



Our ref: 16/3725

Steve Harrington

Via email only
[REDACTED]

Transport for London
Group Planning

Windsor House
42 – 50 Victoria Street
London SW1H 0TL

Phone [REDACTED]
Fax [REDACTED]
www.TfL.gov.uk

29th March 2017

Dear Steve,

Paddington Quarter – access issues

I am writing further to our meeting of 13th February and the discussions we've had since this time on the proposed access road associated with the Paddington Quarter development, adjacent to St Mary's Hospital. At the meeting, we discussed the issues that the Imperial NHS Trust had with the proposals, and following this you submitted to us a review of the road layout carried out on the Trust's behalf by Aecom, dated 16th February.

Within the Aecom review note, 11 suggested improvements to the layout and management of the road were put forward and a summary of these is appended to this letter. We have subsequently discussed these with both Westminster City Council (WCC) and Great Western Developments (GWD). All parties have agreed that recommendations (g), (h) and (i) will be brought forward as part of the detailed design of the road through the Section 278 process. It also appears that recommendation (j) could only be brought forward by the Trust and we have therefore not discussed this further.

Recommendations (c) and (d) would require changes to parking and loading restrictions. As we are not the highway authority for any of the affected roads we do not have the ability to make these changes. However, we have discussed their feasibility further with the council who have advised that they do not consider the number and location of parking bays as being fixed by any planning permission that may be granted. Ultimately, any decision on relocation and retention of parking associated with the GWD proposals will be made by the relevant cabinet member closer to the time of implementation, and they would be happy to consider any representations made by the Trust as part of this process. Similarly, WSP on behalf of GWD have advised that the position of the column referred to in recommendation (d) is not fixed and they will look at relocating it as part of the detailed structural design of the development.

In addition to this, the council and GWD have also confirmed that the hospital will have a role on the transport Steering Group established through the Section 106 agreement. The remit of the Steering Group is to review and improve traffic

management and servicing associated with the GWD development and around the wider area, and GWD will fund the reasonable cost of any measures identified as a result. As such, any issues associated with the construction and operation of the road when it is implemented can also be addressed in this way.

However, as we discussed last week the important question is whether the proposed road layout is safe without these changes being made. We believe this is the case. In line with national guidance a Road Safety Audit of the proposals has been carried out, and the designer's response to this audit has addressed the highlighted issues to our satisfaction. It is a fundamental principle of the Road Safety Audit process that the audit team is independent from the design team, and we can confirm that the auditor was aware that the proposed road will be used both by ambulances and by service vehicles associated with the GWD development and the hospital.

It is noted that of the concerns identified by Aecom, one is the issue of visibility from the service yard onto the proposed road that was also identified as an issue in the safety audit. GWD have demonstrated that through the removal of an on street loading bay from the scheme, visibility splays in accordance with the standards set out in the DfT's Manual for Streets guidance can be achieved. WCC have confirmed that this change would be secured in any approval. We would therefore be interested to understand the technical basis for Aecom's continued concerns.

Similarly, whilst TfL initially shared Aecom's concerns about the capacity of the proposed loading bay within the GWD proposals, this was due to service vehicle trip generation being presented inconsistently within the Transport Assessment. We received clarification from WSP on this point prior to the planning application being considered at committee and we are now satisfied that the loading bay provides sufficient capacity. It will also be proactively managed via a Delivery and Servicing Plan, which would be required by condition and would be enforced by the council. If Aecom disagree with this assessment it would be useful to understand the basis for this. We also believe that in respect of servicing it is relevant to note that the proposals would resolve the current issue of service vehicles reversing along the Arrivals Ramp at Paddington station, blocking Praed Street whilst manoeuvring. This would have wider benefits for the road network and would remove delay for vehicles, including ambulances, currently using Praed Street.

With respect to ongoing discussions over the Section 106 agreement, I appreciate there is a disagreement as to whether the obligations around the GWD offer to construct the hospital's preferred road alignment were secured as mitigation or not. Your views on this are understood (as are WCC and GWD's) but as TfL were not present at planning committee we are not able to comment on this. However, at our meeting on 13th February you explained why partial demolition of buildings or temporary relocation of facilities around the hospital estate to allow land to be made available for the road is not possible. We therefore now understand why the proposed new outpatients building would facilitate construction of the road, and that occupation of this is programmed for 2020, after what would have been the

cut-off date for the Trust to obtain the necessary contracts and consents for construction of the road under the previous Section 106 drafting. As such, we have negotiated with GWD and WCC a revised obligation which would give the Trust until the end of 2021 to do this. In this context, we are unclear why representations are being made that TfL's involvement has resulted in a worse position for the Trust and I would be grateful if this could be clarified.

Please let me know if you would like to discuss any of the points above further, and we would of course be willing to meet with the Trust or their advisors if this would be helpful.

Yours sincerely

Mark Day
Principal Technical Planner
Email: [REDACTED]@tfl.gov.uk
Phone: [REDACTED]

Copy to: GLA, TfL, WCC

Appendix A – Recommendations from Aecom Technical Note, dated 16th February 2017

- (a) Investigate the potential to relocate the entrance to the service yard for Paddington Quarter to the western end of the northern side of the building to create better separation between the northern end of the interim access road and the entry/exit point to the service yard. This will help to increase the level of visibility available from the service yard to other traffic using Winsland Street and London Street and improve forward visibility to the access to the yard.
- (b) Increase the size of the service yard to adequately accommodate the level of demand anticipated and to ensure that no service vehicles would need to wait on street to service the site.
- (c) Remove the parking on the northern side of Winsland Street in the vicinity of where the interim access road meets Winsland Street. This will in turn allow a wider carriageway to be provided around the bend to provide a space for vehicles to wait to turn right into Winsland Street (east) and enable larger vehicles to complete the turning movement without over-hanging into the opposing side of the carriageway.
- (d) Ensure that no obstacles are placed on the south western side of the bend at the northern end of the interim access road to maximise the level of forward visibility achievable. The removal of the northern most parking bay on the western side of the interim access road and the setting back of the northern most column would assist in this.
- (e) The level of parking currently on Winsland Street and the buildings and functions located in the area mean that parking is in heavy demand. The relocation of parking away from the current Outpatients buildings is not considered desirable as this could limit access for mobility impaired patients and neither is the reduction in quantum of parking available. However, the current design for the interim access road includes several areas of concern in relation to parking including parking very close to the junction with Praed Street and at the northern end of the interim access road. To address the issue of parking it is suggested that SPG could investigate the potential for delivering some car parking within their site. This parking could be on a pay and display basis and would potentially facilitate the reduction in parking on roads surrounding the site.
- (f) Visibility from the Winsland Mews junction with the interim access road is likely to be restricted in the proposal due to the alignment of the junction in relation to the current Outpatient buildings. It is recommended that the alignment of the road is adjusted (i.e. the road is moved further west) to ensure sufficient visibility can be achieved.
- (g) The implementation of the interim access road will require the relocation of the bus stop currently located on Praed Street immediately to the east of the junction with London Street. The strategy to split these stops has been agreed with TfL. However, these stops are located in close proximity to the interim access road junction and are therefore likely to restrict visibility from the junction as well as restricting turning movements for larger vehicles.

The bus stops should be placed outside of the visibility zone for the junction.

- (h) Double yellow lines are currently provided on Praed Street in the vicinity of the proposed interim access road junction. The double yellow lines on the southern side of Praed Street have been observed to be used for servicing. It should be ensured that servicing is prohibited throughout the day when the interim access road is likely to be at its busiest to prevent large vehicle movements from being restricted.
- (i) Whilst not shown in the concept design plans it should be ensured that an uncontrolled pedestrian crossing is provided across the interim access road where the road meets Winsland Street to facilitate pedestrian movements to and from the Outpatients Buildings. In addition to this, the footway on the southern side of Winsland Street to the east of the interim access road should be widened to a minimum width of two metres to provide a suitable pedestrian route between Paddington Station in the west and the Outpatients Buildings.
- (j) Servicing of the linen store for the hospital currently takes place on Winsland Street through the use of 10m rigid vehicles. These vehicles have to reverse down Winsland Street in order to exit in a forward gear. The proposed interim access road will make reversing down Winsland Street more difficult and it is therefore recommended that linen deliveries are undertaken using smaller vehicles that could enter and exit Winsland Street in a forward gear.
- (k) An offset as small as 0.587m is shown between the interim access road and the rear of the Outpatients Building. Large vehicles turning between Winsland Street and the interim access road may overhang the threshold on the eastern side of the interim access road risking collision with the building. The interim access road should be realigned and the width of the threshold increased to reduce the likelihood of vehicle strikes with the building.