living
- Care Team
- Support
- Circulation



First floor plan extract - General Adult Ward

Older Age Ward

The Older Age Ward is located on the ground floor and follows the same spatial layout as the General Adult Ward, with a similar arrangement of courtyards, shared living areas, and individual bedrooms. This configuration supports familiarity, comfort, and access to outdoor space.

One wing of the ward is configured to accommodate residents requiring a higher level of care. This area responds to the particular needs associated with mental health in later life, including mobility challenges and cognitive impairment. The layout supports safety and independence through clear sightlines, intuitive circulation, and secure access to outdoor areas, while maintaining a calm and non-institutional environment.



Ground floor plan extract - Older Age Ward

- Social Hub
- Program
- Bedroom
- Daily Living
- Care Team
- Support
- Circulation



Proposed Age Care Courtyard.



Proposed On Ward Daily Living Space.

Eating Disorder Ward

The Eating Disorder Ward is a dedicated, purpose-designed unit located on the ground floor. Its relatively small scale and carefully considered layout respond to the specific clinical and therapeutic needs of individuals receiving treatment for eating disorders.
The ground floor location provides direct access to an adjacent courtyard, allowing residents to engage with outdoor space as part of their daily routine. This courtyard is intended to support therapeutic activities such as gardening and growing food, helping residents to develop a positive and practical relationship with food in a calm and supportive environment.



Ground floor plan extract - Eating Disorder Ward

- Social Hub
- Program
- Bedroom
- Daily Living
- Care Team
- Support
- Circulation

Higher Acuity Ward

The Higher Acuity Ward is designed to support individuals with more complex mental health needs, including those who may experience behavioural challenges or require additional support to maintain their safety. While these situations require a secure and closely monitored setting, the design avoids creating a custodial or punitive atmosphere. The aim is to ensure safety while maintaining a calm and supportive environment. Strategic design decisions support this approach.

The ward is accessed independently from the secondary hospital entrance allowing for discreet entry and reducing unnecessary movement through the campus. It includes self-contained units with access to secure outdoor courtyards, enabling contact with nature and fresh air in a safe and structured setting. The internal layout maximises visibility for clinical staff, supporting effective supervision without compromising comfort or privacy.

Fixtures and fittings are carefully selected to reduce environmental risks while still contributing to a welcoming atmosphere. Special consideration is given to scenarios involving involuntary admission. The ward's direct access supports a quiet, private arrival process, helping to reduce stress during what can be a challenging moment. The overall layout ensures that people can be cared for appropriately while still feeling part of a wider, supportive setting.



Ground floor plan extract - High Acuity Ward

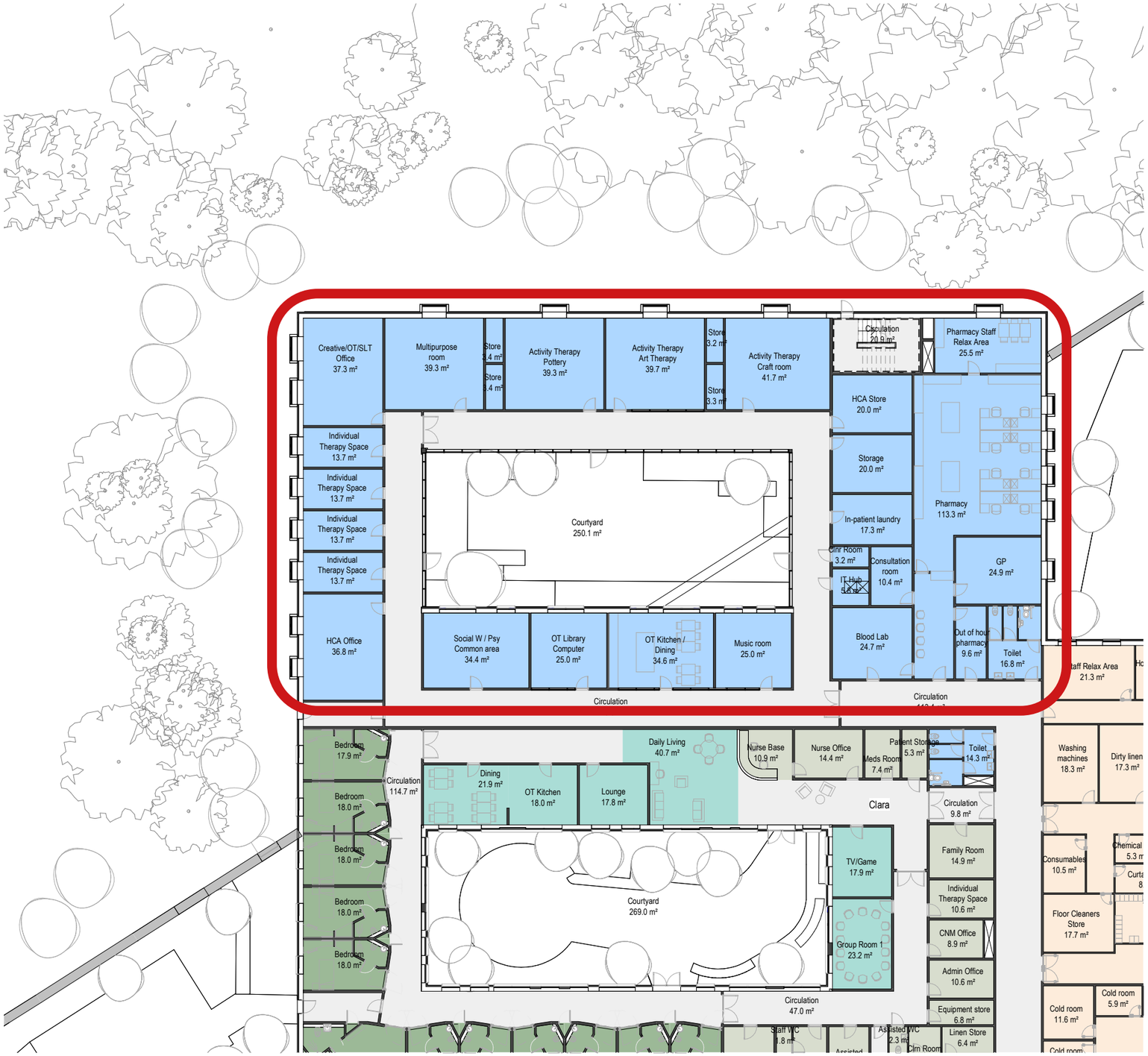
- Social Hub
- Program
- Bedroom
- Daily Living
- Care Team
- Support
- Circulation

5.6 THERAPY HUB

Following an initial assessment period, each inpatient is prescribed a personalised programme of clinical and therapeutic activities that support recovery and promote mental well-being. This includes a range of individual and group psychotherapies tailored to the person's diagnosis, along with general activities that encourage social interaction and emotional development.

While some of these sessions are delivered within the wards, supported by dedicated group rooms, the majority take place in the Therapy Hub located to the north of the campus. This building functions as the central space for off wards therapeutic engagement, providing an environment distinct from the clinical atmosphere of the wards.

Because talking therapies can often be emotionally challenging, particularly in the early stages of treatment, the setting in which they take place is essential. The Therapy Hub has been carefully placed within a wooded area of the site to create a calm and secluded atmosphere. The surrounding natural landscape supports a quiet, peaceful environment where service users can feel safe, grounded, and able to participate more fully in the therapeutic process.

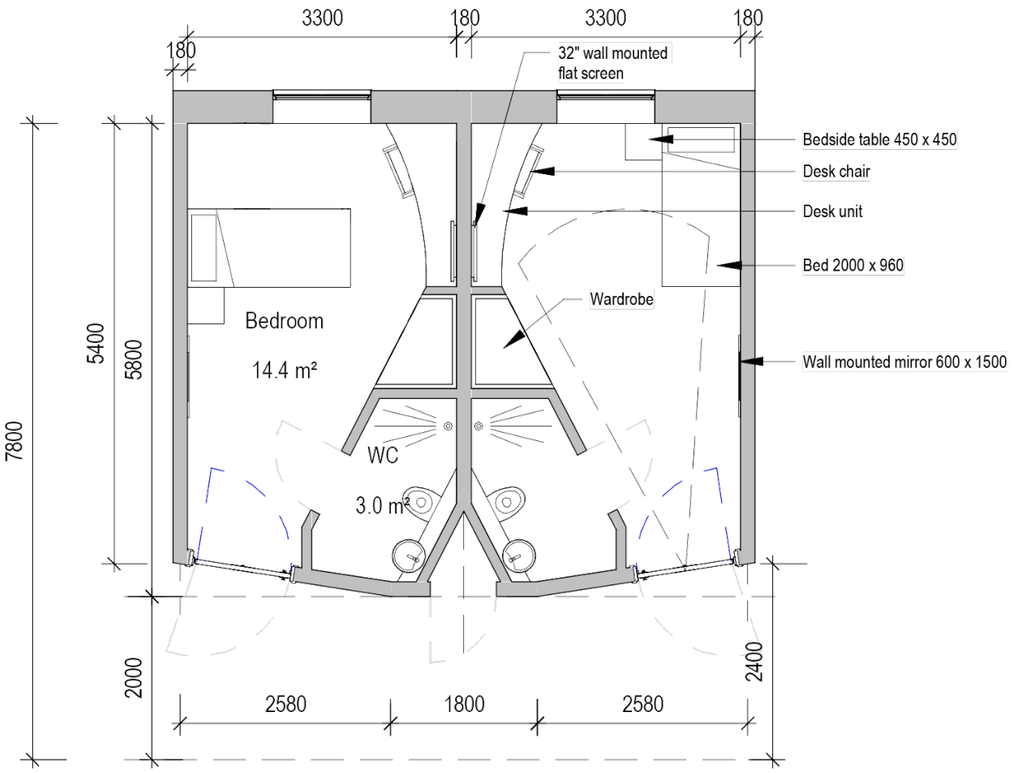


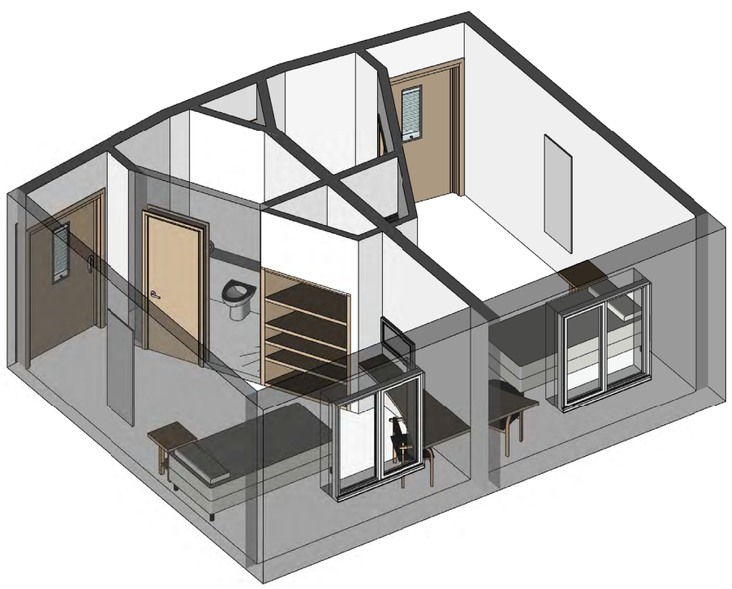
Ground floor plan extract - Therapy Hub

- Social Hub
- Program
- Bedroom
- Daily Living
- Care Team
- Support
- Circulation

5.7 TYPICAL BEDROOM AND EN-SUITE

Gross Area: 18.1 sqm







Proposed In-Patient Bedroom Arrangement

5.8 FORM AND EXPRESSION

The two-storey mental health facility is carefully designed to integrate into its context of low-rise residential buildings, schools to the east and west, and surrounding natural landscape. Its scale and massing aim to create a calm, familiar environment for the service users while remaining sensitive to the character of the area.

The primary material is a light-coloured brick, chosen for its durability and warm, domestic quality. This is complemented by selected areas of render to introduce subtle variation in texture and tone. The architectural expression is intentionally soft and approachable, avoiding any sense of institutionalism.

Openings throughout the building are domestic in scale, with varied sizes to introduce rhythm and interest across the façades. This approach helps establish a welcoming atmosphere in both the ward and therapy areas. To maintain privacy and comfort for service users, large areas of external glazing are avoided. Instead, generous glazing is strategically placed around internal courtyards and protected areas, where natural light can be maximised without compromising the sense of seclusion and safety. The building's parapet line features gentle, multi-directional slopes, reducing the visual bulk and introducing a familiar, residential character. This articulation softens the overall form and reinforces the building's intent: to provide a therapeutic environment that feels safe, respectful, and connected to its surroundings.



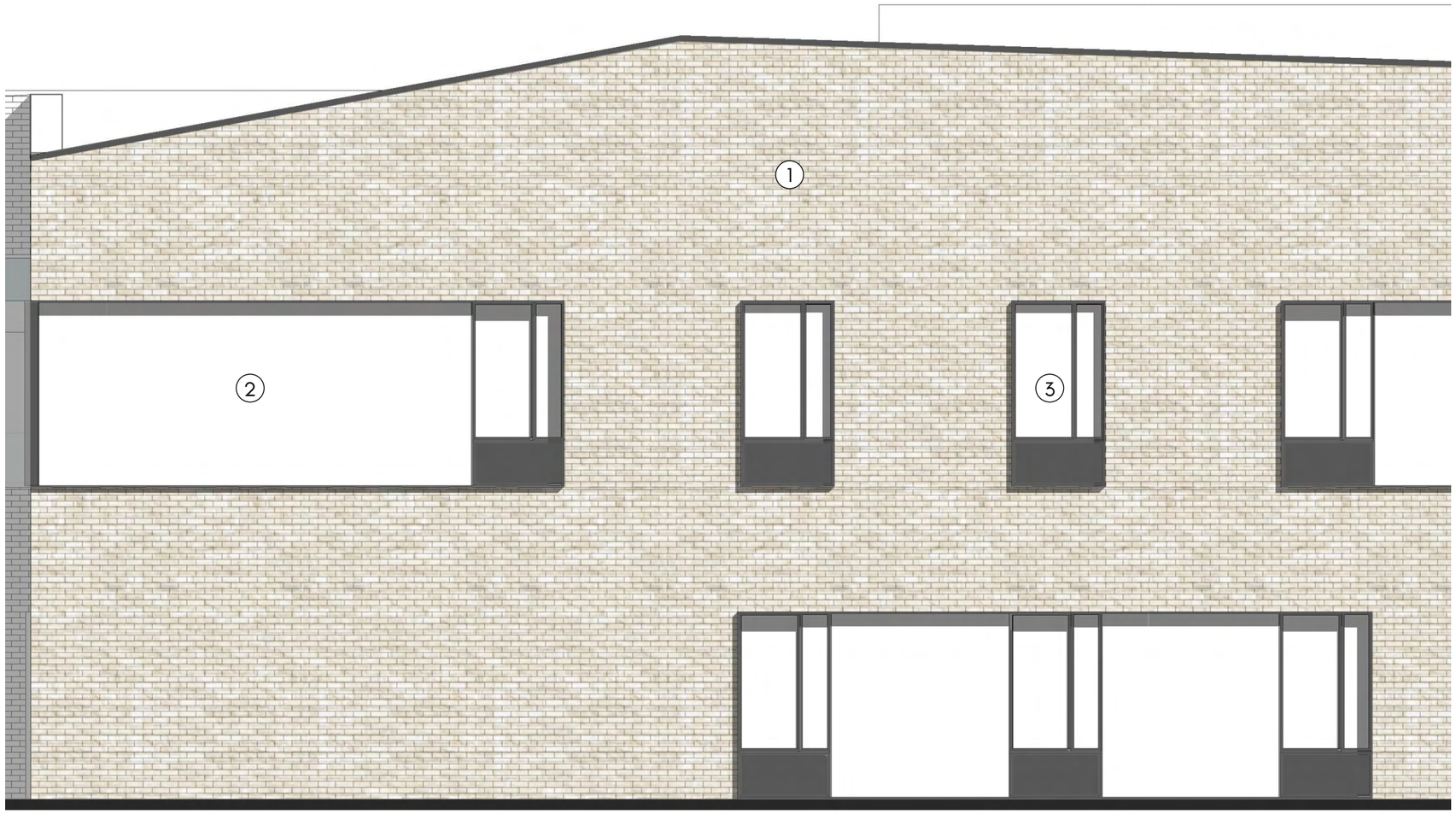
Proposed Main Hospital Entrance

5.9 FAÇADE TREATMENT

The façade design has been developed with careful attention to proportion, materiality, and rhythm to achieve a refined and coherent architectural expression. The coordination between window placement, material finishes, and the gently sloping parapet line creates a balanced composition that responds sensitively to the building's scale and surrounding context.

Although the window arrangement generally corresponds to the internal layout, it has been composed in a way that avoids rigid repetition. This results in a more relaxed and visually engaging elevation. The variation is further enriched by the staggered application of light-coloured render within the predominantly brick façade, which introduces depth and breaks down the overall mass of the building.

The use of light-toned brick and complementary render provides a contemporary architectural language that fits comfortably within the suburban surroundings. It reinforces the welcoming and respectful character of the facility while maintaining a sense of familiarity and calm.

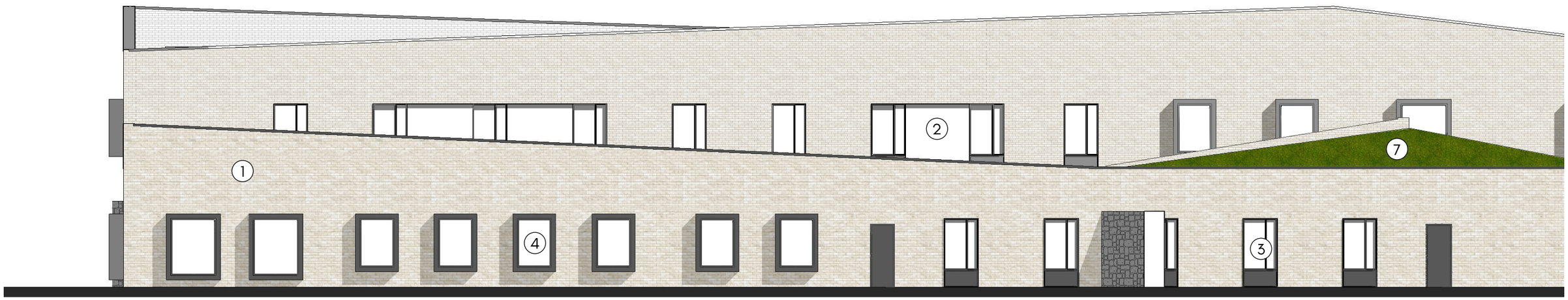


Proposed West Elevation (Adult Ward) - Detail

1. Select Brick Facing - Light Tone
2. Acrylic Render - To Select Colour
3. Typical Bedroom Window - Double Glazed Sliding PPC

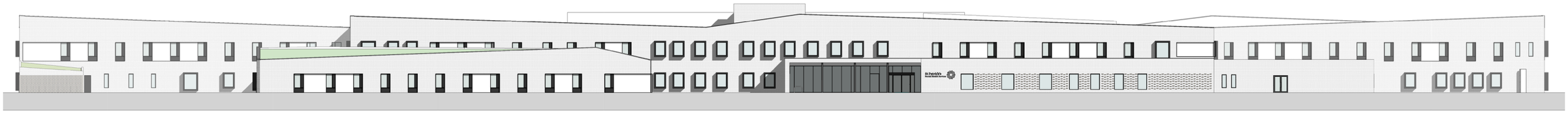


Proposed East Elevation (Main Entrance) - Detail

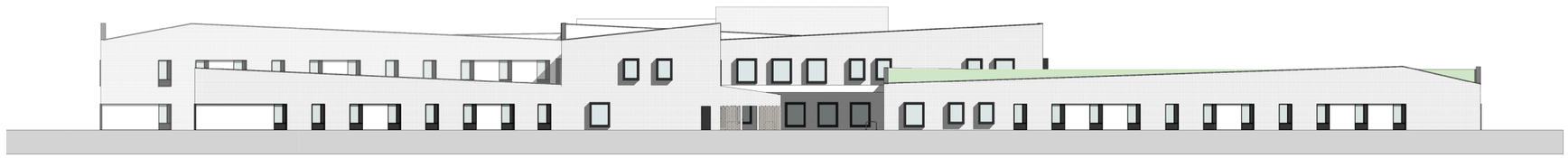


Proposed West Elevation (Therapy Hub) - Detail

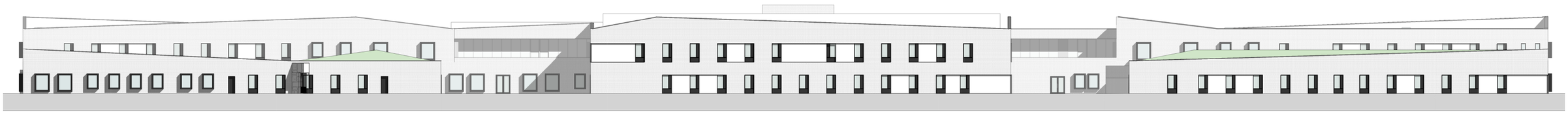
1. Select Brick Facing - Light Tone
2. Acrylic Render - To Select Colour
3. Typical Bedroom Window - Double Glazed Sliding PPC
4. Typical Box Bay Window - To Select Colour
5. Curtain Wall With Clear Panels
6. PPC Double Glazed Aluminium Curtain Wall Door - To Select Colour
7. Green Roof



Proposed East Elevation



Proposed South Elevation



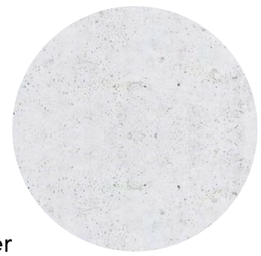
Proposed West Elevation



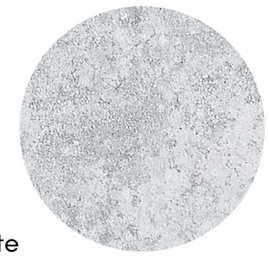
Proposed North Elevation



Brick



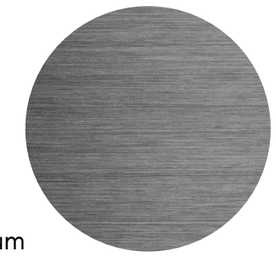
Render



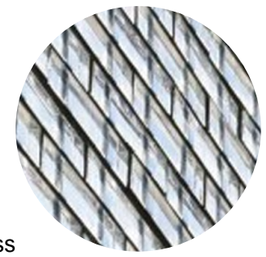
Concrete



Timber



Aluminium



Glass

5.10 VISUAL IMPACT

The visual impact of the building has been carefully mitigated through its low-rise form and placement within the site. The facility is primarily single storey where it sits closest to boundaries and neighbouring schools, with a two-storey element positioned centrally within the site. This arrangement is driven by clinical functionality, but it also responds to the surrounding context by minimising potential overlooking and reducing the perceived scale of the development from adjacent properties.

By keeping the building height low at the perimeter and stepping up only towards the centre, the design maintains a respectful relationship with the existing suburban fabric. In addition, the landscape design plays a key role in softening the visual presence of the building. Generous planting and green buffers are introduced in the more exposed areas of the site, helping to further integrate the facility into its setting and create a sense of enclosure and privacy for both service users and the surrounding community.



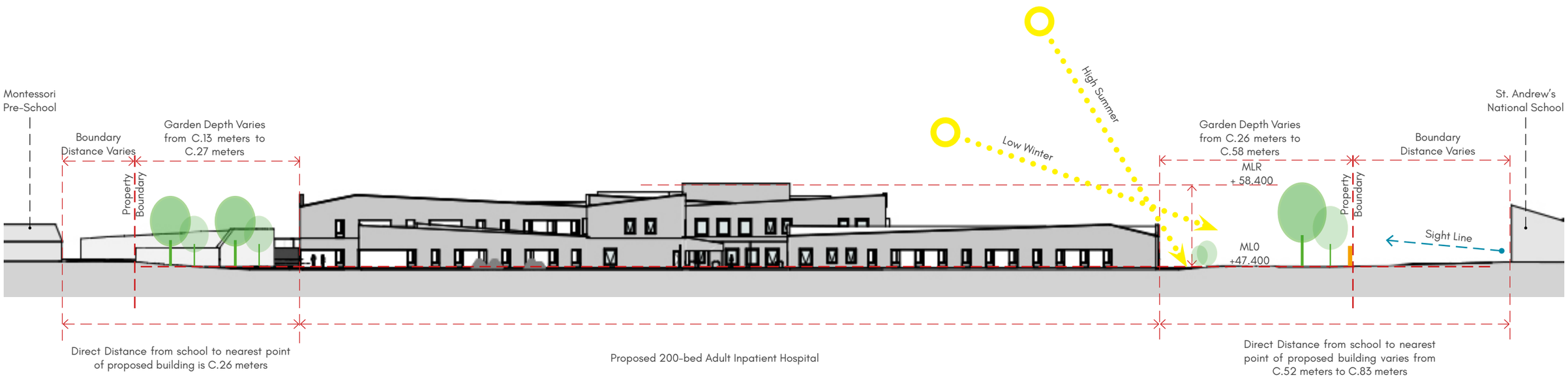
Proposed In-Patient Garden



Proposed In-Patient Garden



Indicative Masssing - Site Cross West Elevetion Diagram



Indicative Masssing - Site Cross South Elevetion Diagram

5.11 ADAPTABILITY

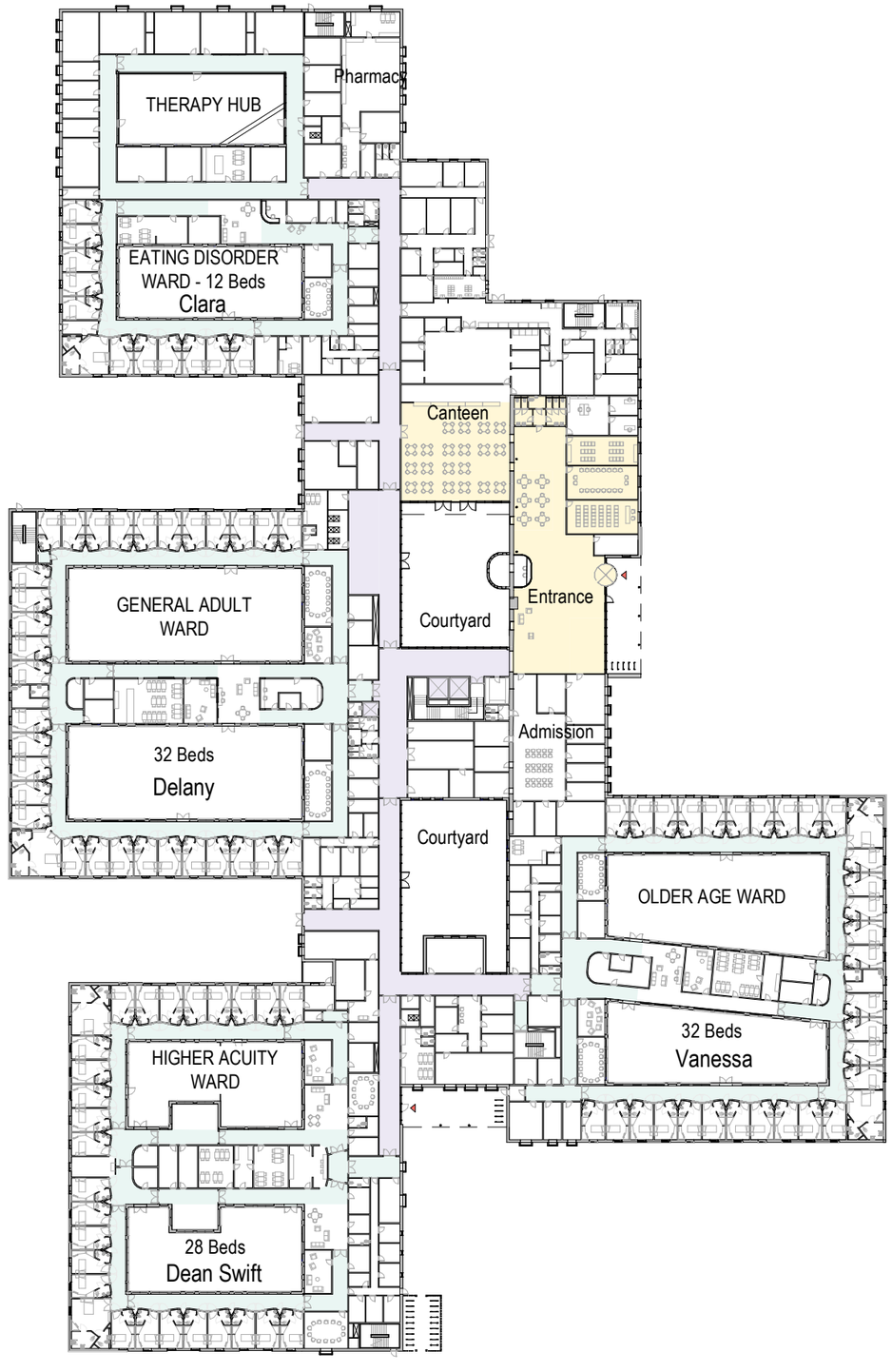
The building has been specifically designed to function as a 200-bed mental health facility, with all associated therapeutic, administrative, and support spaces fully integrated into a coherent layout. However, the spatial organisation and infrastructure allows for future adaptability to alternative healthcare uses, such as a general hospital or a nursing home.

The ward layout, comprising individual bedrooms, shared living areas, and decentralised staff support spaces, follows principles that are also well-suited to general medical care. These same features align with the operational needs of residential care, offering a familiar and manageable scale for elderly residents in a nursing home context. The ratio and arrangement of private and communal spaces ensure that comfort, privacy, and accessibility can be preserved across different care models.

The therapy rooms, service areas, and offices are planned to support a range of clinical and operational functions, with internal layouts that can be reassigned or modified without significant structural intervention. Circulation routes are clear and efficient, allowing for flexibility in how departments are organised and how movement is managed, whether for staff, patients, or visitors.

The site's infrastructure also supports future change. Parking provision is sufficient for a range of clinical settings and visitor patterns, and the building's entrances and access routes are designed to accommodate different levels of activity. Furthermore, the external landscape, already an important feature in the mental health context, would serve equally well in other healthcare environments. The walking path, pond, and courtyard spaces provide natural amenity and therapeutic value for patients, staff, and visitors in any setting.

In this way, while the facility is tailored to meet the needs of mental health services, its layout and supporting features ensure that it remains adaptable. This built-in flexibility offers long-term value and allows the development to respond effectively to future shifts in healthcare provision or demographic needs.



Main Hospital Ground Floor Plan

6 DETAILS OF THE PROPOSED 14-BED ADOLESCENT IN-PATIENT UNIT

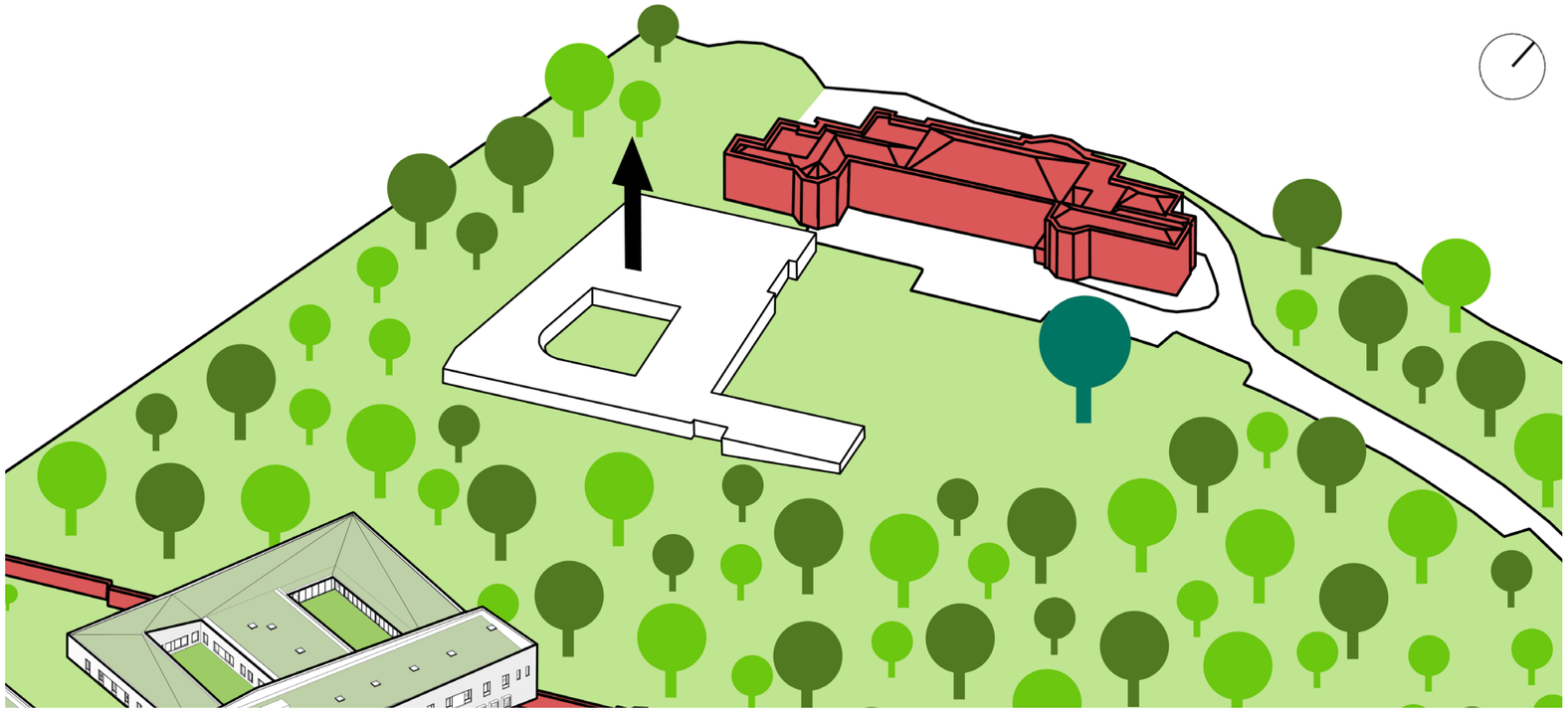
6.1 MASSING AND SCALE

Relevant context

- The historic country house (St Edmundsbury)
- The woodland between the historic walled garden and the country house; including the Scottish Pine tree to the South East of the house.

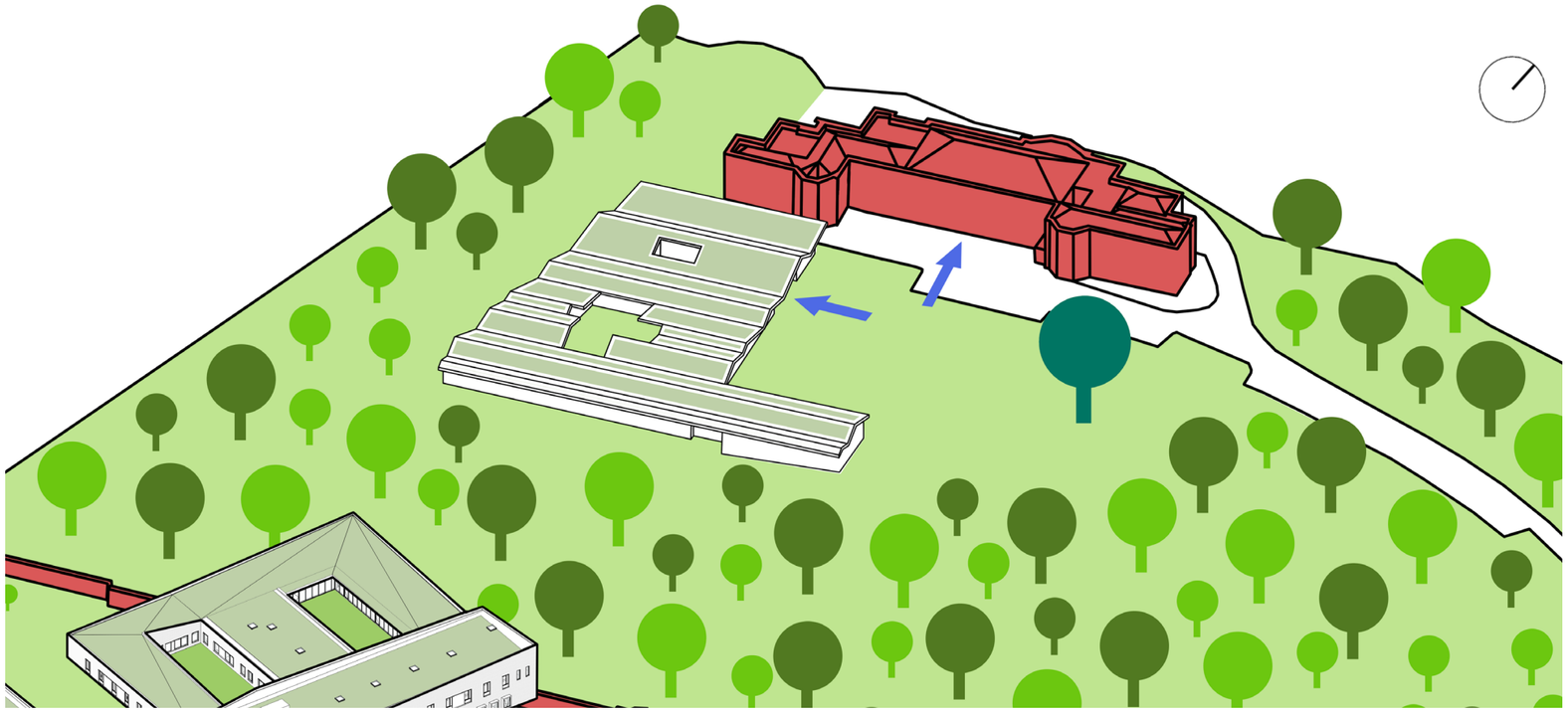
New Volume

The new volume will be over one floor to lessen the impact to the sorrounding context and to maintain the same height as the existing 52-bed unit.

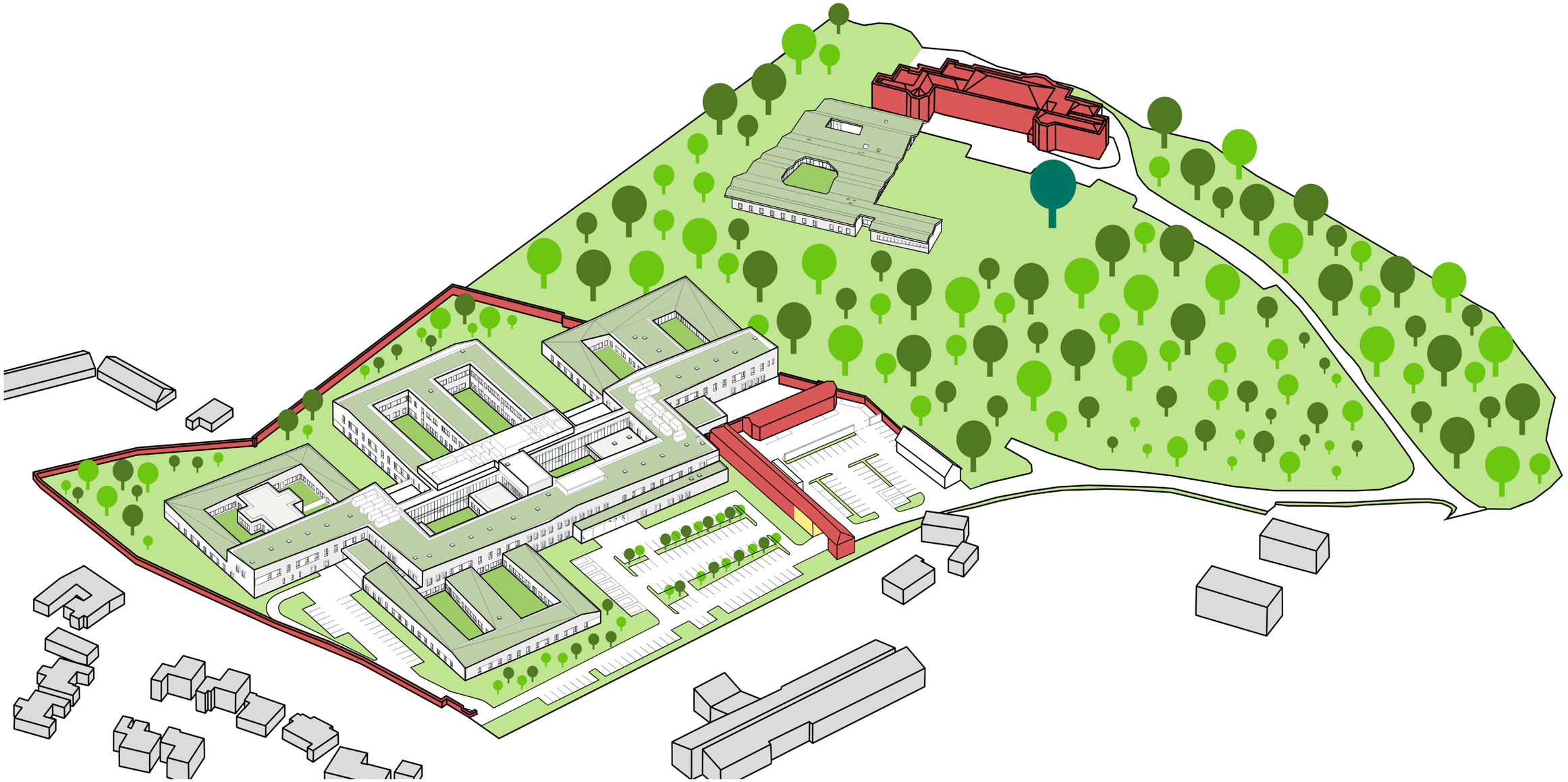


Playful and integrated

A folded roof shape provides a contemporary offset to the Historic Building and creates a playfull atmosphere for young service users, while also allowing for a balanced amount of daylight within the building.



Proposed SPMHS Campus



6.2 LAYOUT PLAN

The adolescent unit serves as an additional ward within the new SPMHS Hospital, however, for clinical, safeguarding and regulatory reasons it is entirely separate from the main facility. Designed to meet the specific needs of younger service users, the unit operates independently while remaining functionally connected to the wider hospital campus.

The building is arranged into two main zones: the inpatient section and the outpatient therapy area. The inpatient section follows the same layout principles as other hospital wards, with a central courtyard surrounded by bedrooms and shared communal spaces that support both comfort and supervision. The outpatient area includes multipurpose therapy rooms that support day-time therapeutic programmes. While the two areas can function separately for privacy and clinical reasons, internal connections allow them to operate together when required.

The adolescent unit is designed as a high-acuity ward. Since service users are not separated by clinical intensity, the overall design and level of security accommodate a range of needs within a single controlled environment.

A dedicated gymnasium is directly connected to the unit. To minimise its visual impact, especially in relation to the nearby protected St. Edmundsbury House, the gym is partially embedded in the ground. This ensures that the height of the gym remains consistent with the rest of the unit thus preserving the character of the surrounding landscape.



Ground Floor Plan

6.3 FORM AND EXPRESSION

The architectural form of the Adolescent Unit mirrors the design logic of the main hospital, placing the needs of service users at the core of a safe and therapeutic environment. This single-storey, 14-bed unit is arranged around a generous internal courtyard, with bedrooms positioned along the perimeter to provide natural light, privacy, and direct views of nature. Adjoining common areas support social interaction and a sense of community within a secure, calm setting.

The unit's most distinctive architectural element is its irregular pitched roof complete with extensive green roof covering. This feature introduces a playful and non-institutional character, lending the building a more domestic and approachable appearance that is particularly suited to younger service users. The articulation of roof forms also helps to reduce the visual mass of the building, giving it a light and welcoming profile within its woodland surroundings.



Proposed Adolescent Unit



Proposed Internal Courtyard at the Adolescent Unit

6.4 FAÇADE TREATMENT

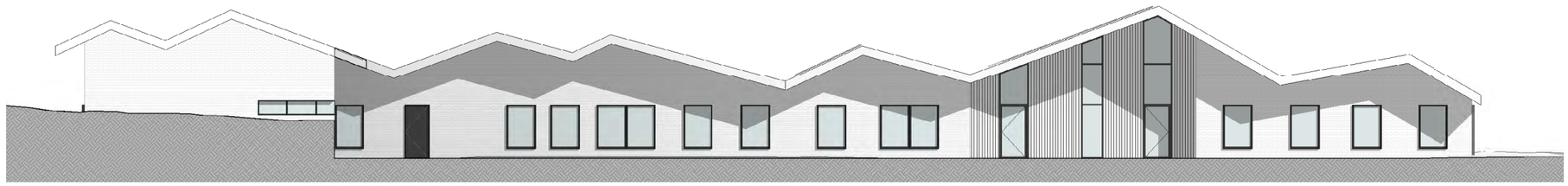
The façade combines a soft, natural material palette to reflect a residential, non-clinical character. Predominantly finished in light-coloured render, the building is punctuated with areas of brick and natural timber panelling, particularly around entrance points and communal areas. These variations in texture and tone introduce a sense of warmth, human scale, and visual interest.

Timber elements mark key thresholds and gathering spaces, reinforcing the sense of arrival and helping to differentiate social areas from private ones. Generously scaled but carefully positioned windows provide strong connections to the landscaped courtyard and surrounding woodland while preserving the privacy and comfort of occupants.

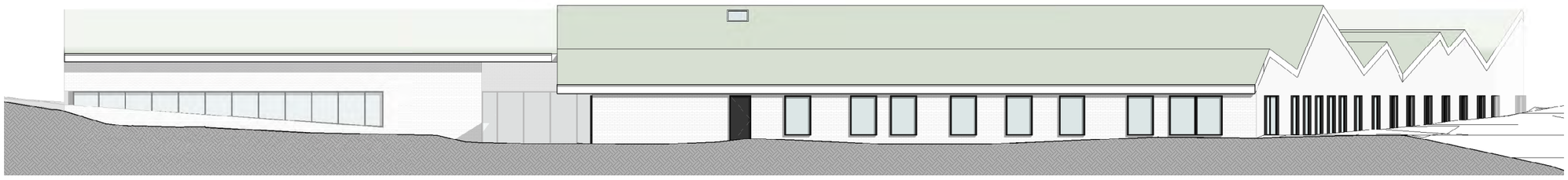
1. Brick
2. Timber Cladding
3. Aluminium Window
4. Glazed Door
5. Green Roof



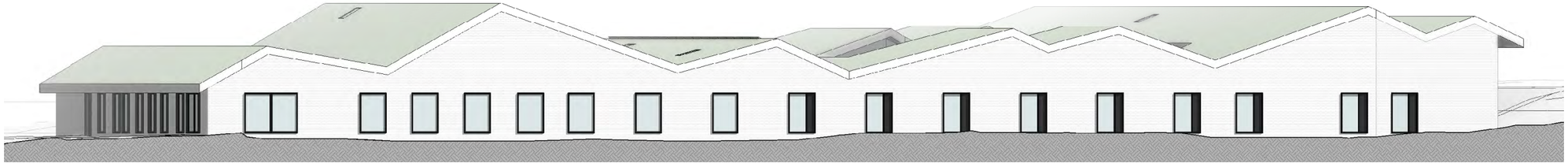
Proposed East Elevation - Detail



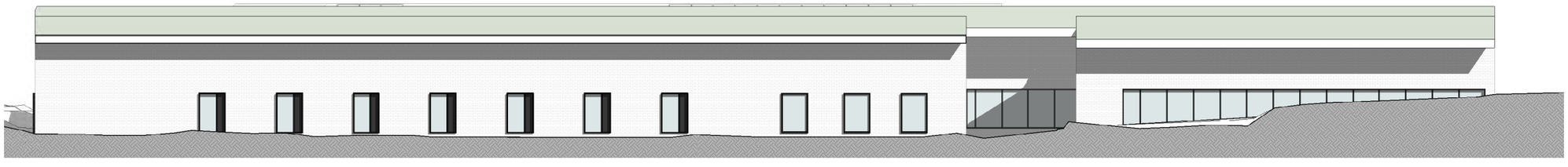
East Elevation



South Elevation



West Elevation



North Elevation



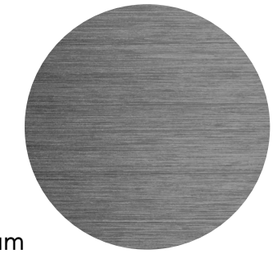
Timber



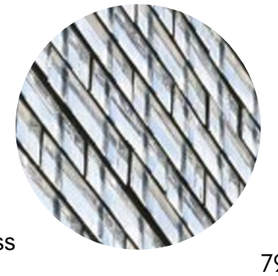
Render



Brick



Aluminium



Glass

6.5 VISUAL IMPACT

The Adolescent Unit is located in the most secluded part of the site, surrounded on all sides by mature woodland and set adjacent to the historic St Edmundsbury House. This location was selected to ensure a high degree of privacy and calm for adolescent service users, while simultaneously minimising visual impact on the wider campus and community.

With no surrounding built form other than the nearby historic house, the low profile and sensitive material treatment of the unit allow it to blend into its natural context. The building's mass is further reduced by the inclusion of a partially sunken gymnasium, allowing for internal spatial volume without increasing visible height. An extensive green roof reinforces the visual integration of the building into its surroundings, blending the built form seamlessly into the natural landscape. Landscape strategies reinforce this soft integration, buffering views and maintaining the site's ecological continuity.



Proposed Adolescent Unit and Saint Edmundsbury House

6.6 ADAPTABILITY

As with the main hospital, the Adolescent Unit has been designed for long-term adaptability and future re-use. The internal layout supports a range of clinical and care scenarios, with the flexibility to be reconfigured to serve as a general hospital ward or a small nursing facility, should future needs evolve.

The plan prioritises efficient circulation, staff oversight, and the capacity for individual and group-based therapeutic activity. Structural simplicity, a modular bedroom configuration, and the use of durable materials ensure that changes can be made with minimal disruption. This forward-thinking approach allows the unit to remain viable and relevant over time, adapting to shifting healthcare demands while preserving its therapeutic intent.



Adolescent Unit Ground Floor Plan

7 CONSERVATION STRATEGY

7.1 GENERAL CONSERVATION RATIONALE

The design of the hospital is rooted in a careful and respectful response to the historic context of the site, particularly in relation to the former St Edmundsbury estate. Rather than treating the surviving historic structures as passive elements to be preserved in isolation, the development embraces them as active and meaningful components of the new campus, integrating them in ways that ensure their long-term use and visibility.

The main hospital building is located within the footprint of the estate's former walled garden. Substantial lengths of the original garden wall are retained and incorporated into the new layout. On the eastern side, the wall becomes a key feature of the main entrance and foyer, where it is preserved in its original position and presented in conjunction with the retained bell tower. This pairing of historic elements at the public entrance strengthens the connection between the site's past and its present function, creating a meaningful threshold into the new facility.
Along the western edge, the garden wall remains fully intact and continues to define the perimeter of the campus in that area.
On the northern side, where the new therapy hub overlaps with the historic footprint, a portion of the original wall is carefully dismantled and reconstructed as part of the new building fabric. This approach allows the wall to continue as a visual and material presence, while enabling its integration into a new use. On the southern side, where adjustments are required to accommodate updated road and traffic arrangements, in accordance with SDCC, selected portions of the wall will be sensitively relocated.

In addition to the walled garden, the site includes two derelict historic structures: the old coach house and the old barn. Both buildings are in a state of significant disrepair but will be restored as functioning parts of the campus. The old coach house will be rehabilitated and adapted to serve as the consultant building, accommodating clinical functions together with a public café at ground level. The old barn will become the facility building, supporting the operational needs of the hospital. In both cases, the intervention will preserve the external character and form of the original structures.



Proposed Consultant Building with Public Cafe

Located along the public walking route, this building will form part of the interface between the hospital and the surrounding community.
The overarching conservation approach is not simply to retain historic structures as static heritage artefacts, but to integrate them as meaningful and fully active elements within the development. Their adaptation and reuse are carried out with respect for their architectural character and historical significance, but also with a clear intention to extend their functional life. This strategy not only ensures the long-term preservation of these buildings and structures, but enriches the identity of the new hospital, offering a layered architectural narrative that speaks to continuity, care, and place.



Proposed Former Farm Courtyard with Consultant and Facility Buildings

7.2 HISTORIC EAST WALL AND BELL TOWER

The eastern portion of the historic garden wall, which includes the distinctive bell tower, has been sensitively integrated into the design of the new hospital as a key architectural and symbolic element. Rather than treating the wall as a feature to be bypassed or merely preserved in isolation, it has been thoughtfully incorporated into the footprint of the building, becoming a central component of the entrance sequence and public-facing areas of the hospital.

This section of the wall now defines the edge of a generous double-height foyer space that accommodates the full height of the bell tower, allowing it to remain visible and legible within the new structure. The bell tower, fully preserved and stabilised, is celebrated as a vertical landmark that anchors the main entrance and recalls the historical identity of the site. Its presence creates a moment of continuity between the past and present, reinforcing the character and sense of place of the facility.

The wall itself continues to serve its original role as a threshold, now reinterpreted within the building to distinguish between public areas such as the entrance foyer and café and the clinical zones beyond. While some new openings are carefully introduced through the wall to ensure circulation and functional connectivity, these are designed to be respectful of the original structure. Their placement and detailing have been developed to retain the wall's overall form and rhythm, making it fully legible as a historic element within the contemporary architecture.

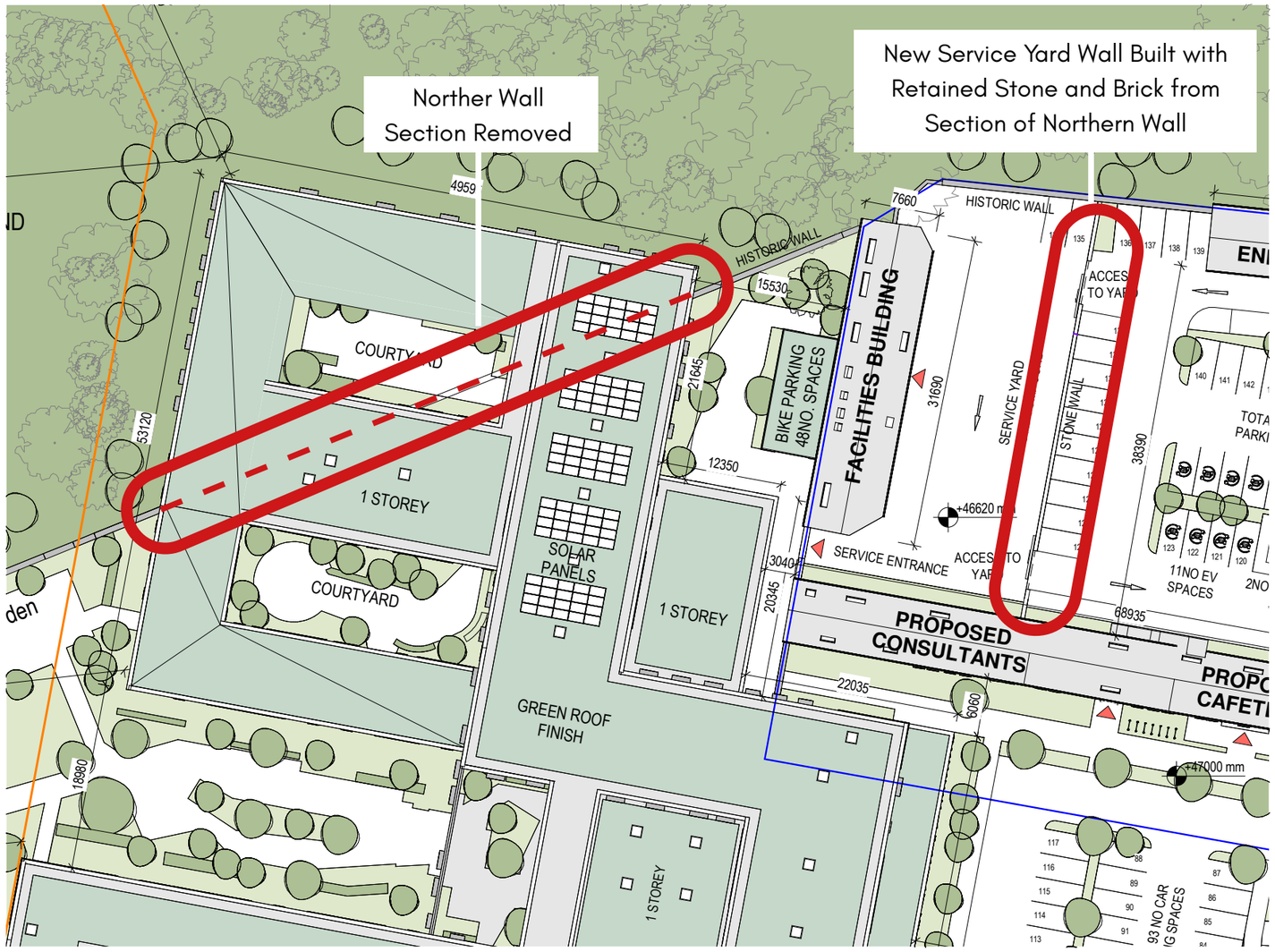
This approach allows the wall and bell tower to remain clearly identifiable within the new building, while also giving them a practical role in the daily use of the hospital. Instead of isolating these elements, they are made part of the public experience of the building, contributing to its identity and atmosphere. The careful placement of openings ensures the building functions well without compromising the character of the historic fabric.



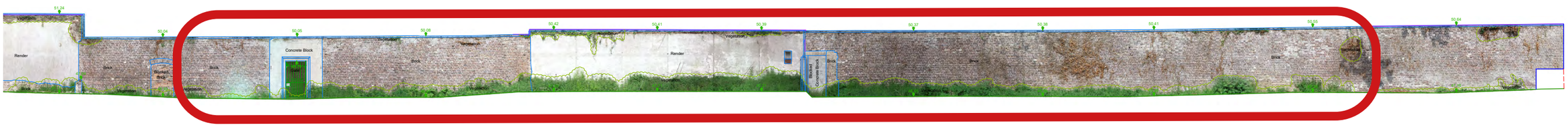
Proposed Main Hospital Reception & Public Entrance Foyer

7.3 HISTORIC NORTH WALL

On the northern side, the proposed therapy hub partially overlaps with the footprint of the original walled garden, necessitating the careful dismantling of the section of wall that falls within the building's footprint.
Rather than discarding this material, the original stone will be salvaged and reused in the construction of the service yard wall. An existing gate within this section of the historic wall will similarly be retained and reinstated in another location within the development. This approach ensures that the historic fabric of the estate is not lost but given a new purpose within the campus, maintaining a material continuity with the site's past.
The remaining sections of the northern wall, unaffected by the new building, are retained in their original position.



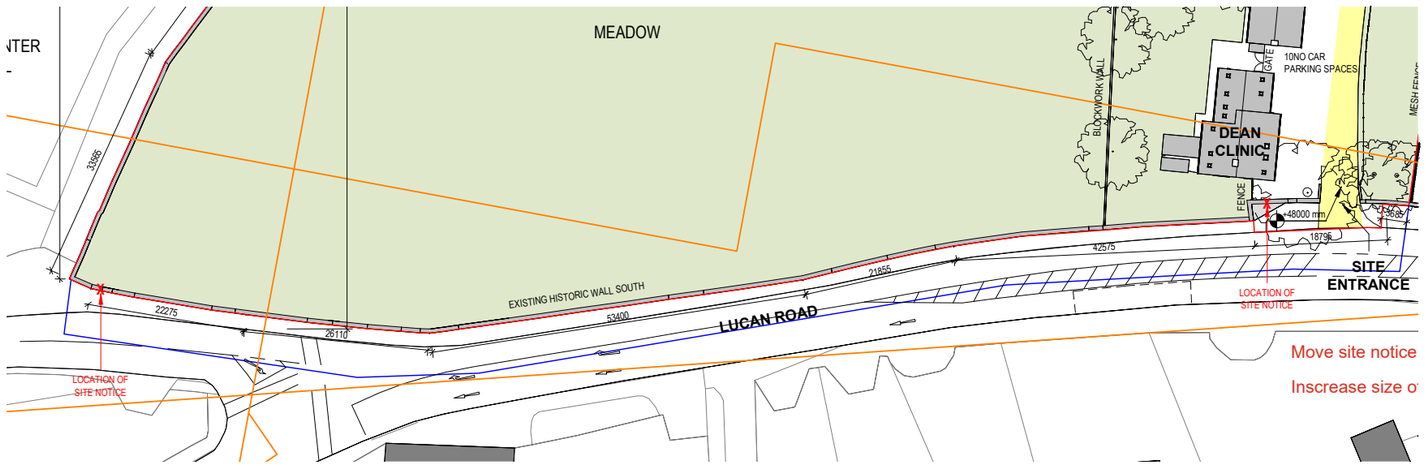
Proposed Site Plan Extract - North Historic Wall: Dismantling and Reuse in New Service Yard Wall



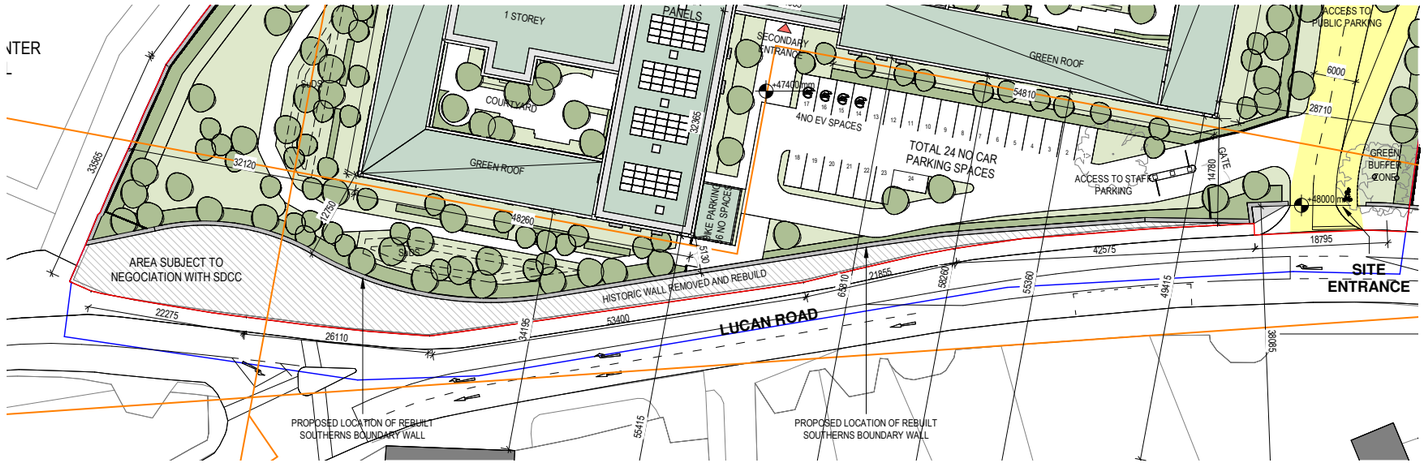
Existing North Historic Wall Survey Extract - Section Removed

7.4 HISTORIC SOUTH WALL

On the southern side, the existing wall is affected by proposed road realignment and changes to the Chapel Hill Road junction. This necesitates a transfer of a portion of the southern site to South Dublin County Council as part of the wider access and traffic arrangements for the development. The impacted sections of the wall will be carefully dismantled and reconstructed in their new position. The rebuilding will replicate the character, materiality, and form of the original wall, ensuring that the southern boundary retains its historic presence.



Existing Site Plan Extract - South Historic Wall



Proposed Site Plan Extract - South Historic Wall

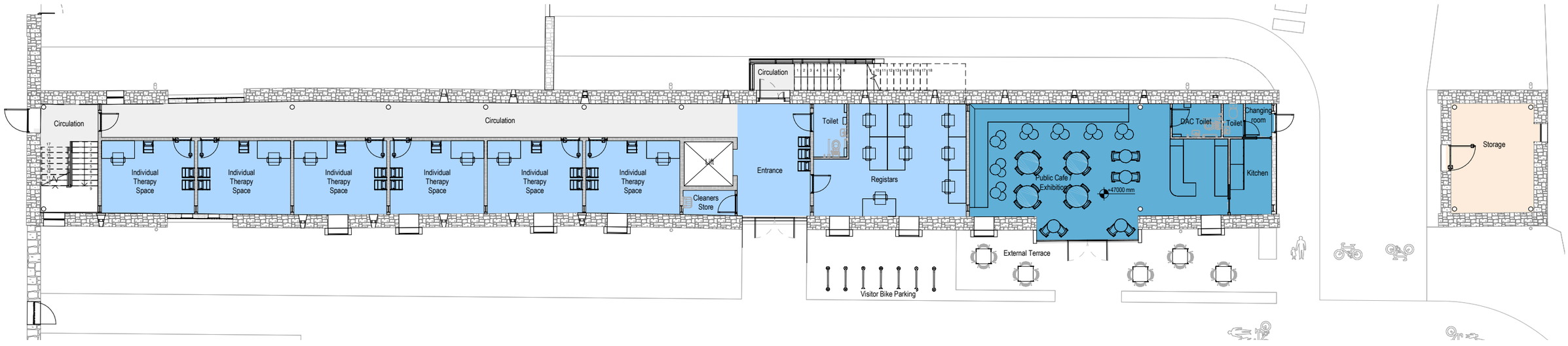
7.5 CONSULTANT BUILDING

The coach house will be repurposed as a consultant building housing individual therapy offices. The existing stone structure will be retained and carefully consolidated, preserving its historic character while ensuring long-term stability. A lightweight internal frame will be introduced, consisting of new steel columns and timber ceilings, to support the building's new function.

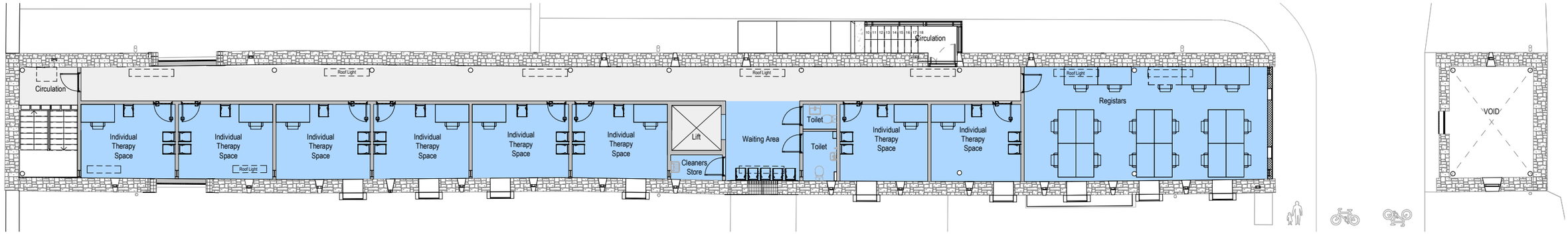
The existing non-original roof will be removed and replaced with a new timber truss structure. This intervention will provide the necessary overhead height to introduce a second floor, which will also accommodate individual therapy spaces in keeping with the building's therapeutic use.

To provide adequate natural light to the internal spaces, a series of contemporary windows will be introduced on the southern elevation. These new openings will be sensitively inserted into the existing fabric, designed to be clearly modern yet respectful of the barn's original proportions and materiality. On the northern side of the building, an external stair will be added to ensure accessibility to both levels. These interventions are purposefully contemporary in expression but designed to be visually coherent and well integrated with the character of the existing structure.

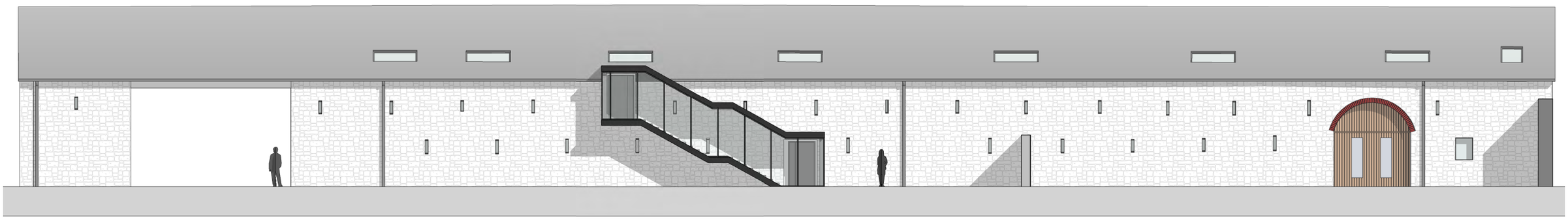
At the eastern end, a public café will be integrated into the building, adjacent to the main walking loop and opening onto a south facing terraced outdoor area. This space will serve both service users, staff, visitors, and members of the public, offering a welcoming and accessible interface between the healthcare environment and the surrounding community.



Ground Floor Plan



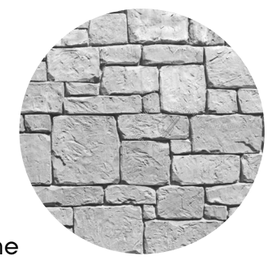
First Floor Plan



North Elevation



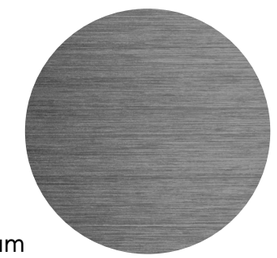
South Elevation



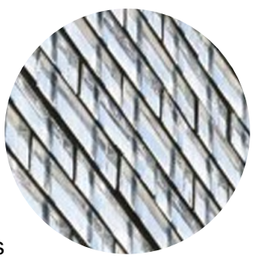
Stone



Timber



Aluminium



Glass

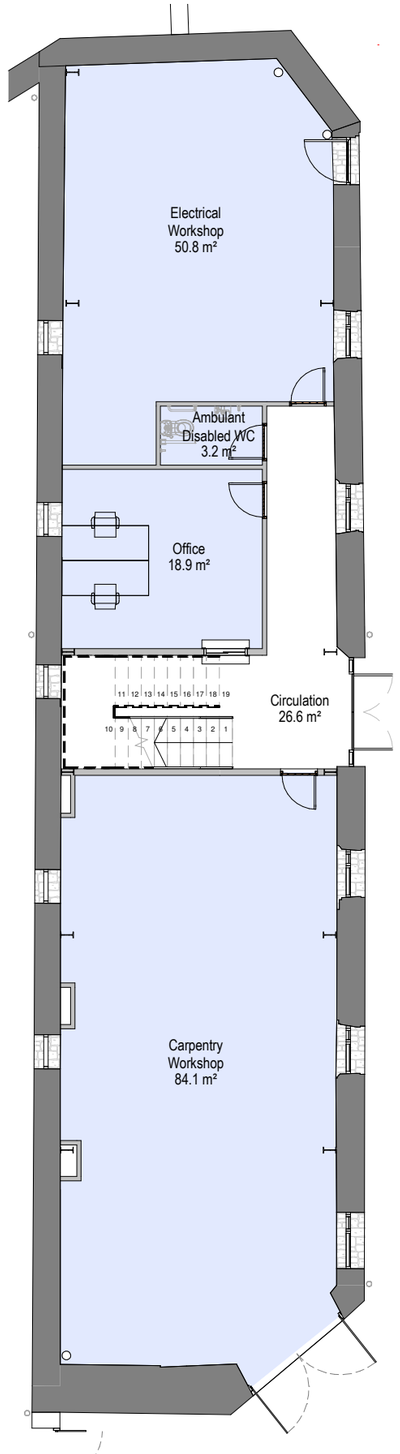
7.6 FACILITY BUILDING

The old barn will be repurposed as the facility building for the new campus. The existing stone structure will be retained and carefully consolidated, preserving the character of the building while bringing it up to the required structural and safety standards. A new concrete internal frame will be inserted to provide the necessary support for storage areas and to meet the fire safety requirements associated with the workshop functions located on the ground floor.

The existing roof, which is near derelict, will be replaced with a new truss structure. This will create sufficient overhead space to accommodate a second floor, where offices and staff welfare facilities will be located. These spaces are intended to support the operational needs of the campus and provide dedicated areas for maintenance and support personnel.

In contrast to the more expressive architectural treatment of the consultant building, the elevations of the coach house will remain largely as existing. The design approach respects the building's simpler historic character, with new window openings carefully aligned with the original rhythm and scale. These new elements will be minimal and recessive, ensuring that the overall composition remains consistent with the coach house's utilitarian origins.

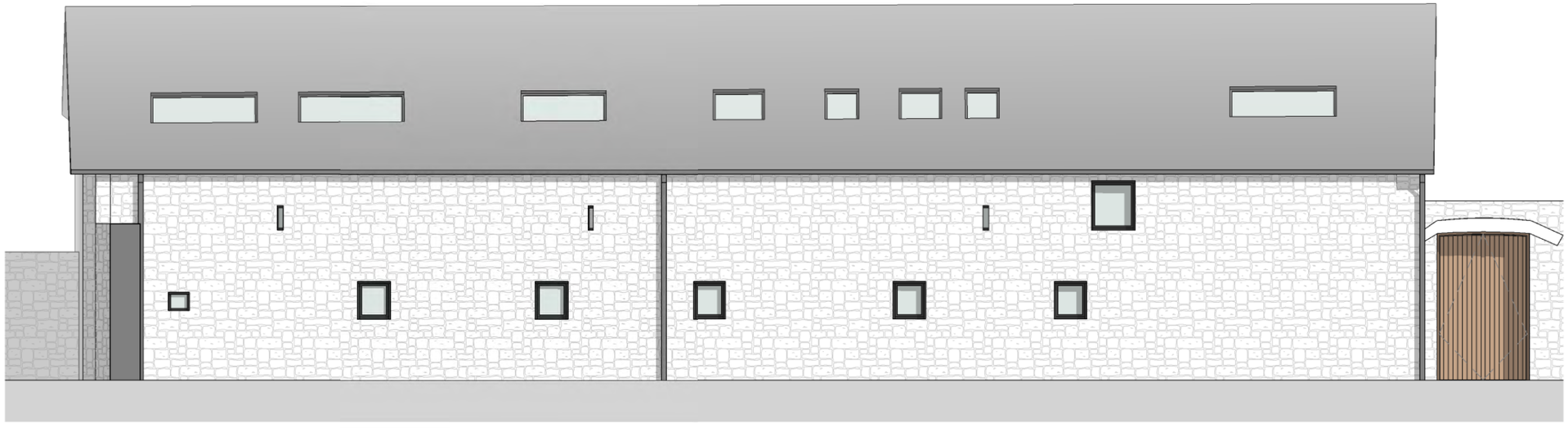
This measured intervention allows the building to be returned to active use while maintaining its historical integrity, contributing both functionally and visually to the wider redevelopment of the site.



Ground and First Floor Plan



East Elevation



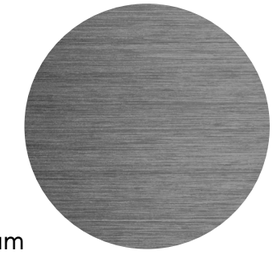
West Elevation



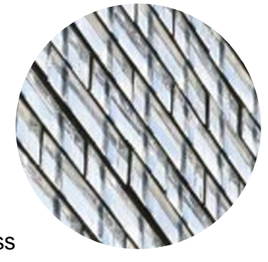
Stone



Timber



Aluminium



Glass

7.8 HISTORIC HOUSE - RECONFIGURATION OF EXISTING SERVICES

The existing historical house will retain and expand the provision of day services. Interventions will be kept to a minimum consisting of electrical rewiring and repainting.

The Historic St Edmundsbury House will become the new Out Patient Day Center.

The building will accommodate:
At Ground Floor:

- Canteen and Dining room,
- 4no Group rooms for adults,
- Offices.

At First floor:

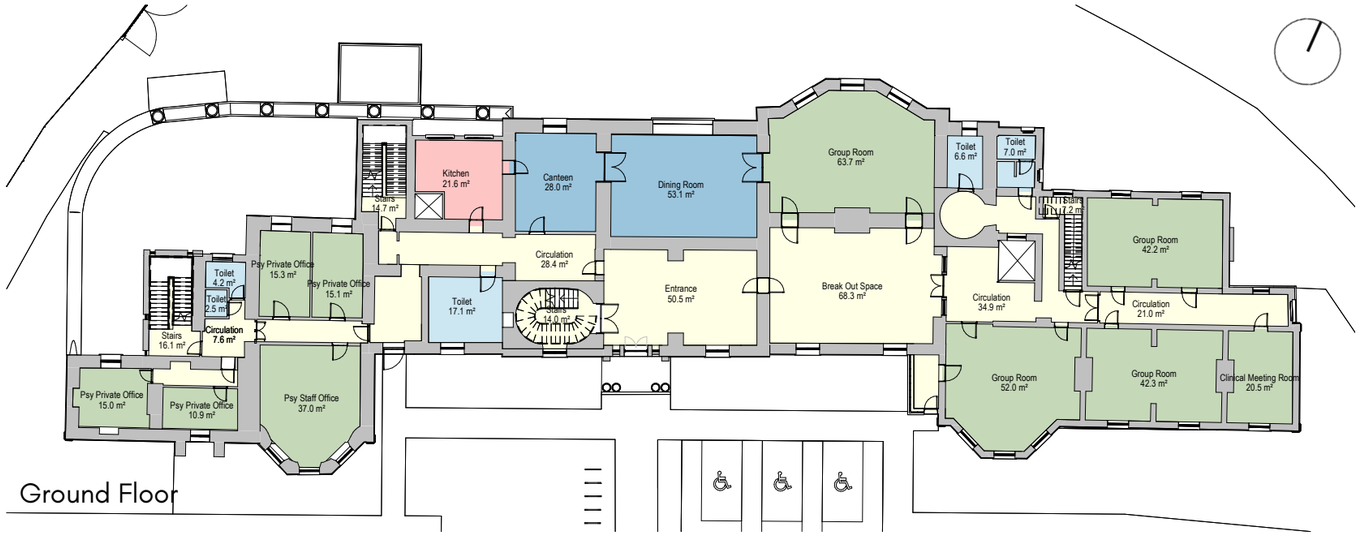
- 3no Group rooms for adults,
- Offices.

At Basement:

- Offices,
- Kitchen and support areas.

For further details on the minor refurbishment works, refer to the Architectural Heritage Impact Assessment (AHIA) prepared by Carrig Conservation.

- Day Services
- Break out
- Support
- Circulation
- Facilities
- Plant



CONCLUSION:
SETTING NEW STANDARDS IN INCLUSIVE HEALTHCARE DESIGN

Architecture for Environmental Performance

The new buildings at the Saint Edmundsbury Campus are conceived with a strong focus on environmental efficiency and long-term sustainability. Large, strategically positioned windows and carefully considered glazed elements maximize access to natural daylight while minimizing solar gain. This not only reduces the building's dependence on artificial lighting but also contributes to a more pleasant indoor environment for users.

The layout of internal spaces supports cross-ventilation, enhancing indoor air quality and reducing reliance on mechanical systems. Green roofs are introduced across several buildings to improve insulation and stormwater management while supporting biodiversity. These planted roofs contribute to a cooler microclimate and reduce the strain on drainage infrastructure during periods of heavy rainfall.

Renewable energy generation is also a core part of the development. Photovoltaic panels will be installed on appropriate roof areas to produce electricity on-site.

Integrated Landscape and Biodiversity Strategy

The campus design respects and enhances the site's existing ecological assets. The vast majority of the protected woodland to the north is retained, reinforcing the natural setting and preserving mature ecosystems. The landscape strategy builds on this by introducing new native planting, hedgerows, and trees, replacement of decayed or diying trees, as well as a pond and seasonal wetland area that support biodiversity and offer environmental learning opportunities.

An extensive Sustainable Urban Drainage System (SUDS) is incorporated throughout the site to reduce surface water runoff and encourage natural infiltration. Parking areas and internal roads are designed to work with the landscape rather than against it, contributing to climate resilience while maintaining a soft, green character.

Heritage as a Functional Asset

Rather than preserving historical elements in isolation, the project integrates them into the new development in meaningful and functional ways. The historic walled garden is retained almost in its entirety, and its eastern section—including the original bell tower—is sensitively incorporated into the main hospital entrance.

This creates a powerful architectural threshold that reinforces the identity of the site while delineating the transition from public to clinical spaces.

The former barn and coach house are repurposed into key campus buildings, supporting therapeutic and operational functions. This approach respects the embodied energy of existing structures and reduces the environmental impact associated with demolition and new construction.

Promoting Sustainable Mobility

A range of sustainable transport strategies is embedded in the project to reduce car dependency and promote greener modes of movement. A shuttle bus service will link the campus to the existing St. Patrick's Hospital site in Dublin 8, offering staff, visitors, and patients a practical and sustainable connection between the two locations.

The project supports cycling through infrastructure and policy. Secure bike parking, sheltered facilities, and participation in the Bike to Work Scheme all contribute to a cycle-friendly environment. Public transport information will be clearly communicated across the site, including at entrances, waiting areas, and online, helping to encourage the use of buses and other available routes.

Community Integration and Social Value

Beyond its clinical function, the Saint Edmundsbury Campus is designed as a shared community space. Public access to areas such as the main entrance, café, and walking route encourages interaction and inclusivity. The layout makes thresholds between public and private zones legible and respectful, reinforcing safety while breaking down the stigma often associated with mental health facilities.

Through engagement and outreach initiatives, the hospital will work to promote mental health awareness and education in the surrounding community. In doing so, it aims to create not only a place of care but a resource for the wider public, improving both health outcomes and community cohesion.

APPENDIX A - AREA SCHEDULE

AREA SCHEDULE

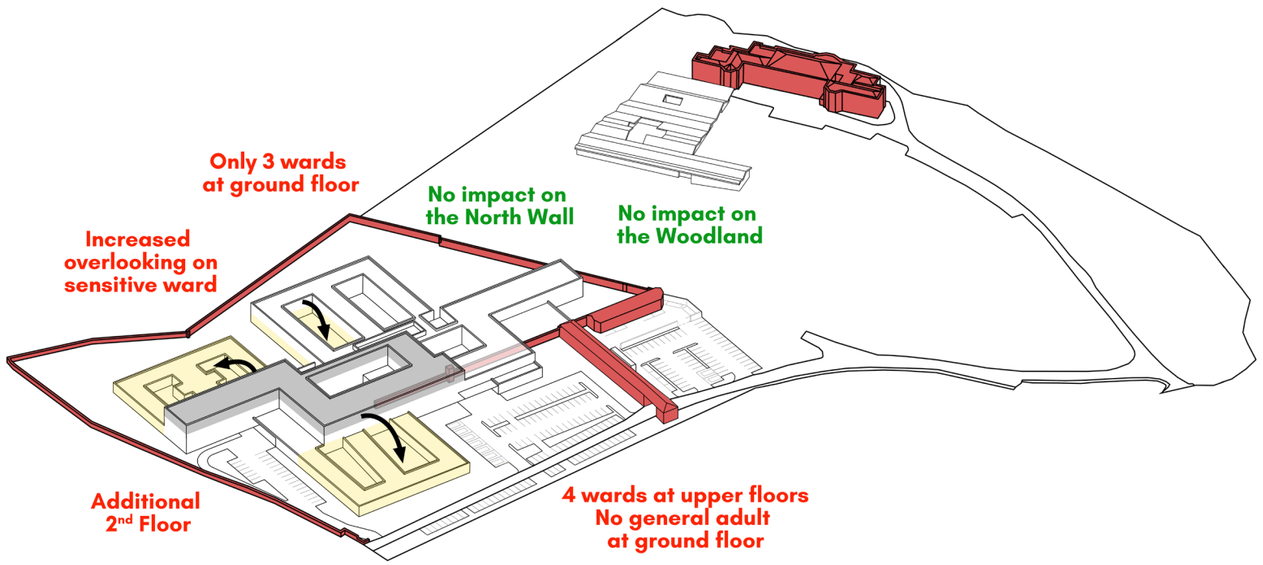
ELEMENT	Existing GIA Sq. M	Demolition GIA Sq. M	Demolition Linier. M	New Build / Refurb GIA Sq. M	Notes: Refer to drawing SPMHS-SE-DTM-DR-TOT-AR-1001 for location information
Ex Adult 52 Bed	1,633.00	1,633.00	X	x	To be Demolished / Removed – Site of New Adolescent Unit
Ex Dean Clinic 1	221.15	221.15	X	x	To be Demolished / Removed
Ex Dean Clinic 2	60.00	60.00	X	x	To be Demolished / Removed
Ex Shed 1	163.75	163.75	X	x	To be Demolished / Removed
Ex Shed 2	5.50	5.50	X	x	To be Demolished / Removed
Ex Shed 3	24.75	24.75	X	x	To be Demolished / Removed
Ex Shed 4	17.90	17.90	X	x	To be Demolished / Removed
Ex Farm Office	16.80	16.80	X	x	To be Demolished / Removed
Ex Historic Barn	183.65	X	X	374.00	To be Renovated as Two Storey Facilities Building
Ex Historic Coach House	312.95	X	X	599.50	To be Renovated as Two Storey Consultants / Cafe Building
Ex Historic Garden Wall (North)	X	X	62	x	To be Demolished / Reinstated as part of New 200 Bed Adult Unit
Ex Historic Garden Wall (South)	X	X	190	x	To be Demolished / Reinstated as New Southern Boundary Wall
Ex St Edmundsbury House	2,675.50	X	X	x	No Change / Minor Reinstatement Works to Facade
New 14 Bed Adolescent Unit	X	X	X	1,857.10	New Single Storey / Split Level Sports Hall & Plant Room
New 200 Bed Adult Unit	X	X	X	16,283.20	New Two Storey with Open & Enclosed Plant Set-back at Roof Level
New Energy Centre	X	X	X	114.50	New to Historic Farmyard / Site of Shed 1
New Sub Station	X	X	X	23.60	New to Rear of St Edmundsbury House / Site of Shed 4
TOTAL	**5,314.95**	**2,142.85**	**252**	**19,251.90**	**Site Red Line (Application Area): 8.10 H/A**

ELEMENT	Car	Minibus	Bike Long Stay	Bike Short stay	
Ex Parking	75	0	Unknown- Undefined	Unknown- Undefined	Car Parking includes 10 x Undefined spaces at Dean Clinic.
Proposed Parking	214	2	104	56	Dedicated / Defined.

APPENDIX B - ALTERNATIVE DESIGN APPROACHES CONSIDERED

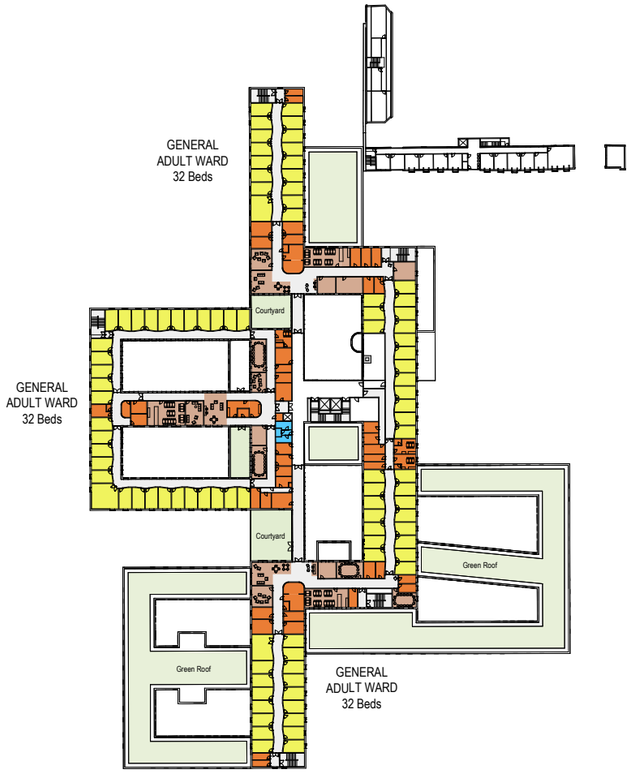
200-Bed Adult In-patient Hospital First Iteration (Key considerations)

- The historic wall to the north is kept intact as well as the woodland.
- All General Adult Wards (4 of 7 wards) are located at 1st and 2nd floor levels.
- Hospital Connectivity and department adjacencies are more strained.
- The highly sensitive Higher-Acute, Older Age and Eating Disorder Program (EDP) wards located on the ground floor (along with the OT Hub) suffer major overlooking issues from the inclusion of a second floor.
- Increased visual impact of development.

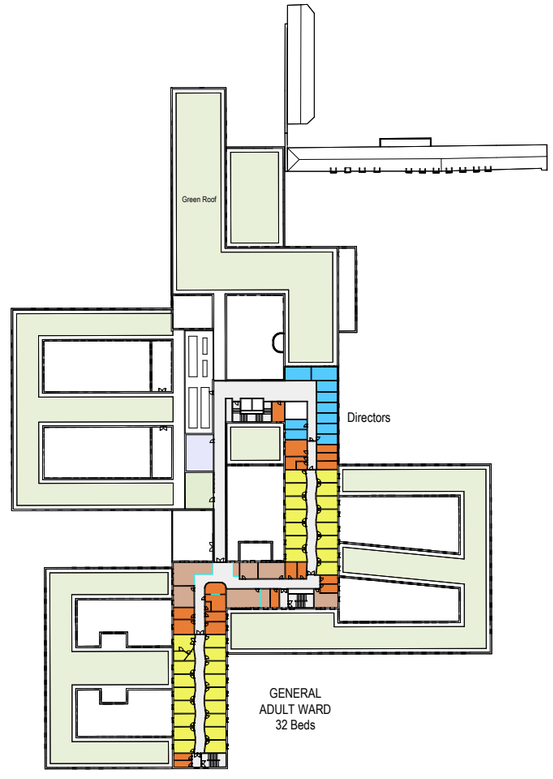




Ground Floor



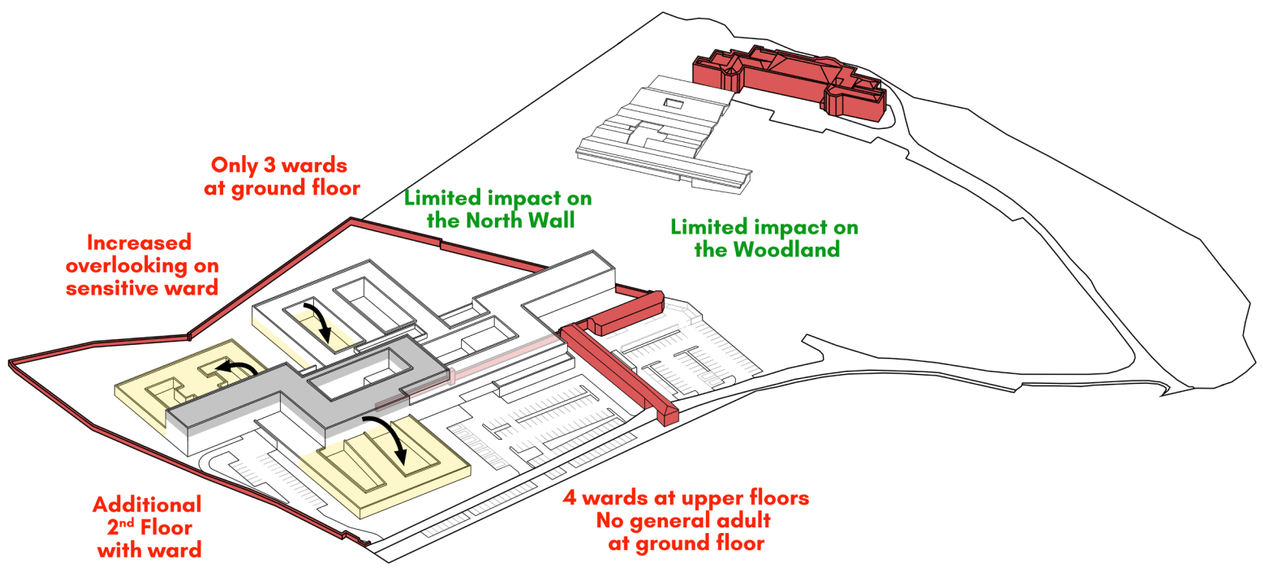
First Floor

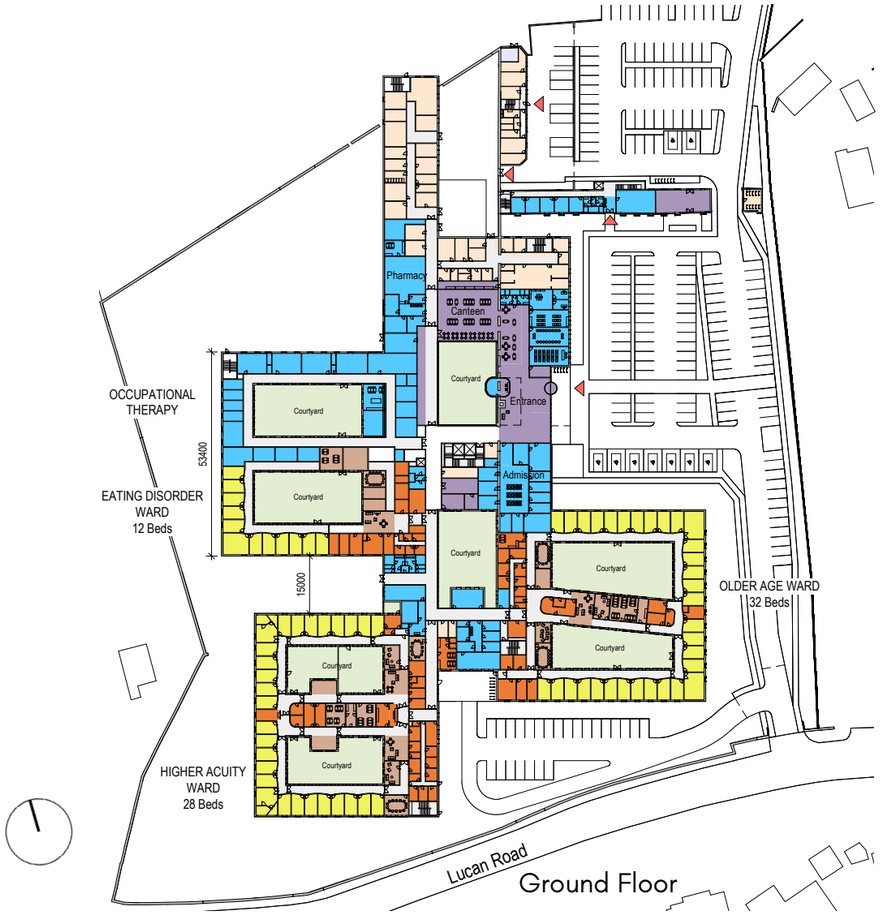


Second Floor

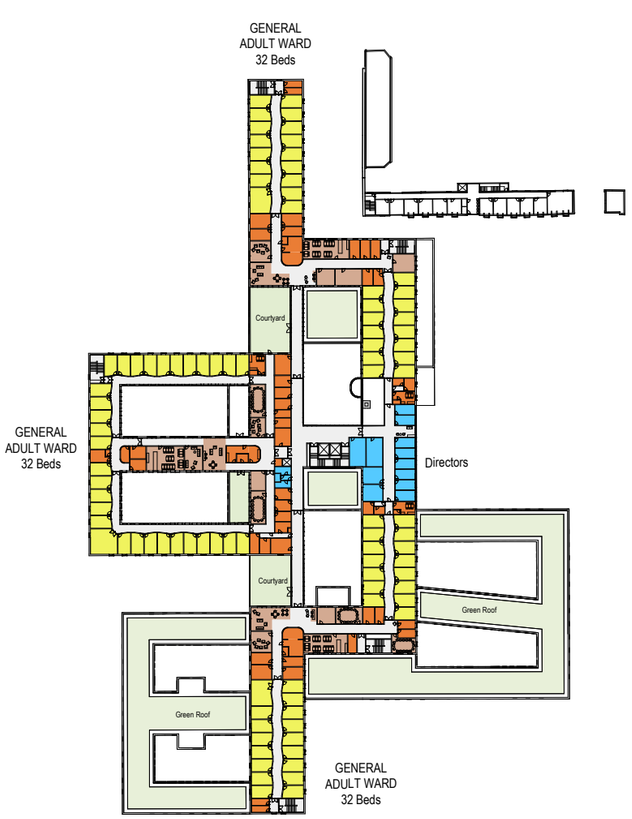
200-Bed Adult In-patient Hospital Second Iteration (Key considerations)

- Impact on historic wall is limited as well as on woodland.
- All General Adult Wards (4 of 7 wards) are located at 1st and 2nd floor levels.
- EDP and OT Hub are located at ground floor by necessity with a General Adult Ward located above.
- The highly sensitive Eating Disorder Program (EDP) ward suffers major overlooking issues.
- The highly sensitive Older Age ward located on the ground floor suffers further overlooking issues from the inclusion of a second floor.
- Hospital Connectivity and department adjacencies are more strained.
- Increased visual impact of development.

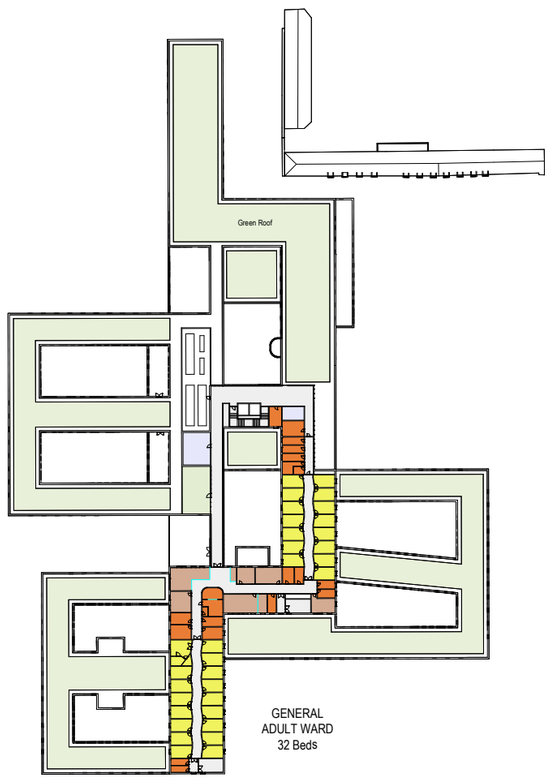




Ground Floor



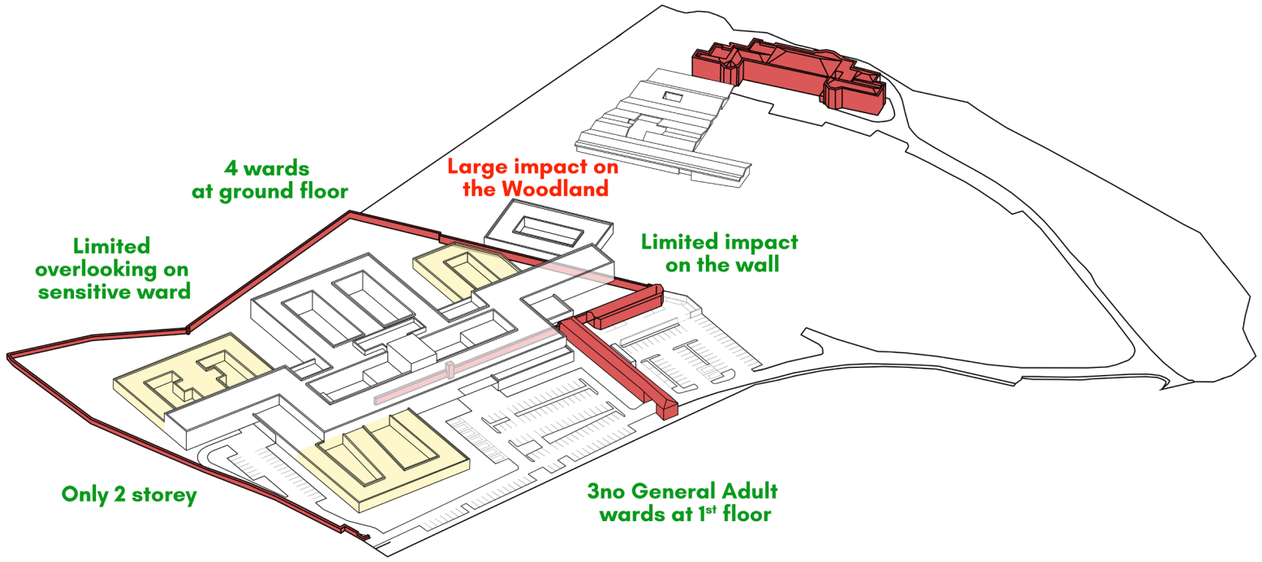
First Floor



Second Floor

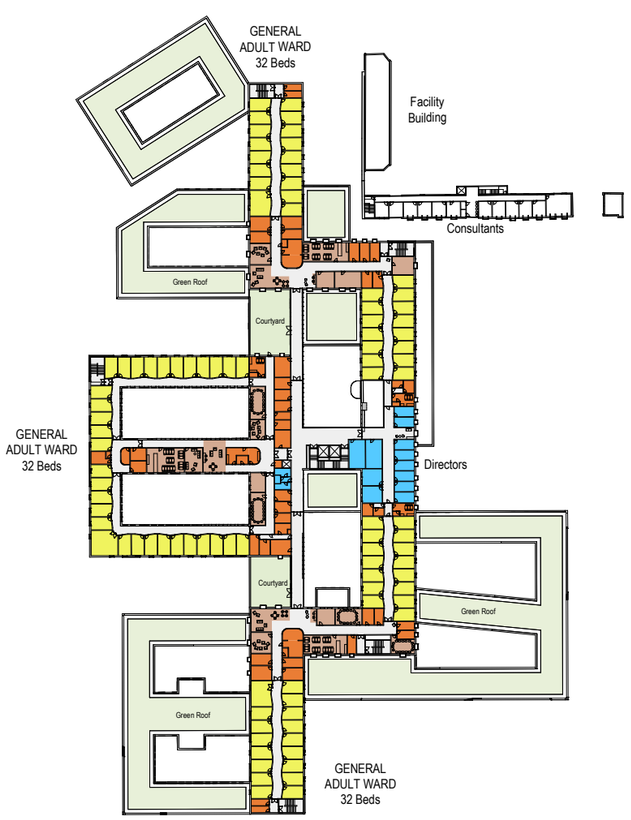
200-Bed Adult In-patient Hospital Third Iteration (Key considerations)

- The historic wall to the north is kept intact with minimal alteration.
- OT HUB impact on woodland is increased.
- EDP Ward and OT Hub are off set from historic wall.
- 4 wards are located on the ground floor and 3 general adult wards are located on the 1st floor realizing maximum potential for highly sensitive wards.
- There is no second floor in this option.

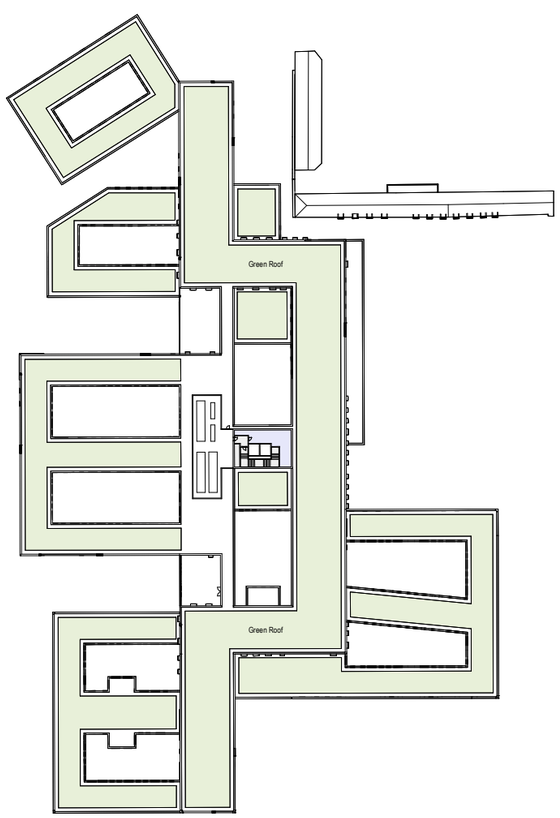




Ground Floor



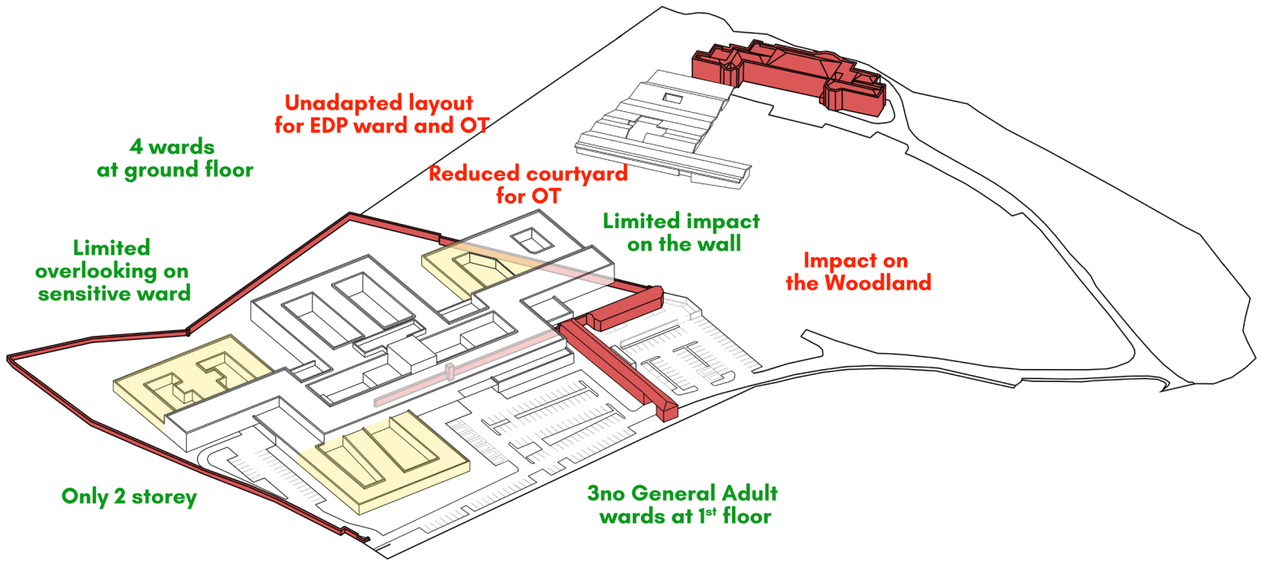
First Floor

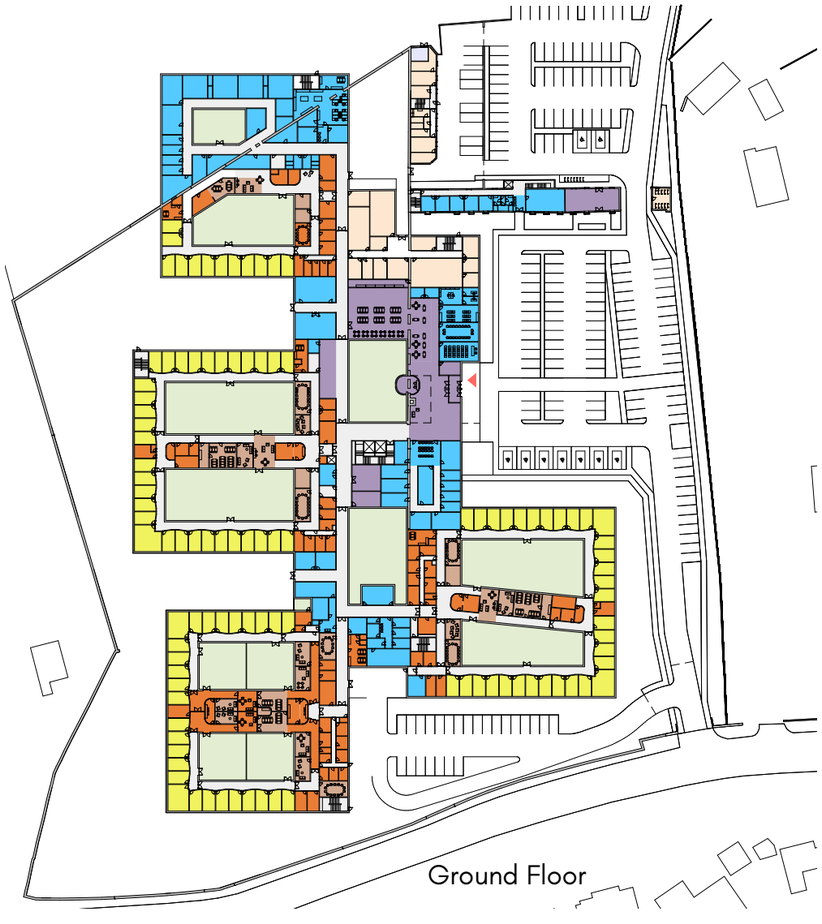


Second Floor

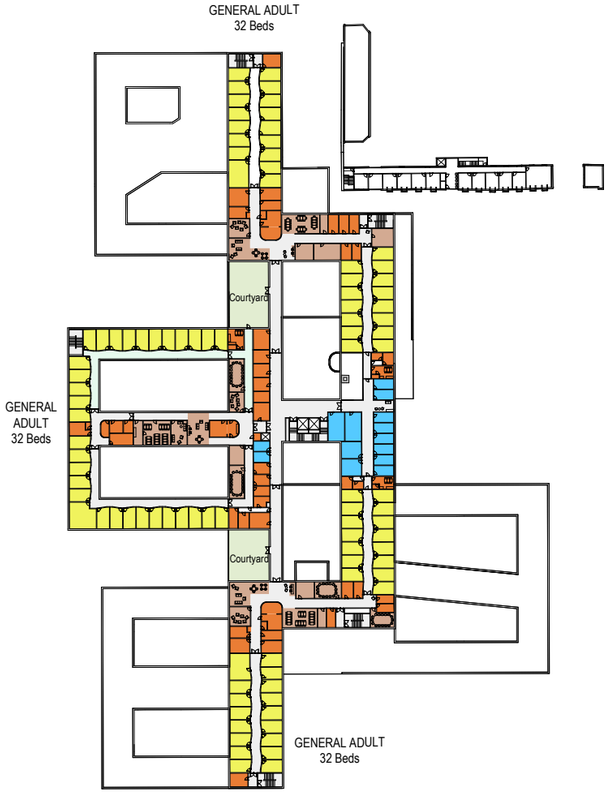
200-Bed Adult In-patient Hospital Fourth Iteration (Key considerations)

- The North wall is kept intact and incorporated into the building.
- The Historic Wall creates a logical division between the EDP ward and OT Hub.
- OT HUB impact on woodland is decreased from 3rd Iteration.
- Optimum EDP and OT Hub layouts are somewhat compromised with oblique location of historic wall.
- Flexibility in future adaption of space limited.
- 4 wards are located on the ground floor and 3 general adult wards are located on the 1st floor realizing maximum potential for highly sensitive wards.
- There is no second floor in this option.





Ground Floor



First Floor



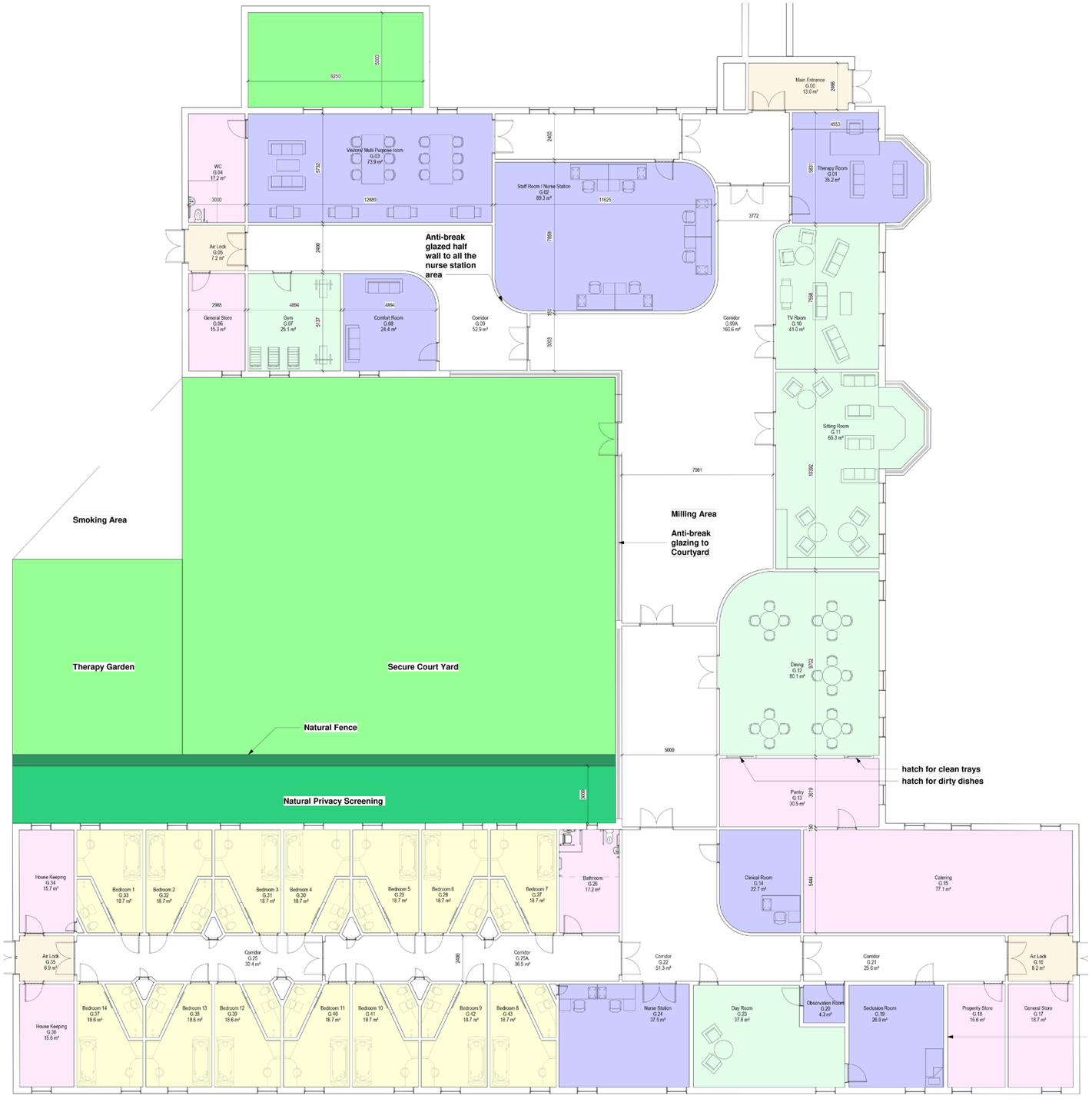
EDP / OT Layout



Prefered layout

Reconversion of the existing 52-bed Ward into a 14-Bed Adolescent In-patient Unit (Key considerations)

- The existing building layout was designed for a 52-bed ward, making reconfiguration for a 14-bed unit spatially inefficient.
- The reduction in bedroom numbers would have resulted in poorly proportioned spaces, with limited scope for meaningful redesign of the floor plate.
- Day areas and associated services could not be adequately accommodated within the existing layout without significant compromise.
- The existing structure dictated a double-sided corridor arrangement for bedrooms, which is not conducive to the quality of environment required.
- A new building allows for a purpose-designed layout that prioritises therapeutic quality, spatial efficiency, and the specific operational needs of the unit.



APPENDIX B – PUBLIC CONSULTATIONS REPORT

1. REPORT OF CONSULTATION WITH SAINT ANDREW'S NATIONAL SCHOOL

Location: Saint Andrew's National School, Lucan, Co. Dublin.
Date: 6 November 2025

1. Introduction
A consultation meeting was held on Thursday 6 November 2025 with representatives of Saint Andrew's National School to present the proposals for the development of the new Mental Health Hospital and associated facilities at the Saint Edmundsbury site. The purpose of the meeting was to provide the school with a clear overview of the project, outline the anticipated programme, and discuss matters of particular relevance to the school community and its daily operations.

2. Attendance
School Principal Padraic Byrne and Fionnuala Gilmartin of Board of Management attended the meeting.

3. Presentations and Design Team Participation
The meeting included a single presentation delivered by representatives of St. Patrick's Mental Health Services together with the project architect. The session provided attendees with an overview of the proposed development, its key components, and the anticipated programme.
Paul Gillingan, CEO of SPMHS, and Tom Maher, Director of Services, introduced the project on behalf of St. Patrick's Mental Health Services, after which Des Smyth (TOT Architects) presented the details of the proposed development.

4. Feedback and Initial Reactions
From a school perspective, the primary areas of focus related to safety, access, and the interface between the proposed development and the existing school environment.

- Traffic Congestion: Traffic impacts were identified as a principal concern. The project team presented the proposed road and junction improvements at Chapel Hill, along with enhanced Active Travel measures and the maintenance of bus lanes. These measures were noted as critical for school users and the wider locality.
- Construction Traffic and School Entrance Safety: Concerns were raised regarding the proximity of construction traffic to the school entrance, with health and safety identified as the primary issue. It was agreed that further exploration will be required to consider alternative access arrangements and/or segregation of heavy goods vehicles from general site traffic. A robust and feasible construction stage management plan will be necessary.
- Screening Along the Boundary: While secure fencing currently exists between the school and the site, it was acknowledged that the boundary is visually open. The need to enhance screening from the Dean Clinic entrance to the existing farmyard area north of the school was noted.
- Retention of the Walking Loop: The school highlighted the importance of maintaining the walking loop, which is used for outdoor learning and nature walks. The project team confirmed the site-wide strategy to retain the right of way through both entrances, together with broader public realm improvements.
- Programme and Duration: The anticipated programme was outlined as approximately 12 months for the planning process and a minimum of 24 months for construction. It was clarified that this excludes tendering and detailed design stages, meaning the overall timeframe to completion could extend to approximately four years.

A digital copy of the presentation was issued to the School Senior Management Team. The school will in turn notify parents about the proposal and the opportunity for public viewing.

2. REPORT OF CONSULTATION WITH PUBLIC REPRESENTATIVES AND MEMBERS OF THE PUBLIC

Location: Saint Edmundsbury House, Lucan, Co. Dublin.
Date: 18 November 2025

1. Introduction

A public consultation event was held on 18 November 2025 at St Edmundsbury House, Lucan, to present the proposals for the development of a new Mental Health Hospital and associated facilities on the Saint Edmundsbury campus. The purpose of the consultation was to provide both public representatives and members of the community with a clear understanding of the project vision, its key components, and the planning process ahead. Invitations were issued to all public representatives for the area.
The event was structured in two parts: a dedicated session for public representatives from 2:00 pm to 4:00 pm, followed by a public session from 5:00 pm to 8:00 pm. This structure ensured that elected representatives had the opportunity for focused engagement before the wider public discussions commenced.

2. Attendance

2.1 Public Representatives (2:00 pm - 4:00 pm)
Cllr Caroline Brady, Cllr Helen Farrell and further public representatives attended the initial briefing. Their attendance was welcomed as a vital part of maintaining open communication with elected officials.
2.2 Members of the Public (5:00 pm - 8:00 pm)
Interest from the local community was strong. A total of 50 attendees registered their attendance on arrival at the event, while a further 10 to 15 community members joined without registration. This level of engagement reflects the significance of the project for residents in the Lucan area.

3. Presentations and Design Team Participation

The session for public representatives included a series of formal presentations delivered by representatives of St. Patrick's Mental Health Services and members of the design team. Their contributions provided attendees with a comprehensive overview of the architectural, technical, environmental, and procedural dimensions of the proposed development.
The session opened with an introduction by Tom Maher, Director of Services at SPMHS, who outlined the overall objectives of the new Mental Health Hospital project and the importance of public engagement at this early stage.
Following this, members of the design and consultancy team delivered presentations in the following areas:

- Architecture - Presented by Des Smyth (TOT Architects), outlining the overarching design concept, layout of buildings, and integration of the new facilities within the Saint Edmundsbury site.
- Environmental Assessment - Delivered by Bernadette O'Connell (JBA Consulting), with a focus on environmental considerations, site ecology, and measures to mitigate potential impacts.
- Landscaping - Presented by Jim Bloxam (DFLA), describing the approach to landscape integration, preservation of natural character, and enhancement of green spaces.
- Conservation - Presented by Tim Dowling (Carrig), addressing heritage considerations and the protection of existing structures on the site.
- Transportation and Roads - Presented by Garry Flood (Egis), covering anticipated traffic impacts, access arrangements, and proposed transport improvements.
- Civil & Structural Design - Also presented by Garry Flood (Egis), providing an overview of the technical engineering framework supporting the project.
- Planning Process - Delivered by John Gannon (Tom Philips & Associates), detailing the procedural steps, timelines, and statutory requirements associated with the submission of the planning application.

The subsequent public session was organised in a drop-in format, allowing members of the community to engage directly with the design and executive team through one-to-one consultations, review the exhibition material at their own pace, and have their questions and concerns addressed. Together, these presentations aimed to give attendees a clear, integrated picture of how the project has been developed to date and how it will progress through the planning stages.

4. Feedback and Initial Reactions

Overall, the project was generally well received by those in attendance. Many participants expressed appreciation for the comprehensive overview provided by the design and planning team, and there was a shared recognition of the importance of delivering a modern Mental Health Hospital with connected facilities on the Saint Edmundsbury site. While the sentiment was broadly positive, a number of questions and comments were raised, reflecting the community's interest in the project and its potential implications.
4.1 Councillors' Queries (prior to public consultation)

- Concerns over intrusion into the proposed Natural Heritage Area (pNHA).
- Requested reasons why the building had to extend into the woodland.

- Asked for clarity over the Site of Archaeological and Architectural Interest (SAAO) and the pNHA boundaries.

4.2 Public Comments and Queries

- Majority of comments focused on traffic issues; these were addressed by Garry Flood (Egis).
- Questions about whether the existing walking loop would be retained.
- Queries regarding whether proposed visitor parking would be paid.
- Concerns about safety for school parents' vehicular drop-off during construction.
- Questions about the amount and type of native planting in the proposed landscaping scheme.
- Comments regarding safety of the proposed pond within the wetland area.
- Queries about whether the site is designated as a greenbelt that cannot be developed.
- Questions regarding whether local labour would be recruited to work in the hospital.
- Concerns about the appropriateness and safety of locating a mental health facility beside two schools.
- Queries regarding the proportion of secure facilities and patients who would be resident in the development.
- Additional concerns raised about access arrangements (vehicular and pedestrian), future traffic volumes, and the maintenance of the existing walking route.

The design team responded to these queries, providing explanations where possible and noting areas where further information will become available as the project progresses.

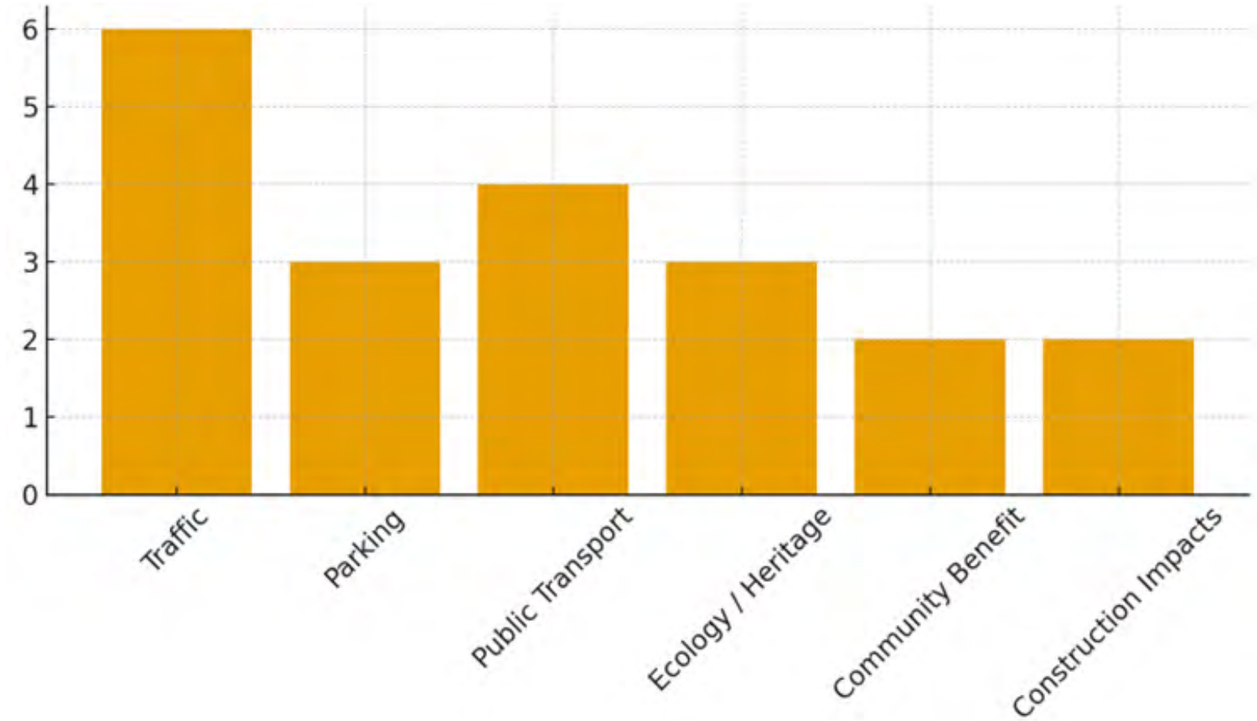
It is important to note that some of the queries raised fall outside the scope of the planning process and therefore cannot be addressed within a planning forum. These included questions relating to staffing policies (such as recruitment of local labour), the operational model of the mental health facility, and broader perceptions of safety or social suitability. While not planning matters, these comments have been recorded for completeness and will be relayed to the appropriate parties.

4.3 Written Feedback

In addition to questions raised during the sessions, written comments were received from attendees. On the evening of the consultation, 11 comments were submitted on cards, with a further comment received by email since the event. Cards and email at the end of the report.

An analysis of these written submissions was conducted to identify the key areas of concern and ensure that all feedback is considered in the ongoing development and planning process. Six main areas of interest were identified:

- Traffic
- Parking
- Public Transport
- Ecology / Heritage
- Community Benefits
- Construction Impact



Note:
Number of submissions mentioning each concern (not mutually exclusive).

Traffic
- Concern about increased impact on already heavy traffic on the road (Card 1).
- Traffic access and parking sufficiency questioned (Card 3).
- Any increase of traffic into an already clogged roadway is a concern (Card 4).
- Issues caused by toll-bridge avoiders creating rat-run traffic (Card 4).
- Concern about traffic close to Esker Lane and through the village (Card 10).
- Worry that traffic will build up and block the road near the school, where lanes merge (Card 11).
- Email: Safety concerns at the entrance, particularly with children crossing by foot or bike near the school.
- Email: Concern that patients may need to travel by car due to vulnerability or long-distance journeys.
- Email: Concern that access routes may not cope with demand.

Parking
- Issues raised about parking numbers by residents closest to the expansion (Card 2).
- Concern about whether parking provision is sufficient (Card 3).
- Email: Concern that the proposed 215 spaces may be inadequate.
- Email: Worry that if the car park is full, visitors will park in nearby estates (comparison to Crumlin Hospital).
- Email: Query on how the 215 spaces were calculated (size vs. usage).
- Email: Concern that limited public transport makes car travel necessary for many.
- Email: Concern about shift patterns and limited public transport at weekends reducing staff ability to avoid car use.
- Email: Request for contingency plans if parking proves insufficient.

Public transport
- Request for engagement with TFI regarding increasing C3/C4 bus services (Card 1).
- Existing problem with bus frequency; buses already full going into town (Card 5).
- Increase in bus numbers suggested (Card 6).
- Email: Patients may not be able to use public transport due to mental health vulnerability.
- Email: Lucan not well connected to areas outside Dublin/Kildare suburbs.
- Email: Existing bus services do not support staff shift times, especially weekends.
- Email: Concern that sustainable transport assumptions may not be realistic.

Ecology / heritage
- Maintaining existing walking route down to Liffey Valley Park (Card 1).
- Strong importance placed on green/ecology of the site (Card 6).
- Preserve old stone walls/buildings and large trees (Card 7).
- Email: Commends the preservation of green space and biodiversity.
- Email: Highlights importance of green space for healing, health, and stress management.

Community benefit
- How will the local community benefit from this development? (Card 9).
- Interest in something being done with the gate lodge, e.g., a coffee shop (Card 8).

Construction impacts
- Concern about construction traffic (Card 9).
- Email: Concern that children crossing the road near the entrance during construction could be at risk.
- Email: Questions about mitigating construction-phase access issues.

Comment Cards

1. I don't have any strong objections to the development as a whole. However, key concerns of mine are: 1. Increased impact on already excessive traffic on road 2. Maintaining existing walking down to Liffey Valley Park 3. Will there be engagement with TFI re more C3/C4 buses?
2. Overall, I think it's a very good plan but I have noted from some people that live closer to the proposed expansion that there are big issues in relation to the parking numbers
3. Excellent concept. Purpose built accommodation to meet a huge need in our society. I would totally support the proposal. Making good use of land you own. Expanding on existing services. Only issue would be traffic access and parking - is it sufficient? One way road would be ideal. In at Dean Clinic and out at the Esker Lane Gate
4. Any increase of traffic into a clogged-up roadway is a concern. Toll bridge avoiders cause a lot of issues. Can traffic through "Gates" (Eagle gates?) be minimised to avoid rat run traffic?
5. Looks great. Existing problem with bus frequency outside going to town - buses all full
6. Looks really good - green/ecology of site very important - am a resident across the road. St Ed's land so special. Could do with increase in number of buses
7. Preserve old stone / walls / buildings / preserve large trees. Think green!
8. Love to see something done (coffee shop) with gate lodge at Junction 2
9. How will the local community benefit from this development? Worries - construction traffic. Wrong location for development
10. Delighted about the new mental health facilities - just concerned about the traffic close to Esker Lane and traffic through village
11. My worry is that the traffic will build up more and block the road as while there will be two lanes from just before the school, the traffic goes into two lanes anyhow.

Email

To whom it may concern,

Thank you for showcasing the plans for the proposed development at St. Edmundsbury/ St. Patrick's Hospital Lucan. I feel it is absolutely an essential service and facility first and foremost. And with a mental health facility at the site locally for many years, it also feels organic to see a plan for an evolvement of use rather than entire change of use. I would like to commend the plan in terms of preserving so much green space in the design and a commitment to maintaining the biodiversity in the area. Nature and green space is particularly important for healing, health and stress management so I think it is especially important to prioritise here. I think it is so wonderful to see a gym onsite and useable nature spaces. Often these are an afterthought in hospital / healthcare facility design.

I have some concerns regarding access and parking spaces. I understand there will be approx 215 spaces provided based on council guidelines. Whilst I fully applaud the decent size of bicycle parking and understand the incentive to promote green transport, my concerns are:

1. Safety at the entrance site especially with local children crossing by foot or bike to access the school- during both construction phase and beyond.

2. The patients travelling to / from the site are vulnerable & most probably suffering mental ill health, therefore may not be in a position to opt for public transport options due to same.

3. As a center of excellence people are likely travelling from an array of different locations for example Swords/Ashbourne/Carlow. Lucan is not a central hub for transport links to/from many other locations other than Dublin city and the surrounding suburbs in Kildare.

3. When a patient/visiting family arrive by car and they find the car park full, where do they choose as a backup plan? There is an extreme shortage in alternative publicly available carparking facilities nearby. Do they have no choice but to park in nearby housing estates similar to that which happens at Crumlin Hospital?

4. Are the 215 spaces calculated on the size of the facility e.g. Sq Meterage or is usage taken into account? e.g. outpatient services

5. As mentioned there will be a workplace travel officer allocated to oversee staff carparking and promote the use of alternative transport links but again, these transport links to/from Lucan are limited to very few areas and the services often do not meet the shift timing requirements especially on weekends.

6. Is there a contingency plan if the parking transport facilities do not meet the needs of the use of the facility? Is there scope to revise parking facilities or access links if/when overflow issues occur?

Many thanks, I enjoyed the display and found those I spoke to very engaging.

Presentation Boards



A - St Edmundsbury House



In 1898 St Edmundsbury House, Lucan, was bought by Saint Patricks Mental Health Services for use as a convalescent hospital. The first patients were admitted in March 1899. In 1985 a new In Patient ward extension was completed, with the existing historic building converted for staff use and occupational therapy purposes. The site is bordered by green fields to the north, farm buildings and St. Andrew's National School to the east, Lucan Road to the south, and the River Liffey with its surrounding open space and pre-schools to the west.

Set within the current day urban context, St Edmunsdbury forms a beautiful site with a sylvan character comprising of approx 8.48 hectares. The hospital provides a comprehensive range of mental health services; inpatient care (52 beds), day patient programmes, and outpatient Dean Clinic community services that cater for a wide range of mental health issues including anxiety, depression, alcohol/chemical dependence, dual diagnosis, the mental health of older adults, and bipolar mood disorder.

LEGEND

1. ST. EDMUNDSBURY HOUSE
2. 52 BEDS WARD BUILDING
3. HISTORIC FARM YARD
4. FARM HOUSE & BUILDINGS
5. WALLED GARDEN
6. PROTECTED BELL TOWER
7. DEAN CLINIC
8. EXISTING FENCE MAINTAINED
9. SITE ENTRANCE
10. STAFF & SERVICE USER PARKING
11. PROTECTED BARN
12. BARN
13. PROTECTED COACH HOUSE
14. LAND CEDED FOR IMPROVEMENT OF THE JUNCTION BY EDCO.
15. MEADOW
16. EXISTING WOODLAND
17. EXISTING TREES
18. BUILDING ENTRANCE
19. SITE ENTRANCE
20. SITE BOUNDARY

Existing Site Plan Context.



B - St Edmundsbury House and 52 beds Ward Building



C - St Edmundsbury House Main Entrance



D - Farm buildings and courtyard



E - Internal view of the Coach House



F - Internal view of the Barn



G - Road passing through the Coach House



H - Bell Tower



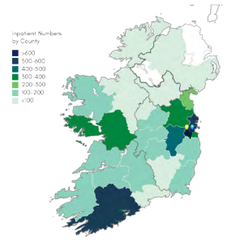
I - Dean Clinic

CURRENT IN-PATIENT SERVICES

St Patrick's Mental Health Services provides in-patient care through its three approved centres:
St Patrick's University Hospital, SPUH, Dublin 8 (241 beds)
Willow Grove Adolescent Unit, Dublin 8 (14 beds)
St. Edmundsbury House, St. Patrick's, Lucan, (52 beds)

St Patrick's Mental Health services in-patient care is accessed nationally, with 80% of in-patients travelling from outside of Dublin City Centre.

Inpatients Dublin County and Nationally	c. 80%
Inpatients Dublin City	c. 20%
EU/UK	< 0.1%



CURRENT OUT-PATIENT SERVICES, ST PATRICK'S, DUBLIN 8

Community and outpatient care are provided through the Dean Clinics, and day patient services through the Wellness & Recovery Centre.

Out-patient Services provided at St. Patrick's University Hospital Campus:

Assessment and Therapy for:

Eating disorder	Stress-related disorders
Depression	Addiction
Bipolar disorder	Dual diagnosis
Anxiety	Psychosis
Obsessive-Compulsive Disorder	Memory Clinic

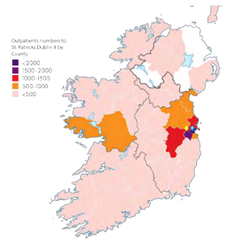
Therapies and Groups:

Psychotherapy	Dietetics
Psychology	Maudsley Model of
Addiction counseling	Anorexia Nervosa
Cognitive behavioral therapy	Treatment for Adults
Group therapy	(MANTRA)
Occupational therapy	Family therapy

WHERE DO OUTPATIENTS TO ST. PATRICK'S DUBLIN 8, TRAVEL FROM?

Outpatient statistics indicate that 74% of outpatients to St.Patrick's Dublin 8, travel from outside the Dublin City area.

Total Outpatients to SPUH Campus	14,936
Oupatients Dublin County and Nationally	11,027 (74%)
Outpatients Dublin City	3,891 (26%)



CURRENT OUT-PATIENT SERVICES, ST. PATRICK'S LUCAN

Out-patient Services provided at St. Patrick's, Lucan:

Assessment and Therapy for:

Depression	Addiction
Bipolar disorder	Dual diagnosis
Anxiety	Psychosis
OCD	
Stress-related disorders	

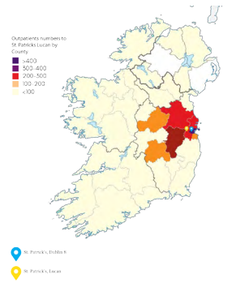
Therapies and Groups:

Psychotherapy	
Psychology	
Cognitive behavioural therapy	
Group therapy	
Occupational therapy	

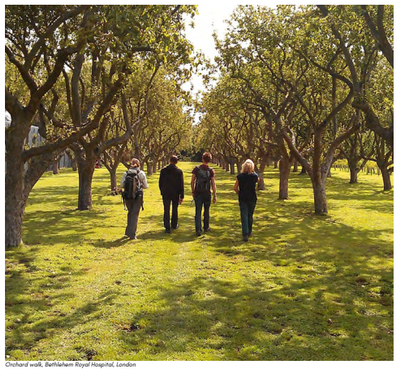
WHERE DO OUTPATIENTS TO ST. PATRICK'S LUCAN TRAVEL FROM?

Outpatient statistics indicate that almost 85% of outpatients to St.Patrick's, Lucan, travel from County Dublin and National regions. The number of patients travelling to Lucan from Dublin City Centre is 15%.

Total Outpatients to Dean Lucan	2,827
Outpatients from Dublin County and Nationally	2,389 (85%)
Outpatients from Dublin City	434 (15%)
Outpatients from EU	4 (<0.1%)



Data calculated from SPMHS anonymous patient statistics on home county / Dublin region address. Dublin City defined by postal codes within Dublin City council boundary.



Orchard walk, Bethlehem Royal Hospital, London

"It's not just passively being in nature that provides benefits, it's what we do to actively engage with the natural world and in turn improve our physical and mental health."

Design With People in Mind booklet issue no.4 - The Nature Issue, published 2019 by the Design in Mental Health Network.

LANDSCAPE AND MENTAL HEALTH

The 19th Century approach to mental health architecture focused on active therapy and meaningful pursuits. Landscapes were therefore designed not solely of their appearance, but also to play an active therapeutic role in treatment, with objectives including reduced isolation by bringing people together in large open spaces.

The renewed interest in the restorative potential of nature within the concept of therapeutic landscapes reinforces that the appropriateness of beautiful landscapes is equally relevant today.



J - Access Road to St Edmundsbury House



K - Avenue



Avenue



Avenue



L - Walled Garden



Lucan Road East Entrance (Gate Lodge)



St Edmundsbury Aerial View



A - Proposed Main Entrance Approach



B - Proposed Public Realm Wetland Feature



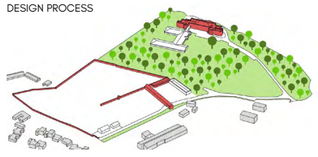
The proposal aims to create a new in-patient mental health campus set within a peaceful, landscaped setting. The design promotes wellbeing through close contact with nature, offering walking routes and therapeutic outdoor spaces for leisure and recovery.
The development will provide a range of services including adult and adolescent in-patient and day care, eating disorder and age-related care, general psychiatric services, and spaces for therapeutic activities such as art, music, and horticulture.
Green spaces will be designed with clear levels of access and privacy. Existing Public areas will be enhanced and shall retain existing connections to the Liffey Valley, while secure gardens and courtyards, set within the historic walled garden, will offer calm outdoor spaces for service users, visitors and staff.
Buildings will be mainly single-storey in line with good design practice and are designed to reduce visual impact and maintain privacy throughout. Car and bicycle parking (214 spaces) is provided at ground level and is strategically dispersed around the site to lessen visual impact.
Historic features such as the Walled Garden, Bell Tower and Barn Structures will be retained and renovated complete with the adaptation of St. Edmundsbury House in to an Adult Day Services Hub.
Proposed Sustainability measures include Low Carbon Construction Methods, Extensive Green Roofs, Natural Drainage Systems, and Increased Planted Buffer Zones and new Wetland Feature to enhance biodiversity and minimise noise.

LEGEND

1. MAIN HOSPITAL
2. CONSULTANT BUILDING
3. CAFETERIA
4. ADOLESCENT UNIT
5. HISTORIC BUILDING DAY SERVICES
6. FACILITY BUILDING
7. ENERGY CENTER
8. POND & PUBLIC GARDEN
9. PAY & DISPLAY PUBLIC & STAFF PARKING
10. STAFF PARKING
11. MAIN SITE ENTRANCE
12. PEDESTRIAN ENTRANCE ONLY
13. PROPOSED NEW LOCATION OF THE WALL
14. EXISTING WALL TO BE MOVED
15. SERVICE USER GARDEN
16. EXISTING FENCE MAINTAINED
17. 1-STOREY
18. 2-STOREY
19. MEADOW
20. HEDGE & EXISTING WOODLAND
21. PROPOSED ADDITIONAL WOODLAND
22. PEDESTRIAN ROUTE TO THE ST EDMUNDSBURY WALKING LOOP
23. GREEN ROOF
24. PV PANELS
25. EXISTING TREES
26. PROPOSED TREES
27. BUILDING ENTRANCE
28. SITE ENTRANCE
29. SITE BOUNDARY

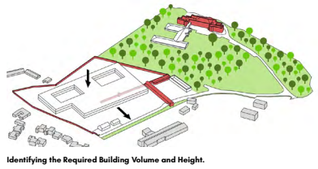
Proposed Site Plan.

DESIGN PROCESS

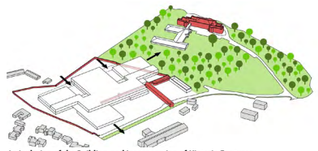


Relevant Context.

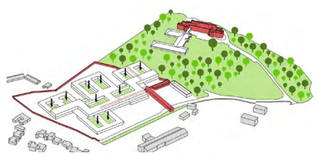
-An extensive and protected woodland devided the site in to two parts.
- The Site holds several protected architectural features, namely: St Edmundsbury House, The Wall Garden with Bell tower and Farmyad Structures.
- The surounding context comprises a mix of housing, schools, farm land and contemporary farm building.



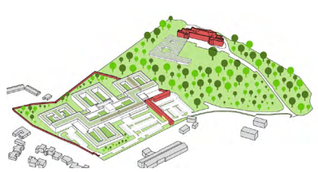
Identifying the Required Building Volume and Height.



Articulation of the Building and Incorporation of Historic Features.



Creating Secure Outdoor Spaces and Natural Daylighting to the Interior.



Security.
Each ward is provided with secure landscaped courtyards at ground and first floor levels, allowing for quality views, access to nature and better natural daylighting to internal spaces. Two further courtyards located within the heart of the Hospital will also provide for quality views, daylighting and social interaction spaces along the main Hospital street.

Connectivity.
The primary vehicular and pedestrian access to the proposed campus are retained, forming primary access to staff, service users and the general public. It is proposed to maintain the established walking route through the site.

A New Campus.
In addition to a more visible and open Hospital entrance, a publicly accessible cafe, located in the refurbished historic farm building, will serve as a new social hub for the locality and interface with SPMHS.



A - Proposed Main Hospital Entrance.



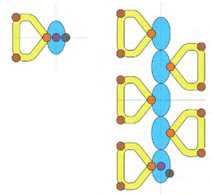
B - Proposed Main Hospital Reception & Public Entrance Foyer.



Proposed Main Hospital Ground Floor Plan.

LAYOUT PRINCIPLES

The layout of the Main Hospital is based on the Key Model Diagram outlining "Hub & Spoke" principle.
As a hierarchy of spaces emanate from the center these in turn, establish primary routes between functions.
Clear way finding and connectivity to the various Hospital functions is provided by a wide Internal Street at ground and first floor levels. Coupled with courtyards and lightwells, the street becomes a further social hub within the fabric of the Hospital.



The new hospital layout will create a clear and efficient structure where all key functions connect to a central core. This design supports ease of movement, visibility, and orientation throughout the building.

A wide internal street runs through the ground and first floors, linking the main hospital areas and forming an active social space with natural light from courtyards and lightwells. Wards are arranged around secure glazed courtyards, providing daylight, outdoor views, and a calm environment while allowing for flexibility and supervision.

The ground floor will contain the main public entrance, cafeteria, admissions area, training rooms, therapy hub, pharmacy, ECT suite, kitchen and housekeeping facilities, as well an Eating Disorder Unit (12 beds), Older Age Unit (32 beds), Higher Acuity Unit (28 beds), and a General Adult Unit (32 beds). The first floor will accommodate the directors' offices and three additional General Adult Wards, each with 32 beds.

The roof level will contain plant and building services. The existing protected farm buildings will be sensitively restored to provide therapy rooms for consultants and a public café, while the adjacent facility building will house environmental services and maintenance functions.

LEGEND

1. MAIN ENTRANCE
2. CONSULTANT
3. PUBLIC CAFE
4. ENERGY CENTER
5. FACILITY YARD
6. FACILITY BUILDING
7. INFORMATION CENTER
8. SECONDARY ENTRANCE
9. PAY & DISPLAY PUBLIC & STAFF PARKING
10. STAFF PARKING
11. SITE ENTRANCE
12. SERVICE ENTRANCE
13. PROPOSED NEW LOCATION OF THE WALL
14. BIKE PARKING
15. SERVICE USER GARDEN
16. PEDESTRIAN ROUTE TO THE ST EDMUNDSBURY WALKING LOOP
17. COURTYARD
18. RECEPTION
19. CANTEEN
20. KITCHEN
21. GYM
22. INTERNAL STREET
23. EATING DISORDER WARD
24. THERAPY HUB
25. GENERAL ADULT WARD
26. HIGHER ACUITY WARD
27. OLDER AGE WARD
28. CHAPLAIN
29. HAIRDRESSER
30. SHOP
31. LIFT TO UPPER FLOOR
32. DWARD CIRCULATION
33. ADMISSION
34. ART SPACE
35. WOODLAND
36. LUCAN ROAD

EXISTING TREES
PROPOSED TREES
BUILDING ENTRANCE
SITE ENTRANCE
PROTECTED STRUCTURE

Proposed 200-Bed Adult In-Patient Hospital.



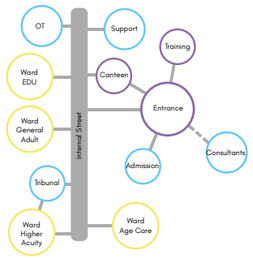
A - Proposed Public Restaurant Courtyard.



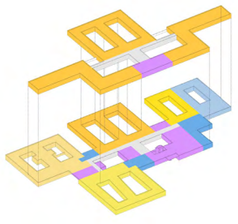
B - Proposed Public Restaurant.



Proposed Main Hospital First Floor Plan.



Typical Ground Floor Arrangement Diagram.





Typical Function within the Hospital Building

LEGEND

1. CONSULTANT
2. FACULTY YARD
3. FACULTY BUILDING
4. PAY & DISPLAY PUBLIC & STAFF PARKING
5. STAFF PARKING
6. SITE ENTRANCE
7. PROPOSED NEW LOCATION OF THE WALL
8. SERVICE USER GARDEN
9. PEDESTRIAN ROUTE TO THE ST ROMUALDS WAY WALKING LOOP
10. COURTYARD
11. INTERNAL STREET
12. GENERAL ADULT WARD
13. LIFT TO LOWER FLOOR
14. WARD CIRCULATION
15. DIRECTORS
16. WOODLAND
17. LUCAN ROAD
18. GREEN ROOF

EXISTING TREES
PROPOSED TREES
BUILDING ENTRANCE
SITE ENTRANCE
PROTECTED STRUCTURE



Proposed In-Patient Garden.



Proposed In-Patient Garden.



Proposed Main Hospital East Elevation



Proposed Main Hospital West Elevation



Proposed Main Hospital North Elevation



Proposed Main Hospital South Elevation

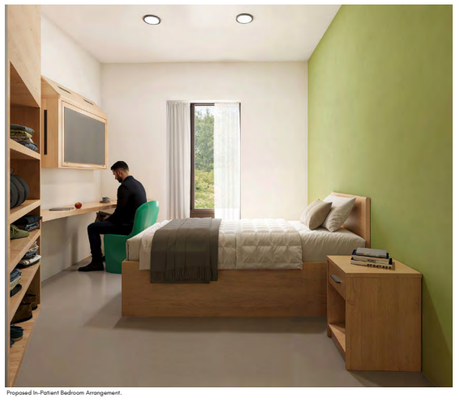


Proposed On Ward Daily Living Space.



Proposed Age Care Courtyard.

The new hospital will create a clear and efficient structure where all key functions connect to a central core. This design supports ease of movement, visibility, and orientation throughout the building.
A wide internal street runs through the ground and first floors, linking the main hospital areas and forming an active social space with natural light from courtyards and lightwells. Wards are arranged around secure glazed courtyards, providing daylight, outdoor views, and a calm environment while allowing for flexibility and supervision.



Proposed In-Patient Bedroom Arrangement.



Proposed Consultant Building with Public Cafe.



B - Proposed Former Farm Courtyard with Consultant and Facility Buildings

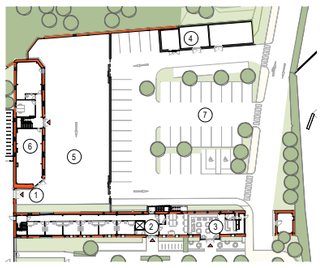


Proposed Consultant Building - South Elevation (Historic Coach House)

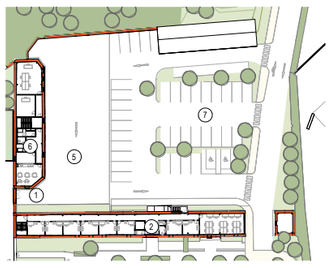


Proposed Consultant Building - North Elevation (Historic Coach House)

Proposed Consultant Building & Public Cafe.



Proposed Ground Floor



Proposed First Floor

The existing stone coach house will be carefully restored and repurposed as a consultant building containing individual therapy rooms. A new lightweight internal structure will support the building's use while preserving its historic character. The roof will be replaced with a new timber truss design, allowing the addition of a second floor for further therapy spaces. Contemporary windows on the southern side will bring natural light into the interiors, and a new external stair and lift will ensure full accessibility. A public café will be added at the eastern end, opening onto a terrace and creating a welcoming link between the hospital and the wider community.
The nearby former barn will become the facility building for the campus. Its stone structure will be retained and strengthened, with a new internal frame to support storage, workshops, and staff areas. A replacement roof will create space for offices and welfare facilities at first floor level. The exterior will remain simple and in keeping with its original character, with subtle new openings designed to blend with the existing fabric. Together, these restored buildings will preserve the site's heritage while supporting its new healthcare function.

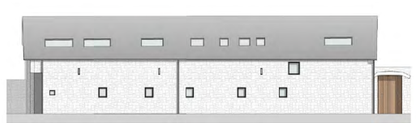
LEGEND

1. SERVICE ENTRANCE
2. CONSULTANT
3. PUBLIC CAFE
4. ENERGY CENTER
5. FACILITY YARD
6. FACILITY BUILDING
7. PAY & DISPLAY PUBLIC & STAFF PARKING

EXISTING TREES
PROPOSED TREES
BUILDING ENTRANCE
PROTECTED STRUCTURE



Proposed Facility Building - East Elevation (Historic Barn)



Proposed Facility Building - West Elevation (Historic Barn)

Proposed Facility Management Building.



The adolescent unit will provide dedicated in-patient and day services for younger people within the new hospital campus. Although located on the same site, it will operate independently for clinical and safeguarding reasons while maintaining functional links to the wider hospital.
The building is divided into two main areas: an in-patient zone and an out-patient therapy area. The in-patient section is arranged around a central courtyard, creating a secure, light-filled space surrounded by bedrooms and communal areas that balance privacy and supervision.
The out-patient zone includes therapy rooms that support daily treatment and group programmes. While both areas can operate separately, they can also work together when needed.
The unit provides a secure and adaptable environment that supports a range of clinical needs. A dedicated gym is connected directly to the building and partially set into the ground to reduce height and visual impact. This approach helps protect the views of the St. Edmundsbury House and preserves the character of the surrounding landscape.

LEGEND

1. ADOLESCENT DAY SERVICES ENTRANCE
2. ADOLESCENT WARD ENTRANCE
3. SPORT HALL
4. CLASSROOM
5. CORRIDOR
6. EXTERNAL COURTYARD
7. DAYCARE
8. WARD DAILY LIVING
9. LAWN
10. PROTECTED WOODLAND

EXISTING TREES
PROPOSED TREES
BUILDING ENTRANCE





A - Proposed Adolescent Unit and St Edmundsbury House



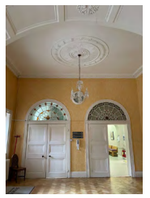
B - Proposed Adolescent Unit

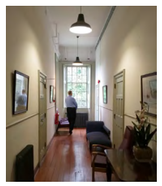


C - Proposed Internal Courtyard of the Adolescent Unit

Proposed 14-Bed Adolescent In-Patient Hospital.

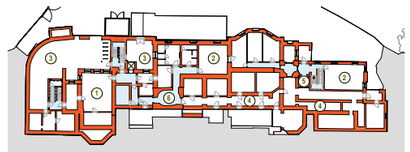








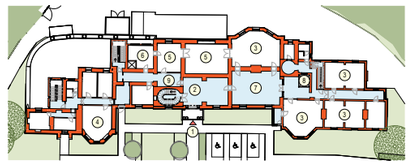
The historic St. Edmundsbury House will be carefully adapted to become the new Wellness and Recovery Centre. Minimal interventions are planned inorder to preserve its character, including the removal of a few non-original internal partitions to create larger therapy rooms, along with electrical upgrades and redecoration where required.
The building will provide spaces for group therapy, dining, and administration. The ground floor will include a canteen, dining area, and four group rooms. The first floor will accommodate three additional group rooms and offices, while the basement will contain offices, a kitchen, and support facilities.
This approach ensures the continued use of St. Edmundsbury House as a vital part of the campus while maintaining its historic integrity.



LEGEND

1. KITCHEN
2. OFFICE
3. EXTERNAL YARD
4. CELLAR
5. LIFT
6. CIRCULATION

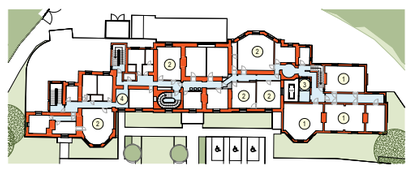
St Edmundsbury House - Basement Floor Plan



LEGEND

1. MAIN ENTRANCE
2. ENTRANCE LOBBY
3. GROUP ROOM
4. OFFICE
5. CANTEEN
6. KITCHEN
7. LOUNGE
8. LIFT
9. CIRCULATION
10. EXISTING TREE
11. PROPOSED TREE
12. BUILDING ENTRANCE

St Edmundsbury House - Ground Floor Plan



LEGEND

1. GROUP ROOM
2. OFFICE
3. LIFT
4. CIRCULATION

St Edmundsbury House - First Floor Plan

Proposed Wellness and Recovery Centre.

Public Representatives Meeting







Members of the Public Meeting







3. CONCLUSIONS FROM CONSULTATION PROCESS

The program of stakeholder engagement, including the public consultation event and the targeted meeting with Saint Andrew's National School, has provided the design team with a clear understanding of the principal issues of relevance to the local community and key adjoining land users. The feedback received was broadly constructive and confirmed general acceptance of the need for the proposed development. Importantly, the consultations helped to prioritise the matters requiring particular attention as the design progresses toward planning.

The most significant and consistently raised issue relates to transport and movement, encompassing traffic generation, junction performance, access arrangements, and the interaction between the development and existing road users. This theme was particularly pronounced in both the public consultation and the school engagement, where concerns focused on congestion, safety, and the potential cumulative impact of development in the area. As a result, the design team has identified the transport strategy — including mitigation measures, active travel provision, and construction traffic management — as a critical component of the planning submission.

A second key area of importance concerns the relationship between the development and its immediate context, particularly the interface with sensitive receptors such as the adjoining school and established site features. Feedback highlighted the need to ensure appropriate boundary treatments, visual screening, and the retention of valued amenities, including pedestrian routes. These matters will inform the refinement of landscape proposals and the overall site layout to ensure an appropriate and well-integrated development.

Environmental considerations also emerged as a material topic, notably in relation to ecology and designated areas. The feedback indicates a strong expectation that the planning documentation clearly demonstrates how the design responds to environmental constraints and safeguards existing natural assets. The design team will therefore ensure that the Environmental Impact and supporting assessments explicitly address these aspects.

The consultation with the school placed particular emphasis on construction-stage effects, especially in relation to safety and operational continuity. This has reinforced the commitment to developing a robust construction management approach in due course, setting out how potential impacts will be mitigated and how liaison with the school will be maintained throughout the construction programme

While some queries related to operational or policy matters outside the scope of planning, their presence underscores the importance of ongoing communication by the project promoter to provide clarity on non-planning aspects of the development.

In summary, the consultation process has been well received and effective in identifying the transport strategy, site interface and screening, environmental considerations, and construction management as the principal areas requiring particular focus. These themes will directly inform the continued development of the design and the preparation of the planning documentation, ensuring that the proposal responds appropriately to stakeholder feedback and local context.

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