DARE (NORTHERN) LTD

Lluesty Hospital Redevelopment Holywell, Flintshire

Landscape Design Strategy

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DARE (NORTHERN) LTD		
Lluesty Hospital Redevelopment, Holywell, Flintshire		
Landscape Design Strategy		
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1. INTRODUCTION

- 1.1 Wardell Armstrong LLP has been commissioned by DARE (Northern) Ltd to provide landscape design and associated environmental advice to support a proposal to redevelop, for residential use, the former Lluesty Hospital at Holywell, Flintshire, North Wales. The geographical location of the Hospital Site is shown on dwg. no. NT10144/001 (Site Location).
- 1.2 Three broadly separate but related topics have been addressed; namely ecological assessment, arboricultural assessment, and landscape design strategy.
- 1.3 Wardell Armstrong LLP has been assisted by AMEC Earth & Environmental (UK) Ltd (formerly Young Associates Ltd) and Colin White Tree Surgery & Forestry, in the specialist study areas of ecology and arboriculture, respectively. Consultation has also taken place with SPACE Designed Solutions Ltd, acting as architectural advisers and principal designers of the redevelopment scheme.
- 1.4 Each of the environmental studies has examined the wider Hospital Site but their focus of attention is the development Application Area, as defined by the application boundary shown on dwg. no. NT10144/003 (Site Appraisal).
- 1.5 This report provides written and drawn information relevant to a strategy for hard and soft landscape treatment. It briefly describes the development context of the wider Hospital Site but concept design proposals relate only to the Application Site.

2. SITE DESCRIPTION

- 2.1 The site of the former hospital is situated near the interface of landscape character areas 'Dee Coastal Slopes' and 'Trelawnyd Plateau' as defined in the Flintshire Landscape Strategy study (1996). Some of the characteristics of both types as well as the influence of underlying carboniferous limestone geology are discernible (pastoral slopes, broadleaved woodland, stone buildings and walls, ash tree dominance, industrial archaeology, even a wayside cottage) but on balance the character of the Hospital Site owes more to its urban fringe context and the neighbouring residential developments. Its perceived amenity value is as much a product of its setting as of any internal characteristics.
- 2.2 No statutory environmental designations affect the Site directly although it is within 0.5km of the Halkyn Mountain Special Area of Conservation (SAC) and Halkyn Common/Holywell Grasslands Site of Specific Scientific Interest (SSSI). These are designated partly because of the botanical interest of grassland associated with old lead workings (calaminarian grassland).



- 2.3 Some of the trees on the Site are protected by Tree Preservation Orders (TPO) as identified in the accompanying arboricultural assessment. Four orders detailed below apply to the Site and adjacent property but are currently subject to an updating review.
 - Holywell U.D. TPO (1951)
 - Holywell U.D. (Highfield Estate) TPO (1968)
 - Delyn B.C. (Land to rear of Lluesty Hospital, Holywell) TPO (1991)
 - Flintshire C.C. (Community of Holywell) TPO No.177 (2008)
- 2.4 Dwg. no. NT10144/003 (Site Appraisal) illustrates the principal existing landscape features of the Site. It should be noted that existing trees are not reliably recorded on the available topographical survey plan upon which the site appraisal drawing is based; several trees are therefore shown only indicatively. Accurate crown spreads of principal trees are shown on dwg. No. NT10144/005 but precise locations of these and other trees included therein should be verified by site measurement.
- 2.5 The wider Hospital Site has a broadly north east facing aspect and rises some 45 metres from around 140m AOD on the Old Chester Road frontage to just over 185m AOD in the south west extremities. It consists essentially of two distinctively separate areas: the lower, more gentle eastern slopes largely occupied by the hospital buildings, and the steeply sloping narrow area of undeveloped grassland to the west. The application area is confined to the eastern and lower western slopes. Due to the pronounced landform and relatively large scale of the buildings the site is prominent in views from the east.
- 2.6 The now disused hospital premises represent a range of historical architectural styles and building materials. The original late Georgian workhouse dates from 1838; it and later additions, including the adjacent Victorian chapel, are stone built and enjoy Grade II listed building status. The 1913 Edwardian infirmary wing is built of brick and also has architectural merit. Various modern extensions and additions, however, have little to commend them and seriously detract from the visual quality of the historic structures.
- 2.7 Unlike the historic buildings themselves, their immediate surroundings are uninspiring and consist largely of nondescript tarmacadam and grass surfaces of indifferent standard. The inner courtyards of the former workhouse are particularly unattractive. There are few planted features, although a single mature tree close to the chapel and a further group in the south eastern corner are visually significant. An evergreen coniferous hedge on the boundary with "The Beeches", an adjacent residential development, fulfils a useful screening function. The north western boundary is defined by an interesting limestone wall. The hospital grounds generally are



characterised by an absence of effective maintenance and the overall impression is one of neglect.

- 2.8 The former agricultural grassland rising above the developed part of the Hospital Site retains the flavour of its original rural character but is now also suffering from lack of management. It is unkempt and partly overgrown with patches of scrub vegetation, one of which has developed around the remains of a reported disused lead mining facility on the highest ground at the south west end. Tree planting on the western boundary adjacent to the B5121 road is a major contributor to the perceived amenity value of the wider site; it provides a visual link with the wooded escarpment slope beyond. Impressive panoramic outward views over the Dee Estuary and Wirral are available from the upper levels of the hillside.
- 2.9 Broadleaf trees typical of calcareous soil districts predominate in planting although there are some evergreen coniferous species present, notably Yew and Cypress. Mature trees are almost entirely confined to the periphery of the Hospital Site but do have some visual significance as components of the landscape context. Their value is collective rather than specific; no single specimen has particular intrinsic quality. Existing tree planting on site is mostly in declining condition as demonstrated by the arboricultural assessment.

3. PROPOSED DEVELOPMENT

- 3.1 Architectural plans and elevations showing the proposed scheme in detail are available separately. Wardell Armstrong dwg. no. NT10144/006 (Landscape Masterplan) is based on the layout shown on dwg. no. 0708.08.02 prepared by SPACE Designed Solutions Ltd. It also defines the proposed development area within the overall hospital site.
- 3.2 The scheme comprises a residential redevelopment of part of the Hospital Site combining refurbishment of the former workhouse and infirmary with additional new build property to provide a total of 69 housing units. Demolition and clearance of all of the more modern hospital buildings is intended.
- 3.3 The historic buildings are converted to a mix of individual houses and apartments with minimal change in external appearance. Townhouse accommodation in contrasting contemporary style is stepped into the hillside west of the workhouse buildings whilst a group of modest terraced houses occupies the lower ground on the Old Chester Road frontage. The rear and end elevations of the terrace will be brick built to reflect the style and materials of the infirmary building nearby.



- 3.4 Topography is a significant constraint in the context of both building works and access options. The scheme design aims, however, to minimise cut and fill operations and the extent of retaining structures.
- 3.5 Complementary external works are an important aspect of the scheme, not only aesthetically but also to enable the site to function effectively. The conceptual design approach to external spaces is described below but more detailed development of principles will be required as the scheme progresses towards construction.

4. DESIGN OBJECTIVES

- 4.1 The landscape masterplan (dwg. no. NT10144/006) builds on the architectural concept of blending conservation of the historic fabric with the addition of contemporary new build elements. Layout of external spaces will support the creation of localised neighbourhoods with distinctive identity whilst at the same time unifying potentially disparate buildings through, for example, a consistent theme in the use of materials.
- 4.2 The scheme aims to introduce high quality hard and soft landscape which reflects the architectural value and character of the development without competing with it. Simplicity will be the key to external works treatment. A limited range of surfacing and plant materials is envisaged; unit pavings and laying patterns will be at a scale appropriate to a domestic environment.

5. GREEN AREAS

- 5.1 Built development is complemented by a series of grassed and planted features which will assist internal integration as well as integration with the surrounding area by filtering in the green characteristics of the site context.
- 5.2 Soft landscape has an important visual function both in determining the amenity value of the development for residents and in mitigating the impact of it on external viewpoints.
- 5.3 Strategic planting of larger specimen trees will ultimately bring form and structure to the development whilst shrub planting provides containment, visual accent, and softening relief from the potential adverse effects of prominent car parking and retaining walls.
- 5.4 The formality of mown lawns contrasts with the meadow grass treatment of the embankment below the former infirmary. This offers the opportunity of habitat enhancement, textural variety, and seasonal floral interest, as well as simplifying the maintenance commitment.



5.5 Existing remnant agricultural grassland in the south western part of the wider site remains largely undisturbed by the proposed scheme and will serve as a passive amenity area for it. This rising ground and its peripheral planting form a significant green backdrop to the built development and will continue to be the major link to countryside beyond the site boundary. There is scope for semi-natural landscape enhancement, particularly supplementary tree planting, which would promote biodiversity but preserve the habitat value identified by ecological survey.

6. PUBLIC AND PRIVATE SPACES

- 6.1 Wherever possible a private garden space is attached to individual dwellings. Elsewhere, and especially in association with apartment conversions of the historic buildings, garden areas are conceived as communal but not public spaces. They have an amenity purpose for the benefit of residents but also function as circulation spaces.
- 6.2 The internal courtyard of the former workhouse will be upgraded for communal use and feature tasteful small unit stone or concrete paving in combination with appropriate ornamental planting. The existing garden area on the Old Chester Road frontage will remain for residents' use although fully restored in a manner which complements the Georgian façade including reintroduction of roadside railings.
- 6.3 External space around the south end of the Edwardian infirmary building also constitutes a communal amenity area although not well defined and merging with the adjacent car park. The lawned terrace on the eastern side affords scenic views over the Dee Estuary but the west elevation is well screened by the tall Cupressocyparis leylandii hedge which is a significant existing feature of the southern site boundary. Informally surfaced level access for pedestrians and occasional emergency or delivery vehicles will be introduced.
- 6.4 Enclosure of garden space is by means of walls, railings, fencing, and hedge planting, alone or in combination and utilising materials and styles sympathetic to their architectural association on site. Spatial harmony will not be sacrificed to considerations of privacy so that some plot boundaries may only be lines of demarcation rather than intrusive visual barriers.
- 6.5 Green areas described above are all intended to function as public open space although active use as such is likely to be very limited.

7. ACCESS AND CIRCULATION

7.1 It is expected that principal internal access roads will be offered for adoption via a section 38 Highways Act agreement. Nevertheless, conventional highway design



standards are not being rigidly applied and preferred surfacing may not be typical throughout.

- 7.2 Block paving or similar may be utilised for vehicle access to historic building areas in recognition of their special character. A shared surface principle is being considered for the southern access road to support integration of new build homes with the infirmary conversion by minimising the divisive influence of 'standard' carriageway construction between the upper and lower levels.
- 7.3 Informality of surfacing will be encouraged in parking provision and areas paved for occasional vehicular traffic. Suitably reinforced bound gravel, surface chippings, cobbles or setts are envisaged. Subject to investigation at the time of demolition, salvage and reuse of original paving materials may be feasible.
- 7.4 Roadside footways adjoining the central access spine will be surfaced in a bituminous material. Pre-cast concrete unit paving will be used for other pedestrian circulation routes. A proprietary crushed stone product would be appropriate in the garden restoration area.
- 7.5 Main site access will continue to be taken from Old Chester Road. Stone piers and walling in conjunction with decorative metal railings will create a "gateway" feature focused on a simple but striking bed of ornamental shrubs. Incorporation of a work of public art at this point would add further emphasis.

8. DRAINAGE

8.1 Surface water drainage will be undertaken in accordance with SUDs principles as far as possible. Permeable paving and rainwater harvesting are feasible but discharge through an attenuation pond is impracticable for reasons of topographical unsuitability and potential safety hazard.

9. TREE PLANTING

- 9.1 Mature and semi-mature trees make a significant collective contribution to the visual amenity of the Hospital Site although this is to an extent dependent upon planting outwith the defined boundary.
- 9.2 The perceived value of existing trees is at variance with the arboricultural assessment which categorises a majority as being unsuitable for retention on a development site.
- 9.3 In the interests of an acceptable built environment some removal of existing trees will be inevitable. Careful consideration will be given to protection and incorporation of



those trees identified as being suitable for retention and which do not unavoidably conflict with proposed building or engineering works.

- 9.4 Most of the existing tree planting within the Application Area is peripheral which is advantageous in that the development does not directly impact upon it. Subject to further risk assessment of specific potential hazards it may be acceptable to retain some of the poor quality boundary trees, particularly those included in the Tree Preservation Orders or identified as having wildlife habitat interest.
- 9.5 Irrespective of their assessment status none of the existing trees on the higher ground in the south west is affected by the development as now proposed. Their amenity contribution is, however, devalued by insensitive surgery work undertaken by the electricity service distributor.
- 9.6 The preferred strategy is to acknowledge the declining condition of existing tree cover, and to embark upon a programme of new and replacement planting. This could be undertaken progressively so as to avoid the adverse effect of immediate widespread removal. Establishment of a younger, healthier range of trees of appropriate species will be a better investment in the long term landscape setting of the development.

10. PLANT SPECIES

10.1 New and replacement tree planting throughout the scheme will emphasise native species present in the locality and will be selected from the following:

Alnus glutinosa Alder Betula pendula Birch Beech Fagus sylvatica Fraxinus excelsior Ash Ilex aquifolium Holly Quercus robur Oak Prunus avium Cherry Sorbus aria Whitebeam Sorbus aucuparia Rowan Taxus baccata Yew

10.2 Specimen trees used as formal structural elements and planted as advanced nursery stock are unlikely to be indigenous and will be selected from these species:

Acer pseudoplatanus Sycamore

Aesculus x carnea Horse Chestnut
Carpinus betulus Hornbeam

Tilia platyphyllos Lime



- 10.3 Where appropriate native shrub species will be included such as hawthorn (*Crataegus monogyna*), blackthorn (*Prunus spinosa*), elder (*Sambucus nigra*), hazel (*Corylus avellana*), goat willow (*Salix caprea*), bramble (*Rubus fruticosus*), and rose (*Rosa canina*). For cosmetic and management reasons, however, shrub planting will mostly consist of introduced ornamental species. Smaller ornamental trees will also be planted in the courtyard and communal garden areas.
- 10.4 Garden hedging is intended to be beech or hornbeam because of their suitability in responding to trimming as compact shapes and dense screens.

11. MANAGEMENT

- 11.1 It is understood that soft landscape work in all external spaces would be completed at the time of initial construction, although with some flexibility to accommodate residents' requirements. Private gardens will be laid as lawns and/or paved areas; planted boundaries will be included where relevant.
- 11.2 Contract maintenance liability would apply for a minimum of twelve months following completion; the period could be extended.
- 11.3 In the longer term, and by arrangement with the Local Authority if necessary, landscape maintenance of public and communal areas is expected to be undertaken by a collective management organisation in order to ensure effective establishment of design components and continuing comprehensive standards of presentation.