

21-6-10

FAO-Planning Policy

From: Mavis Peto

1 X slip

Tel: 8392102

6X pages

Re: Core Strategy Consultation

Planning Policy Team
639 High Road, N17 8BD
21-6-10

Mario Petrov

Re: Core Strategy Consultation

Site Allocation DPD

Page 17, St Ann's Hospital

It is incorrect to describe the current use of the site as 'predominantly mental & sexual health facilities'.

The facilities providing services include: dental, physiotherapy, audiology, X-ray (NMUH), child development centre (GOSH), wheelchair services, outpatient speech & language therapy (for adults), family planning, & numerous inpatient rehabilitation... See attached map.

Therefore the current use should read, 'mental & general health services'.

The options ought to include allotments & city-farm as two additional & separate options, since these two options were favoured above housing, education & retail options by residents as demonstrated by the attached survey.

In respect of the survey I request that the references to residential & educational uses be deleted, & that the reference to St Ann's Hospital is relocated in the site allocation DPD to the section for sites suitable for community/commercial/employment development.

Core Strategy

Pages 166, 167 - SP14

Page 166, 7-1-18 refers to St Ann's hospital, but the map on page 167 illogically shows the hospital as a health centre.

Although on page 210, 'Key infrastructure programmes & projects' (core strategy), St Ann's hospital is referred to as, 'a potential site for a new health centre in South Havering', this may or may not be realised.

As the site has been ^{& is} established as a hospital since 1892, the map on page 167 should indicate that fact.

Cove Strategy

Page 142, SP12, G-2.1

At G-2.1 the historic environment record lists 34 local historic green spaces. This number is likely to increase to 35 so to include St Ann's Hospital as some planting of trees & gardens occurred before 1935. The attached joint report from the BETHHT (Council of the site) & Haringey TACT confirms this part of the site's history. And the attached letter from the London Parks & Garden Trust affirms the site is of interest.

The above list also refers to 22 archaeological priority areas. This ought to be increased to 25 to include the St Ann's/Green Lanes junction, St Ann's Hospital, & the St Ann's Road & Hermitage Road jct.

Firk's History of Tottenham 1923 on page 35 refers to the area around the St Ann's Road/Green Lanes jct as, 'a spot anciently called Beane Green'. As far as I know it was a cross-roads & a meeting place significantly predating the medieval era.

On page 37 of his book, Firk informs us that St Ann's Hospital occupies a site formerly known as St John's farm, which name comes from the order of knights of St John of Jerusalem. He also refers to various documents, one dated 1467 mentions the Prioress of Clekenwell holding the land - is the Holy Cross buried somewhere under the St Ann's site?

On page 40 of Firk's history we are told that in about 1303 a hermit living near what today is the St Ann's Road/Hermitage Road jct, "caused gravel to be digged in the top of Highgate Hill... & therewith made a causeway from Highgate to Islington."

It is very important to list the areas of archaeological importance in the local area. Table 1 in the development management policies, pages 90-93 should be amended to reflect this. As should ^{all} other references also be modified.

yours sincerely
M Petrov

HEALTH SURVEY**Ten Questions on the Future of the St Ann's Hospital Site**

Collected in 2007 from 68 respondents in response to the St. Ann's SOC 2006, statements made by the MHT, the PCT, the Council, the NDC, various reports & meetings, & the government's & the DOH's actions - see Q1&Q2. Please give your name and address or your answers will not count.



Name The figure below the "Q" number Address represents the number of people who answered the question. The figure before the % figure is the number of people who chose that option. Q10 is a multiple choice question. Thus the Tel total number of answers do not tally Email with the 67 people who answered it.
Please tick boxes as appropriate.

Q1 62	When ownership of the St Ann's General Hospital site was given to Barnet, Enfield and Haringey Mental Health Trust by the Secretary of State for Health in 2001 were you: a) Aware <input type="checkbox"/> b) Informed <input type="checkbox"/> c) Consulted <input type="checkbox"/> d) None of the preceding options <input type="checkbox"/> Comment: a) 5 = 8.1% b) 1 = 1.6% c) 0 d) 56 = 90.3%
Q2 59	When and how did you learn about it? a) Before it was given to the Mental Health Trust <input type="checkbox"/> a) 1 = 1.69% b) After it was given to the Mental Health Trust <input type="checkbox"/> b) 24 = 40.67% c) I didn't know until I read this health survey <input type="checkbox"/> c) 34 = 57.64% Please comment how you found out:
Q3 64	Do you know that the Mental Health Trust is now planning to develop the St Ann's Hospital site? a) Yes <input type="checkbox"/> b) No <input type="checkbox"/> Comment: a) 37 = 57.8% b) 27 = 42.2%
Q4 65	Do you know what the plan is? a) Yes <input type="checkbox"/> b) No <input type="checkbox"/> Comment: a) 11 = 16.92% b) 54 = 83.08%
Q5 61	The plan considered 5 main options. The Mental Health Trust's favourite option is to demolish most, if not all, of the buildings and build a new mental health facility. The current general hospital services have already been reduced and if the plan goes ahead the remaining general services will be relocated or cut. Much of the land will be sold off for housing and some of it may be used for education and retail. Do you agree with the Mental Health Trust's plan? a) Yes <input type="checkbox"/> b) No <input type="checkbox"/> Comment: a) 2 = 3.28% b) 59 = 96.72%
Q6 61	Haringey Council and the Bridge NDC want to redevelop the land the Mental Health Trust wants to sell and build homes, and perhaps, a school and shops. Do you agree? a) Yes <input type="checkbox"/> b) No <input type="checkbox"/> Comment: a) 2 = 3.28% b) 59 = 96.72%
Q7 64	Local people want all of the St Ann's Hospital site to be used for health provision and to offer a broad range of primary and community health services, including mental health. Do you agree? a) Yes <input type="checkbox"/> b) No <input type="checkbox"/> Comment: a) 62 = 96.87% b) 2 = 3.13%
Q8 61	The Mental Health Trust claims that St Ann's Hospital suffers from poor transport links. Local people believe it enjoys near excellent transport links. What do you think? a) Poor <input type="checkbox"/> b) Fair <input type="checkbox"/> c) Good <input type="checkbox"/> d) Excellent <input type="checkbox"/> Comment: a) 5 = 8.2% b) 21 = 34.4% c) 20 = 32.8% d) 15 = 24.6%
Q9 44	The Mental Health Trust claims the current buildings are 'unfit for purpose' but local people believe they are! What is your view? a) Fit for purpose <input type="checkbox"/> b) Unfit for purpose <input type="checkbox"/> Comment: a) 36 = 81.8% b) 8 = 18.2%
Q10 67	The St Ann's Hospital site is 29 acres. It is thought that less than 10 acres may or may not remain for health provision once St Ann's is developed. In comparison, the Whittington Hospital is 11.3 acres, and North Middlesex is 22.5 acres (after completion of the £111 million new N. Mid in 2010 the site will be reduced to 15.75 acres). What would you like to see on the St Ann's Hospital site? a) Mental Health facility <input type="checkbox"/> e) Housing and Education <input type="checkbox"/> b) General Hospital <input type="checkbox"/> f) Housing, Education and Retail <input type="checkbox"/> c) Mental Health and General Hospital <input type="checkbox"/> g) City Farm <input type="checkbox"/> d) Housing <input type="checkbox"/> h) Allotments <input type="checkbox"/> Comment: a) 27 = 40.29% c) 42 = 62.68% e) 2 = 2.98% g) 15 = 26.86% b) 35 = 52.23% d) 4 = 5.97% f) 4 = 5.97% h) 15 = 22.38%

Please return to: The Save St Ann's Hospital Campaign Group, PO Box 45129, London, N15 3XF

Haringey NHS
Teaching Primary Care Trust

Barnet, Enfield and Haringey NHS
Mental Health NHS Trust

**DEVELOPMENT OF MENTAL HEALTH SERVICES IN HARINGEY
AND THE REDEVELOPMENT OF ST ANN'S HOSPITAL**

UPDATE PAPER FOR HARINGEY OSC MEETING ON 10 SEPTEMBER 2008

1. INTRODUCTION

This is a joint paper from the Mental Health Trust (MHT) and the Teaching Primary Care Trust (TPCT), who, together with the local authority, are leading the development of mental health services in Haringey, which will include the redevelopment of the St Ann's Hospital site.

The paper sets out the history of the site, the background to the current work and outlines the current thinking on how to take things forward. It has been developed further from the original paper prepared the Overview and Scrutiny Committee (OSC) meeting on 28 July.

2. HISTORY OF THE ST ANN'S SITE

It is recognised that the St Ann's site is regarded as an important public asset by local stakeholders, who have a strong interest in its future. St Ann's has been serving the people of South Tottenham since 1892, when a scarlet fever epidemic spread across the capital. The result was the establishment of the North Eastern Fever Hospital by the Metropolitan Asylums Board. The hospital opened in October 1892, and contained 500 beds for patients suffering from scarlet fever and diphtheria.

When the Asylums Board was disestablished in 1929, it came under the administration of the London County Council. The Council had an arboretum in Surrey, which produced exotic trees; many of these were planted on the St Ann's site and are still there today.

In 1935, the site expanded with permanent brick wards opening including H Block, G Block and the block of main wards. The Psychiatric Day Unit and the St Ann's Sexual Health Centre opened, and the fitters workshop was built. It continued to serve as an isolation hospital, coping with two major epidemics in the 1940s.

In 1948, under the newly created National Health Service, it took on the name of St Ann's General Hospital and was taken over by the Tottenham Group Hospital Management Committee. In August 1949, the nature of the hospital began to change with the opening of the first Chronic Sick Ward. Further wards were built and a full rehabilitation service was instituted with the development of the Physiotherapy and Occupational Therapy Departments.

By 1973, the hospital housed a wide range of services including surgical theatres, psychiatric day unit, a varicose veins clinic, and geriatric day hospital. In 1974, responsibility for the hospital passed to the newly established Haringey Health Authority. Since then, the emphasis of the hospital has changed to focus on community based care.

Sally Williams

From: "Sally Williams" <sally.williams2@virgin.net>
To: <ldf@haringey.gov.uk>
Cc: <Vernon Farmer@haringey.gov.uk>; "chris sumner" <chris.sumner.kew@btinternet.com>
Sent: 18 June 2010 19:02
Subject: Haringey Core Strategy Proposed Submission 2010
To whom it may concern:

St Ann's Hospital (formerly North Eastern Fever Hospital, 1892), St Ann's Road, N15
I work with the London Parks & Gardens Trust, particularly having responsibility for its Inventory of Historic Green Spaces and in respect of this work I have in the past been in contact with officers in your Conservation Team.

It has been drawn to our attention that the St Ann's Hospital site in St Ann's Road, coming within the Seven Sisters Corridor, is proposed as potential land for major housing development as part of the Council's Housing Strategy in the Haringey Core Strategy Proposed Submission 2010. We are in the process of investigating the historic importance of this site with a view to including it in the Inventory, as there are interesting references to the earlier landscape in such publications as Mr Fisk's History of Tottenham of the 1920s.

At present the Inventory includes 47 sites of local historic interest in Haringey (in addition to the two listed on the English Heritage National Register), the majority of which are those on your own Local List referred to in Haringey Unitary Development Plan: July 2008 under OS7 Historic Parks, Gardens and Landscapes. On page 127 of that document, 8.24 cross references the list of these sites in Schedule 13 and notes the need to ensure that, while this brings no additional statutory protection, the Council will take account of the historic interest of a site when determining applications for development.

The Inventory is a constantly evolving record, which we are currently converting into a publicly accessible website, *London Gardens Online*. In discussion with English Heritage, the sites therein are also in the process of being included on the Historic Environment Record of heritage assets. The Trust has an active Research Group, members of which undertake detailed investigation into existing and potential new sites for the Inventory, as a result of which, for example, a number of historic almshouse gardens in Haringey were added a few years ago. If I may, I will keep you informed regarding results of our research into St Ann's Hospital, but in the meantime, if it would be of interest, I could forward you a copy of the current Inventory for Haringey.

Yours,
Sally Williams
Keeper/London Parks & Gardens Trust Inventory
Tel 020 7377 1877 (no ansaphone)
Mobile 07913 425352
www.londongardensonline.com.uk

18/06/2010

21-6-10 FAO - Planning Policy Team
Core Strategy Consultation
1 X Slip
6 X pages

Planning Policy Team
639 High Road, N17
21-6-10

Mario Petrov
Po Box 45129
London, N15 3XP

Re: submission to core strategy consultation

I should like to be informed about the examination on the core strategy, to take part if possible, & to be given a copy of the subsequent report.

Development Management Policies DPD

Page 15, DMAP4, Housing Conversions, b), lists roads & areas which the council will not permit conversion of single family dwellings. Salisbury Road N4, in particular, & St Ann's ward, as a whole, should be included on the list.

Policy HSG6, c), in the UDP denies planning permission in streets with HMO/conversion rates of over 20%. The lists of streets & areas in policy HSG11, also in the UDP, is identical to the list shown in DMAP4.

Salisbury Road is in St Ann's ward, &, as shown by the attached survey, had a HMO/conversion rate of more than 60% in 2005.

The core strategy informs us on page 41, 1.4.5, that St Ann's ward had the highest number of national insurance registrations from migrants between 2006-2008.

Core Strategy

The core strategy at page 14, 1.3.1, informs us that Haringey is home for 230,000 people. The DMAP DPD on page 11, 2.1, shows a projected 15% increase of pop. to a very precise 260,305 by 2026.

However, the ONS's figures for Haringey were seriously questioned by the former leader of the council for being too low (letter attached). At the time it was extensively reported that there were over 300,000 people registered on GPs patient lists!

The true number of people living in Haringey is (I & many others believe) woefully under-counted.

As the population figure is a fundamental base line for use to assess & plan for the borough's needs & infrastructure, it is a very serious cause of concern that the sustainability appraisal & the

environmental impact assessment have not tested the accuracy of the pop. figures, but have instead supported more & higher density development, based on the ONS's flawed lower population figures.

I should like to see the following qualifying statement attached to all statements in all documents in Havering's LDF to do with population numbers, "There is some evidence which suggests the actual population figure is much higher."

It is with regret that I have to report that I have provided details of such concern with no avail to the core strategy issues & options consultation Dec. 2007, the SA of the core strategy & housing SPD 2008, the core strategy preferred options consultation May 2009, the Havering housing strategy consultation 2009, the SA of the core strategy 2009.

Core Strategy

Page 72, SP1, Seven Sisters Corridor

I object to the inference at 3.1.35 that the area as a whole has failed to maximise St. Louis hospital's potential for development, & request it be deleted from the text.

I also object to 3.1.36, specifically to the North London Strategic Alliance's determination of St. Louis hospital, which is the local community's valuable resource. Local people should have been consulted prior to the commissioning of a study.

Core Strategy

Page 81, SP2, I object to the presumptuous inclusion of St. Louis hospital on the housing map. The reference to St. Louis hospital should be deleted.

Yours Sincerely

M Petrov

NOTE I live in a small, 3 bedroom, two storey terraced house on St. Ann's rd. The houses to my immediate right & left are individually single dwellings. But 6 & 8 single people respectively, have been living there.

Salisbury road N4 - Rate of HMO's & Conversions

Salisbury rd is located in the ward of St. Ann's at the cusp with the of Haringay.

A one-way road, traffic flows from east to west from its jet with St. Ann's towards its jet with Green Lanes.

No other thoroughfares or public pathways lead into or out of it.

16 two storey, terraced houses line the north side of the road & 26 one storey terraced houses line the opposite south side of the road.

On the north side only 6 houses out of 16 have single bells, equating to 37.5%. The % on the south side is surprisingly similar at 38.47% with just 10 out of the 26 having a single bell!

From a total of 42 houses 16 have a single bell or 38.1%.

Survey Table - visually counted on 10-2-05 * Horse no. 31 is

North Side Horse No.	Number of Bells	South Side Horse No.	Number of Bells	Notes
1	1	2	1	
2	3	4	1	* Horse no. 34 has been counted as a single bell house
3	5	6	2	* Horse no. 34 has been undergoing substantial building work for some time
4	7	8	1	& has 7 ft + high fencing around the front garden's outside perimeter
5	9	10	8	For the purpose of this survey it has been counted as a single bell house, although
6	11	12	2	indications are that it will end up with a double bell when finished.
7	13	14	2	* Horse NO. 36 has two auras of bells, one on each side of the house
8	15	16	2	away has 5 bells the other 2.
9	17	18	3	
10	19	20	3	
11	21	22	3	
12	23	24	1	
13	25	26	1	
14	27	28	1	On the North side between No. 31 & 32 with St. Ann's rd is a belled intercom system which does not feature a horse number
15	29	30	1	It's ambiguous as to whether it leads into residential space above the shops (that primarily wraps around St. Ann's rd) or is used to access the shops storeroom (or both purposes)
16	31*	32	1	It has not been counted in this survey
17		34*	1	
18		36*	5+7	
19		38	1	
20		40	1	
21		42	2	
22		44	2	
23		46	3	
24		48	3	
25		50	3	
26		52	2	

UDP, Policy HSG6, b) - no more than 20% of houses in any one street being HMO's &/ or Conversions

HARINGEY COUNCIL**Leader's Office**

Room 1.11, Civic Centre, High Road, Wood Green, London N22 8LE
Tel: 020 8489 2964 Fax: 020 8481 5218

www.haringey.gov.uk

Len Cook

Director of the Office for National Statistics

1 Drummond Gate

London SW1V2QQ

23 April 2008

Dear Mr Cook,

Accuracy of the 2001 Census

I am writing to express the concern of my authority with the results from the 2001 Census.

In common with several other London local authorities the adjustments to the 2001 Mid Year Estimates (MYEs) as a result of the 2001 Census have resulted in a significant reduction in Haringey's figures in comparison with the previous estimate for 2000. This has had a major impact on the Council's finances. Had the previous mid-year population estimates been used in the 2003/4 local government finance settlement, this Council, one of the most deprived in England, would have received almost £5m more. This makes each person included in Haringey's estimates worth almost £800 and inaccuracies in the Mid Year Estimates very expensive.

Furthermore, these reduced estimates may well also result in a loss of funding from other sources that use population estimates as a component of the funding calculation and for other local public agencies. For example, the Chairman of the Board of the Haringey (Teaching) Primary Care NHS Trust has also expressed his concern at the detrimental impact of applying Census results to the NHS's funding levels for GP practices.

Haringey Council is concerned that the way the Mid Year Estimates were calculated has not proved robust and this has resulted in ONS making such a large adjustment between 2000 and 2001. ONS assertion that the mid year estimates have been inaccurate for a decade doesn't help the Council with the practical issues of the discontinuity in funding allocations based on 2000 and 2001 estimates and in other aspects of service planning based on these estimates. The Council is anxious to know what changes you are putting in place in the methodology for producing the Mid Year Estimates to improve their reliability and so avoid this happening in future.

Underlying our concern with the effects of the Census results on the MYEs and local public finances, is doubt about the accuracy of the Census. In particular with the people who were missed from the survey, whether and how their omission was compensated for and the bias that may arise in the results as a result.

As you will be aware Haringey has one of the largest proportions of people from minority ethnic communities in the country and a wide variety of languages are commonly spoken locally making many people difficult to contact. We also have a relatively large number of asylum seekers, both placed by public bodies and those who have chosen to make their own arrangements. Given the large local BME and asylum seeking communities, it would be surprising if the Borough was not also home to a relatively large number of asylum seekers who have not left, who have returned to London after dispersal, who have overstayed visitor visas or even entered illegally. The potential total of these groups who may well seek to avoid contact with Census officials, is certainly not significantly less than the 8,300 out from the MYE in 2001.

On ONS own estimates, 17% of Haringey's population did not return a form. This is the 14th highest proportion in England. ONS have estimated coverage rates by five year age group and sex and concluded that in Haringey 26% of males aged 20-24 didn't return a form. The rates for the age groups between 25-29 are almost as low. This is of particular concern in Haringey because these groups form a relatively high percentage of our population. The Council is concerned that your coverage survey may not have accurately estimated the Borough's total population so that these estimates are themselves underestimates. Furthermore, I am worried that the methodology for compensating for this non response, while it may be statistically satisfactory at a national level, is not reliable at a local level where non response is concentrated amongst residents with similar characteristics and in certain areas. As well as non response by age/sex it would be valuable to know how response varied by other characteristics, for example, by ethnic origin, tenure.

I am anxious to know how you have addressed this issue of non response and bias and how you advise the Census results should be interpreted at a local level. How are users going to be given practical advice about the accuracy of the data? The danger is that any caveats on the accuracy of the data will be forgotten and what's published becomes taken as a precise measure. This is especially the case with regard to the ONS Neighbourhood Statistics initiative. This impressive initiative to provide better information for neighbourhood renewal needs to get to grips with the practical problems of the use of Census statistics at this very local level, rather than simply present the figures at face value.

The Council will be looking at future releases of Census data, particularly when the Output Area data is released to see if we can assist locally in evaluating the accuracy of the Census. We will also be keeping an eye on the work of those boroughs even more severely affected by the reduction in MYEs than Haringey, to see if any of their findings also apply locally. Of course, ONS's ongoing work on Census quality will be an essential contribution to this process, especially if it addresses practical issues of using local data and in explaining its accuracy in lay terms to users and local decision makers.

In the light of these ongoing assessments of the Census results, the Council would wish to reserve its position with regard to the accuracy of the Census in Harrogate.

Yours sincerely
George Meehan

Leader of Harrogate Council

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