



Whipps Cross Hospital Redevelopment

September 2020



Press Release Sept 2020



Nurses Flats to be demolished - proposed new site for hospital

WALTHAM FOREST CIVIC SOCIETY

AN ALTERNATIVE VISION FOR THE WHIPPS CROSS HOSPITAL BUILDINGS AND SITE

1. We welcome the news that there may be funding to allow new facilities at Whipps Cross so that it will no longer be necessary to use buildings dating from 1900-3 and 1936-7 for hospital purposes.
2. Our vision is for the whole site to be planned in two parts:
 - The NW part to provide an appropriate setting for the striking Victorian buildings of the West Ham Infirmary. The Victorian buildings themselves would be converted for residential use, and blocks of high-class flats would be built to complement the Victorian buildings.
 - The SE part (the remainder of the site) to receive a modern main hospital building of 5 or 6 storeys, and a lower link building to connect this main building to the present A&E department building. By retaining some modern existing buildings, this would be a predominantly low-rise hospital, with a large enclosed garden, and there would be some space for future hospital buildings as and when required.
 - What we propose will avoid damage to the amenity of the area, including the amenity of Epping Forest land.
3. In setting out our vision for the site, we do not wish to enter into debate on medical matters such as the number of hospital beds which may be needed. In what we have written, we are concerned with the buildings and landscape of the area where we live.

The Victorian buildings and their setting

4. The pavilions of the West Ham Infirmary and also the steep-roofed and towered administrative building in the centre of the Victorian buildings have a strong and distinctive character, and we believe they could be made very attractive. (One of us has in mind what has been done with the former Holloway Sanatorium at Virginia Water, and another of us what has been made of the former mental hospital at Friern Barnet. Locally, a fine example is the conversion of the former Claybury Hospital, now Repton Park.)
5. We hope that the infill in the pavilions (which can be seen as being cream-coloured in contrast to the Victorian red brick) will be taken out. We also hope to see the low buildings which at the moment stick out from the NW front of the Victorian buildings to form the present main entrance to the hospital, and the low buildings which at the moment fill the area to the SW of the administrative building, and also some of the other additions built on to the Victorian buildings, all removed.
6. We would wish to see steps taken to enhance the views of the Victorian buildings from the site, other than where we will suggest that modern hospital buildings should be retained. We would like to see gardens before the NW front of the Victorian buildings and in the area SW of the administrative building between the two pavilion blocks. We suggest that these should be not grassed park areas but intensively cultivated ornamental gardens in a Victorian style. The solid red brickwork of the Victorian buildings needs to be complemented by the patterns and bright and variegated colours

of Victorian planting; we think this will be especially true for the sheer SW front of the administrative building.

7. We are conscious of the need to provide housing in the Borough, although (as we will explain below) we are concerned that this site should not be over-developed. We propose the conversion of the Victorian buildings (with the possible exceptions of the chapel and board room) into flats, and the construction of long blocks of flats on the same axis as the Victorian buildings, to the NE of the Victorian buildings (roughly on the site of the "Doctor's Villa" and the present Nursery) and to the SW (roughly on the site of the Nurses Block and of the car park in front of the Nurses Block).
8. We are not architects, but we offer some suggestions on the detail of what we are proposing:
 - We think it should be possible (with ceilings at a standard modern height) to build four floors and a low pitched roof while remaining below the level of the main body of the Victorian buildings.
 - We would suggest blocks of flats of about the same length in the NW/SE axis as the Victorian buildings but with their NW ends projecting past the NW front of the Victorian buildings as near as reasonably possible to the NW boundary of the site, while leaving space for a roadway at the NW boundary (roughly where the roadway is now). This should allow the SE ends of the blocks of flats to stop short of the present Eye Department to the SW of the Victorian block and the present detached A&E Department building to the NE of the Victorian block.
 - Thus, the NW ends of the blocks of flats, together with the NW front of the Victorian buildings, would form a three-sided court, enclosing the garden which we have suggested for this location.
 - If possible, we would suggest that the SW end of the roadway access from the Whipps Cross Road into the site should be moved slightly North, to make more space for the NW end of the block of flats to the NE of the Victorian buildings
 - The area on the NE side of the Victorian buildings is not wide, and we would propose a block of flats only one flat deep, which will allow the flats to have dual aspects and so permit ventilation by a through breeze.
 - The area on the SW side of the Victorian buildings is wider. Rather than one solid block of flats, we would suggest two or even three parallel blocks, each on a NW-SE axis parallel to the axis of the Victorian buildings, with gaps between to allow dual-aspect flats.
9. We are also conscious of the need for the Victorian buildings to be maintained in good order. This, and the gardens we are proposing (which would need to be planted out with bedding plants each year) will require ongoing funding.
 - At present the local authority has recognised the character and importance of the Victorian buildings by a local listing. We expect that when they are no longer in use for hospital purposes the Victorian buildings will be included in the statutory List, and we think a grade II* Listing might be appropriate.
 - One of us has first-hand experience of how a local authority which was disposing of a Listed building for division into flats ensured the proper

maintenance of the building for the future. The developer was permitted to build to a limited extent in the grounds of the Listed building (in that case, a row of small houses) but the arrangement was that after the development was completed and the flats and the small houses had been sold off on long leases, the freehold of the whole estate was conveyed to a single management company owned by the leaseholders.

- The management company would be under a legal duty to maintain the Listed building in good order and would be able to raise the necessary funds by levying service charges on the leaseholders (not only on the flats in the Listed building but on those in the other buildings on the estate).
- We trust that there will be reasonable access for pedestrians to view the exterior of the Victorian buildings during daylight hours, and if the chapel were to be retained, that it would be open to visitors, at least at the Open House weekend in September each year.

The remaining area: buildings for hospital purposes

10. As a Civic Society we have to be concerned with the use of the land at the site. We do not wish to differ from the NHS Trust on medical matters, but the Outpatients Department (including the Eye Department) and the A&E building are modern buildings very similar in age and general style to the buildings of the Homerton Hospital, and we find it hard to believe that these are no longer suitable for use.
11. We suspect that it is the (supposed) need to rebuild the whole of the hospital facilities which has led to the (supposed) need to sell off about eight-ninths of the present site.¹ We submit that the blocks of flats which we have proposed would provide a substantial contribution to the need for housing in the Borough, and that the cost of the more modest rebuilding of hospital facilities which we would envisage could be met from the funding to be expected from central government, together with the proceeds of selling the Victorian buildings and the land to each side of them for a high-class residential development..
12. We understand that all the scenarios which have been considered by Barts Health involve building on a site other than the main existing hospital buildings, so that almost all the present hospital facilities can continue to be used while building work is in progress, and we appreciate the importance of this.
13. We suggest that to replace the hospital facilities at present in the Victorian and 1930's buildings (and possibly also the Maternity building) a substantial hospital building of five or six storeys ("the new Main Building") be constructed on the "James Lane Site" -- - that is, roughly, the block bounded by James Lane, Hospital Road, Margaret Road and Back Road (including the present ambulance station) – and also a lower building roughly on the present car park NE of the 1930's buildings ("the new Link Building"), which would join the N corner of the new Main Building to the present A&E building. (It might be possible for the new Link Building to house those facilities which need to be close to the A&E department and which are at present located within the Victorian buildings.)
14. We also have some more detailed suggestions:

¹ We trust that land at Whipps Cross will not be sold off simply in order to pay off part of the debts which the Barts Health NHS Trust incurred before the merger by which Barts Health absorbed Whipps Cross Hospital.

- It is important that all the remaining area be planned as one whole, with a master plan including not only the new hospital buildings and the buildings to be retained but the garden space, the car parks, and the spaces where future buildings may be located. There should be no repeat of the present higgledy-piggledy infill of the site.
- We would expect the new Main Building to house the main surgical wards and operating theatres. We recognise the desirability of having these “stacked” one above another, so that surgical patients can be moved to theatre and back to the wards by lifts, without needing to be wheeled along long corridors.
- We would expect the new main entrance to the hospital to be from James Lane into the new Main Building, and we would hope that the new Main Building would have a substantial presence towards James Lane.
- The front of the new Main Building might be set back slightly from the roadway of James Lane, in the same sort of way as the front of the Chelsea and Westminster Hospital on Fulham Road, to allow a space for vehicles including the W15 and W19 buses to pull off James Lane while dropping off passengers.
- We would suggest a multi-storey car park to the SW of the new Main Building, roughly on the site of the present car park to the SW of Hospital Road by James Lane, and possibly another multi-storey to the NE of the new Main Building, so as to provide adequate parking for hospital staff, visitors and outpatients. Both these suggested car parks would front directly onto James Lane.
- When the new buildings are completed the 1930’s building can be cleared and its site grassed over as a park or garden space for hospital users (hopefully with some low-maintenance flower beds and perhaps a fountain).
- This garden space would be roughly enclosed by the new Main Building, the new Link Building, the SE front of the Victorian buildings, and the existing Outpatients building.
- We believe that access to a garden, and views over a garden from wards, would be a benefit to patients and assist their recovery, and also to hospital visitors and staff.
- The access for ambulances to A&E should be to an ambulance entrance on the NE side of the existing A&E building or of the new Link Building, so as to keep vehicles out of the proposed garden space (and also avoid ambulances interfering with the amenity of the flats in the Victorian buildings).
- We understand that there has in the past been a proposal for an access road to the site from the Whipps Cross Road at a point roughly half-way along the site (and so, about opposite the A&E building). We do not know what stage this proposal reached and whether it would be allowed to make a new access road across the strip of Epping Forest land to the NE of the hospital site. If that is allowed, then it should be possible to use this new road for access for ambulances. If this road were extended roughly along the line of the present Back Road, and made wide enough for two-way traffic then the W15 and W19 buses which now pass through the present hospital site could be routed along this road with stops outside the new main entrance to the hospital in James Lane and outside the A&E department.

15. We expect that one result of what we propose would be that the NHS would retain some spare land to the SW and NE of the buildings which would be in use for hospital purposes. We think that this is desirable to meet possible future needs. In particular:
- The Covid-19 pandemic has drawn attention to the possibility that (as in the days of TB hospitals) a separate building with isolation wards may be needed in the future.
 - In relation to elderly patients in particular, the need to free up acute hospital beds may have to be met by allowing an acute hospital Trust to build and operate its own nursing home (or “cottage hospital”) into which patients no longer needing an acute bed could be moved while suitable permanent accommodation (or suitable arrangements to enable them to return home) were being found.
 - One of us has been a Governor of the South London and Maudsley NHS Foundation Trust, and is conscious how much that Trust has benefited from having large sites at the Maudsley and Royal Bethlem Hospitals, where additional buildings can be put up as required by changing needs.
 - He is also aware of the benefits to be derived from having mental health facilities and acute hospitals closely related in the way that the Maudsley Hospital is just across the road from King’s College Hospital.

The wider context

16. Another result of what we propose is that the highest new construction on the site would be the new Main Building of five or six storeys, which would be at the lower end of the site. We think that this is important:
- The current Pevsner Architectural Guide to East London refers to the “*striking roofline*” of the Victorian buildings.² As one looks from the centre of Leytonstone (for instance, from Gainsborough Road by the footbridge) across the valley of the Fillebrook stream (and now, of the A12) the tops of the “towers” of the Victorian buildings at Whipps Cross are a feature on the horizon. That feature should not be eclipsed by tall buildings blocking the view or dwarfing the “towers” on the skyline.
 - Most of the area of Forest land between the Whipps Cross Road and the Snaresbrook Road is relatively open, although the fringe between the Hollow Ponds and the Whipps Cross Road is quite heavily wooded. The view from the Hollow Ponds and this open area of Forest land should not be affected by tall buildings poking up above the wooded fringe in the way that when one looks from the open area of Wanstead Flats west of Lake House Road, the building now known as Belgrave Heights sticks out above the trees of Bush Wood.
17. At least one of us would have welcomed an opportunity to consider the use of the Whipps Cross site together with the strip of Forest land to the SW of the Whipps Cross Road and directly adjacent to the site. In particular, it might have been worth considering moving the Forest car parks which at the moment are on the NE side of the Whipps Cross Road to this strip and building one or more “green bridges” (as at

² Bridget Cherry, Charles O’Brien and Nikolaus Pevsner *The Buildings of England: London 5, East* (New Haven: Yale University Press, 2005), page 738.