

# Planning Committee

2.00pm, Wednesday, 15 May 2019

## Western General Hospital Place Brief

### Executive/routine

Wards Inverleith  
Council Commitments [15 and 47](#)

### 1. Recommendations

---

1.1 It is recommended that Committee:

- 1.1.1 approves the appended Place Brief for the Western General Hospital site as non-statutory planning guidance.

**Paul Lawrence**

Executive Director of Place

Contact: John Inman, Service Manager.

E-mail: [john.inman@edinburgh.gov.uk](mailto:john.inman@edinburgh.gov.uk) | Tel: 0131 469 3721

## Western General Hospital Place Brief

### 2. Executive Summary

---

- 2.1 This report seeks approval of a Place Brief to guide clinical-related development at Western General Hospital. It has been prepared by the Planning Service in collaboration with NHS Lothian and has involved extensive engagement with the local community and other stakeholders.

### 3. Background

---

- 3.1 The Western General site has been in some form of hospital use since 1744. It first became known as the Western General Hospital after changing its name from Craighleith Hospital in 1929 accommodating 280 beds.
- 3.2 In 1933 it was provided with a residence for 12 medical students and in 1936 a nurses' home was built. In more recent years, the hospital has developed through the provision of a number of specialist units such as the coronary and gastrointestinal units. It also has regional units for radiotherapy and neurosurgery. The most recent buildings are the Anne Ferguson and the Royal Victoria buildings. These introduce a contemporary design element to the site. There has also been a series of smaller scale temporary buildings erected to meet short term accommodation requirements. These have ranged from two-storey modular buildings to individual portable cabins. These temporary buildings have been used beyond their intended lifespan due to accommodation pressures. Today, the hospital has 570 beds, 24,000 members of staff and has around 150,000 patients a year.
- 3.3 The site layout of the early 1960s can be identified but it is obscured by a multitude of extensions and temporary structures which make navigating the site difficult and developing the site in a controlled manner a challenge. The green spaces which were an integral part of the original site and an intended aid to health recovery and well-being are effectively gone, replaced with buildings and tarmac.
- 3.4 NHS Lothian approached the Council in December 2017 to discuss proposals for key elements of the redevelopment at the Western General Hospital. It was agreed that the importance of taking account of the wider geographical area and providing

early and meaningful engagement with medical practitioners and service users was required to take forward the proposals. Discussions took place on the options for establishing an agreed framework for bringing forward a number of planning applications in a phased manner. It was agreed that a Place Brief was the preferred approach as this required a balance between certainty and flexibility in terms of planned development and timescales and a useful basis for undertaking stakeholder and public engagement.

- 3.5 Local planning applications for a haematology centre and a renal satellite unit have been granted within the past 12 months and construction will start soon on both buildings. The planning applications listed below will be submitted over the next few years. Each of the future development sites is shown on Plan 2 of the Place Brief – Development Framework.
- 3.5.1 University of Edinburgh Facility;
  - 3.5.2 application to be submitted and progressed in Spring 2019. Estimated on-site: Spring/Summer 2020;
  - 3.5.3 Energy Centre and Infrastructure;
  - 3.5.4 Scottish Government business case presently being developed for internal configuration of existing buildings. Application to be submitted and progressed in Summer 2019. Estimated on-site: Spring/Summer 2020;
  - 3.5.5 Cancer Centre; and
  - 3.5.6 Scottish Government case presently being developed. Application to be submitted and progressed in Spring 2021. Proposal for Application Notice (PAN) anticipated in Spring 2020. Estimated on-site: Spring 2022.
- 3.6 The Place Brief should take account of the forthcoming applications as well as providing a framework for the longer-term redevelopment of the site.

## **4. Main report**

---

- 4.1 The site lies on the north side of Edinburgh just south of Ferry Road. There are three vehicular accesses serving the site, two off Crewe Road South from the east and one off Telford Road from the west. The hospital sits in an urban context with villa housing to the south and north. There are playing fields and parkland to the east beyond Crewe Road South and adjacent to Fettes College.
- 4.2 The largest buildings on the site are the Anne Ferguson Building, the Royal Victoria, the Alexander Donald and the Clock Tower. These are all between three and four storeys high. The site slopes down to the south and then further down to the east. Overall the level change across the site together with the actual building form means that there is the equivalent of at least eight storeys of building from the lowest part of the site to the highest floor level in the clock tower.

- 4.3 In the Edinburgh Local Development Plan (LDP), the site is located in an area here there are no constraints. The eastern edge of the site is adjacent to the boundary of boundary of the Inverleith Conservation Area.
- 4.4 There are a number of design policies in the LDP relevant to the preparation of this brief. In particular: Des 1 Design Quality and Context, Des 2 Co-ordinated Development, Des 5 Development Design - Amenity, Des 7 Layout Design and Des 8 Public Realm and Landscape Design.
- 4.5 The creation of good places is a strand of Scottish Government planning policy, set out in the following documents: Designing Places, Creating Places and Designing Streets. In December 2015, The Scottish Government, NHS Scotland and Architecture and Design Scotland (A&DS) launched the Place Standard assessment tool to support the delivery of high quality places around Scotland.
- 4.6 The Western General Hospital Place Brief is a further opportunity to deliver the placemaking agenda in the urban context. It has also involved the use of the place standard assessment tool in an appropriate form to help capture community aspirations.
- 4.7 The site will remain in NHS use. The purpose of the brief is to help define a development framework for the site and improve its context with the surrounding area.
- 4.8 The Western General Hospital Place Brief is the outcome of joint working between NHS Lothian and a number of Council services. There has been valuable input from the local community, hospital employees and other stakeholders in the local area.
- 4.9 The main period of engagement took place in November 2018. A staff/patient drop-in event took place on 27 November 2018 at the outpatients' reception of the hospital. A second event for the local community took place on 28 November 2018 at St Ninian's Church, Comely Bank. Details of these events are provided at Section 7 of this report. The Place Standard Assessment Tool was used as the basis of a questionnaire to gather views from the hospital users and the local community. A record of the issues raised during the community engagement events is appended in the Report of Consultation – appendix 1.
- 4.10 The Report of Consultation also includes the responses from other service areas. Some of the main points raised by the community and other stakeholders include:
- 4.10.1 more open space such as gardens to meet and relax;
  - 4.10.2 significance and value of the clock tower and history of the site to be celebrated;
  - 4.10.3 site is not easily accessible and difficult to navigate;
  - 4.10.4 an element of retail use would be welcome;
  - 4.10.5 improved parking arrangements are essential;
  - 4.10.6 a strong entrance is required;

- 4.10.7 better connections to cycleways in the wider area;
- 4.10.8 green travel plan and bus shuttle service is important; and
- 4.10.9 new cancer centre is an important part of the site.
- 4.11 A consultee meeting was held with other Council services and external stakeholders who have an interest in matters affecting the site or the wider area. The following issues were raised:
  - 4.11.1 the redeveloped hospital will be a local/regional and national hospital, so the transport strategy should reflect this;
  - 4.11.2 there is a need to explore improved public transport services serving the hospital from various parts of the city; and
  - 4.11.3 pedestrian permeability throughout the site is a priority. The creation of a green corridor incorporating an active travel route should be considered, linking to nearby cycle routes and footpaths.
- 4.12 There is considerable public support for a new development framework for the hospital site. The comments have informed the preparation of the Place Brief and will help inform proposals at the application stage. Comments which relate to non-planning matters have also been recorded and the Consultation Report can be used to feed into local community planning processes.
- 4.13 The brief is attached at appendix 2. The format of the brief is based on the six qualities of successful places set out in the Scottish Government document 'Creating Places':
  - 4.13.1 distinctive;
  - 4.13.2 easy to move around and beyond;
  - 4.13.3 safe and pleasant;
  - 4.13.4 welcoming;
  - 4.13.5 adaptable; and
  - 4.13.6 resource efficient.
- 4.14 For each of these six qualities, the brief includes design and placemaking principles for the Western General Hospital site. Future planning applications will be expected to address these principles to ensure that development helps to create a positive place. Once approved, the brief will have the status of non-statutory planning guidance and will be a material consideration in the determination of relevant planning applications. The brief and the consultation report can also be used by other Council services and Locality partners to inform investment decisions and other actions.

## **5. Next Steps**

---

- 5.1 The local community and other stakeholders will have the opportunity to comment on the individual proposals at both PAN and planning application stage.
- 5.2 The Place Brief will provide the context for various development proposals required to improve the site and to facilitate the development of the cancer centre. Prior to any PAN being submitted, NHS Lothian have undertaken to ensure the website is kept up-to-date in order that all stakeholders are kept informed. A preliminary application consultation is envisaged with those parties with whom NHS Lothian have engaged prior to the formal submission of any PAN.

## **6. Financial impact**

---

- 6.1 This project, as part of the Placemaking Agenda, is being delivered collaboratively by the Planning Service and NHS Lothian. Existing staff resources are being used and any external costs are being met by NHS Lothian. Approval of this Place Brief will not result in any financial impact to the Council.

## **7. Stakeholder/Community Impact**

---

- 7.1 Two engagement activities took place in the local community in November 2018. These were led by NHS Lothian and were organised to obtain the views of the local community and the users/ employees of the hospital.
- 7.2 The first event was held on 27 November 2018 at the Outpatients Reception, Western General Hospital. The objective of this consultation was to gain an understanding how patients and employees view the site and what opportunities they think the site could provide. Presentation boards showing research and analysis of the area provided the context to the consultation whilst hospital staff, patients and visitors had the opportunity to share their opinions and experience in relation to the site whilst considering current constraints and future opportunities. On the day, an estimated 100 people participated, of which 20 completed either the Place Standard Tool, questionnaire or both. The presentation material was also made available online and a number of responses were received.
- 7.3 A second day of engagement was held on 28 November 2018 at St Ninian's Church, Comely Bank which is close to the site. This event provided an opportunity for the community to share their views of the site and consider what opportunities it could provide. The same presentation boards were exhibited to facilitate discussion. On the day, some 60 people contributed to the consultation and 14 people completed either the Standard Place Tool, questionnaire or both. They included local residents, members of the Community Council former hospital staff and community police officers. Similar to the previous event, further opportunity for feedback was available online and additional responses were received.

- 7.4 Both events gave people the chance to share their views and ideas on how the Western General should develop in the future, help shape plans for the site and have their say on what the hospital should both look and feel like.
- 7.5 The discussions which took place at the community events and the online comments informed the contents of the Place Brief. There will be an opportunity for further consultation and engagement at the planning application stages and at the PAN stage whenever a major planning application is submitted. The outcomes of the engagement activities set out in the Consultation Report can be used to inform other projects and proposals in the wider area.

## **8 Background reading/external references**

---

- 8.1 None.

## **9 Appendices**

---

- 9.1 Appendix 1 – Report of Consultation.
- 9.2 Appendix 2 – Western General Hospital Place Brief.

APPENDIX I

**WESTERN  
GENERAL PLACE  
BRIEF  
REPORT OF  
CONSULTATION**

March 2019

# CONTENTS

INTRODUCTION .....	3
PLACE BRIEF .....	4
CONSULTEES.....	5
CONSULTATION MATERIAL.....	8
CONSULTATION EVENTS.....	10
SUMMARY OF FINDINGS .....	14



# INTRODUCTION

- 1.1 The Western General Hospital celebrated its 150<sup>th</sup> anniversary in 2018 – a time to reflect on 15 decades of challenge, change and achievement in healthcare provision on site.
- 1.2 As well as celebrating its past, NHS Lothian is also planning for the hospital’s future, with an ambitious programme of building works and service redesign scheduled to start on site in 2019.
- 1.3 The work will improve the hospital’s physical environment, enhancing patient treatment and ensuring that high quality and sustainable services continue to be provided on the Western General site over the coming years.
- 1.4 These necessary projects fall under an overall site vision which looks ahead to the next years on site. The development of a Place Brief will underpin the ambitions of NHS Lothian to continue to deliver health services from here long into the future.
- 1.5 The proposed Place Brief will provide a flexible framework for the future phased development of the Western General Hospital site, serving as a useful basis for undertaking stakeholder and public engagement, and should allow for individual projects to be delivered over the next 20-30 years.
- 1.6 The purpose of this report is to outline the process and findings of the consultation process. This report of consultation will inform the Place Brief for the site, which once approved by Committee, will form non-statutory guidance, to be used by NHS Lothian to guide future proposals and the planning authority as a material consideration in the determination of planning applications.
- 1.7 A commitment was made to a programme of consultation that goes beyond the statutory requirements. The process has included a multi-event consultation process with the local community, neighbourhood groups, western general staff and patient groups, community councils and City of Edinburgh Council officials and stakeholders. The aim is to share knowledge and opinions and offer suggestions for the future of the site.
- 1.8 The design team have used effective methods such as the Place Standard Tool, the Scottish Government initiative developed in partnership with the NHS, as well as questionnaires and exhibition boards with maps and thinking points to gain understanding and insight from the local community and stakeholders.
- 1.9 The drop-in events were widely promoted across NHS Lothian and in the wider community, including on social media where people had the chance to share their views, using the hashtag: #MySayWGH
- 1.10 Both consultation events, as well as the presence of social media, gave people the chance to share their views and ideas on how the Western General Hospital should develop in the future, help shape plans for the site and have their say on what the hospital should look and feel like.

Scottish Government note that “effective engagement with the public can lead to better plans, better decisions and more satisfactory outcomes and can help to avoid delays in the planning process. It also improves confidence in the fairness of the planning system.”



# PLACE BRIEF

- 2.1 A Place Brief is a set of high level principles which shape the future development of a site.
- 2.2 The Brief has a place-based approach and incorporates the views and aspirations of the local community. The format of the Brief is innovative in as much as it specifically addresses the six placemaking criteria underpinning the Scottish Government policy documents: Designing Places, Creating Places and Designing Streets. The six criteria are:
  - Distinctive
  - Safe and Pleasant
  - Welcoming
  - Adaptable
  - Resource Efficient
  - Easy to Move Around and Beyond
- 2.3 The process involves two stages: firstly, the gathering of community views and secondly, the Brief to be written around the six placemaking criteria incorporating the outputs from the first stage.
- 2.4 The Place Brief, once approved by Committee, will form non-statutory guidance to be used by NHS Lothian in guiding future proposals and the planning authority as a material consideration in the determination of planning applications.
- 2.5 The Place Brief has been discussed with CEC as the most appropriate strategy for the future of the Western General Hospital site.

# CONSULTEES

3.1 In early discussions with NHS Lothian and City of Edinburgh Council a variety of consultees were identified as being important parties with whom to engage.

3.2 Below is a list of planning stakeholders who were involved or contributed to the consultation.

- City Of Edinburgh Council
  - Transport
  - Environmental Protection
  - Planning
  - Waste Solutions
  - Economic Development
  - Active Travel
  - Parks and Greenspaces
  - Archaeology
  - Active Travel
- Lothian Buses
- Inverleith Ward Councillors (Cllr Barrie, Cllr Osler, Cllr Mitchell and Cllr Whyte)
- Craigleith /Blackhall Community Council
- Drylaw / Telford Community Council
- Stockbridge / Inverleith Community Council
- Inverleith Neighbourhood Partnership

3.3 Discussions with CEC Planning were facilitated by Lesley Porteous.

3.4 Given the nature of the site, a number of NHS Lothian stakeholders were also identified including:-

## Internal

- All NHS Lothian staff (Everyone) Clinical, administrative & support staff
- Staff on the WGH; staff in Critical Care, ARAU, Ambulatory care, MIU, Urology, Colorectal, Theatres, HDU, HSDU, RIDU, Respiratory, CF, General Medicine, Discharge Lounge, Medicine of the Elderly, Bed Management, DCN, Metabolic, Diabetes, Diagnostics, AHP, Gastroenterology, Rheumatology, Dermatology, Pharmacy, Medical Records, Estates, Facilities, Catering, Car Parking Group
- Cancer Services - Breast surgery, Breast screening, Haematology, Haemophilia, Palliative care, Clinical Oncology, Medical Oncology, Radiotherapy
- Medical Staff Committee
- Site Management Team
- Acute Senior Manager Team
- Regional and Scottish Ambulance Service Managers (Planning)
- Finance Department
- Quality Improvement Department
- Human Resources Department
- Communications Department

- Patient Experience Department
- Lothian Partnership Forum
- Lothian NHS Board
- Strategic Planning Department & Strategic Planning Committee
- Finance and Resources Committee
- Lothian Capital Investment Group
- Cancer Capital Programme Board
- WGH Energy Programme Board
- Renal Project Group
- RHSC & DCN Programme Board
- Cancer Enabling & Haematology Project Working Groups
- EHealth

#### External

- Patients and Patients' relatives
- The public including neighbourhood and local community groups
- Carers
- Patient Councils
- Patient Public Forums
- Cancer patient group
- Stakeholder groups with specific interests
- Voluntary and third sector organisations –
- Maggie's Edinburgh (presence on site)
- Macmillan Cancer (presence on site)
- Cancer Research UK
- Fight Against Cancer Edinburgh (FACE) (based in cancer centre)
- Scottish Cancer Foundation
- Breast Cancer Now
- Kidney Research UK
- Wellcome Trust (presence on site)
- Diabetes UK
- Edinburgh and the Lothian Health Foundation
- Volunteers
- Members of the public (not in other groups categorised)
- Politicians (community council, council, Scottish Government)
- The media (print, broadcast, online and social)
- National NHS Boards :
- National Service Scotland (including NHS National Specialist and Screening Services Division (NSD))
- NHS 24
- NHS Health Scotland
- Healthcare Improvement Scotland
- (Send to each Board and let them cascade appropriately)
- Key decision makers and opinion formers
- Edinburgh Integration Joint Board
- Mid Lothian Integration Joint Board
- East Lothian Integration Joint Board
- West Lothian Integration Joint Board
- (Primary Care – GPs, Dentists, Pharmacists – local practiced and/or Area Committees)
- Edinburgh Health and Social Care Partnership
- Mid Lothian Health and Social Care Partnership
- East Lothian Health and Social Care Partnership
- West Lothian Health and Social Care Partnership
- Police
- Armed Services
- Scottish Fire and Rescue
- University of Edinburgh: on site, Corporate and Estates

- 
- Health Facilities Scotland
  - Architecture & Design Scotland
  - Scottish Health Service Centre

3.5 A thorough online social media campaign ensured that a wide audience was targeted.

3.6 The drop-in events were widely promoted across NHS Lothian and in the wider community, including on social media where people had the chance to share their views, using the hashtag: #MySayWGH.

3.7 In order to publicise the public consultation events further, an advertisement was placed in the Edinburgh Evening News on 19 November 2018.

3.8 Additionally invites were sent to residents bordering the Western General site informing them of the public event, with mail shots also sent to NHS staff and site stakeholders.

# CONSULTATION MATERIAL

## Presentation Boards

- 4.1 A series of presentation boards were presented which introduced the project, the Place Brief and considered current constraints and future opportunities. Research and analysis of the site and surrounding area were also displayed to help direct discussion. A copy of the presentation boards is provided at Appendix 1.

## Place Standard Tool

- 4.2 The Place Standard is a tool that is used to assess the quality of a place using a series of set criteria.
- 4.3 During the consultation, the Place Standard Tool was used to identify the needs and current experiences of the Western General Hospital site.
- 4.4 Each participant was asked to consider the 14 criteria in relation to the Western General Hospital, answering each question by providing a rating on a scale between 1 and 7. Scores were then plotted on the compass diagram, and a line drawn between each point to create a diagram.

HELP PLAN AND SHAPE THE FUTURE OF THE  
**WESTERN GENERAL HOSPITAL**

**What is your experience of using the Western General Hospital?**

Name: .....

Postcode: .....

Age:      0 – 19      20 – 40      41 – 60      60+

1-Very Poor    2-Poor    3-Fair    4-Acceptable    5-Good    6-Very Good    7-Excellent

**Moving Around**  
Can I easily walk and cycle around using good-quality routes?

**Work and Local Economy**  
Is there an active local economy and the opportunity to access good quality work?

**Public Transport**  
Does public transport meet my needs?

**Housing and Community**  
Do the homes in my area support the needs of the community?

**Traffic and Parking**  
Do traffic and parking arrangements allow people to move around safely and meet the community's needs?

**Social Contact**  
Is there a range of spaces and opportunities to meet people?

**Streets and Spaces**  
Do buildings, streets and public spaces create an attractive place that is easy to get around?

**Identity and Belonging**  
Does this place have a positive identity and do I feel I belong?

**Natural Space**  
Can I regularly experience good quality natural space?

**Feeling Safe**  
Do I feel safe here?

**Play and Recreation**  
Can I access a range of space with opportunities for play and recreation?

**Care and Maintenance**  
Are buildings and spaces well cared for?

**Facilities and Amenities**  
Do facilities and amenities meet my needs?

**Influence and Sense of Control**  
Do I feel able to take part in decisions and help change things for the better?

8



## Questionnaire

- 4.5 A further questionnaire was provided with targeted questions to help gather ideas, opportunities and any improvements at the Western General. This process was important in establishing the key issues and headings for the Place Brief.
- 4.6 The questions were as follows:
1. What do you like about the existing buildings on the Western General site? Do they contribute positively to the character and appearance of the surrounding area?
  2. Do current traffic and parking arrangements allow people to move around safely and meet the community's needs?
  3. What types of new spaces would you like to see on the site?
  4. What aspects of the Western General site and surrounding area do you consider important and should be considered in future plans?
  5. Please circle your experience with the Western General Hospital:  
Staff Member, Local Resident, Patient / Former Patient, Family Member / Carer / Visitor, Other

# CONSULTATION EVENTS

## Introduction

- 5.1 As well as individual meetings throughout the process the following three consultation events were undertaken:-
1. City of Edinburgh Council Stakeholder Drop-in Session
  2. Staff / Patient Consultation Event
  3. Public Consultation Event

### City of Edinburgh Council Stakeholder Drop In Session

Date: 30 October 2018

Venue: City of Edinburgh Council, Waverley Court

- 5.2 A stakeholder drop in session was arranged with CEC where a number of statutory consultees were involved.
- 5.3 A summary of the responses received is provided below:-

#### Archaeology

Although not listed, the whole 19th Century building including the clock tower presents an opportunity to retain existing features to reflect the heritage of the site in the future redevelopment.

Other than that in terms of buried archaeology most of the site has been significantly affected but the southern third may have pockets of survival associated with the early hospital and as such development within these areas may require archaeological mitigation.

#### Flooding

Culverted burn / records of historic flooding. Best to have a regional/ strategic flood strategy with opportunities for green infrastructure. Standard flooding strategy forms need to be completed.

#### Natural Environment

Existing trees/ green open space/ biodiversity:

- As many of the existing mature trees should be retained as possible as there are few trees on the site. A tree survey will be required showing the location and condition of all the trees that are impacted on by the development. A tree constraints and removal plan clearly indicating root protection areas should be provided.
- A Preliminary Ecological Appraisal (PEA) of the site should be undertaken. Depending on the findings, further species surveys may be required (e.g., bats, badger and birds).

- The new masterplan should aim to create a strong legible landscape framework forming a network of green open space throughout the site. These should connect with any adjacent green networks (e.g., at Fettes) so to form a continuous green corridor. All this would provide a better environment for patients to aid recovery and would also allow for habitat connectivity. Such a green corridor could also be used by pedestrians and cyclists for active travel. As the south of the site has the most mature trees (including those in the gardens along Craighleith Hill Avenue), then that would make an obvious location for such a route.
- Green infrastructure such as green roof and walls should also be considered as part of the design of the new built form of development.
- The landscaped courtyard around the Clock Tower Building should be restored.
- There is an existing memorial garden on the site – it would be good if that could be retained and incorporated within the network of open spaces.
- Consider sunlight and overshadowing. Areas of open space should be of sufficient size and not overshadowed by buildings. They should preferably be south-facing.
- Any open space created should be usable and provided with footpaths, seating, street furniture, planting and artwork as appropriate.
- Clarification is sought on the future of the open space areas including the newly created areas. On the one hand the report states that “The green spaces which were an integral part of the original and an aid to recovery and well-being are all but gone, replaced with buildings and tarmac.” The Option 4 layout indicates green space in the middle of the site but then states “This options provides the greatest scope for future expansion given its more limited new build footprint.” So if the masterplan is a genuine attempt to improve the external environment of the hospital, it is important that the open spaces are safeguarded from future development.

#### Building Heights/ built form and views:

- The site is in close proximity to several protected environmental and planning designations. These include 3no Special Landscape Areas (Corstorphine Hill, Inverleith and Water of Leith); Green Belt at Corstorphine Hill; a Conservation Area adjacent to the site to the east (Inverleith) and a World Heritage Site (New Town). Therefore building heights and massing will need careful consideration so to safeguard any protected city views and local views. An LVIA would be required.
- There are some good views from within the site of Arthur’s Seat and Edinburgh Castle. The masterplan should maximise these views and ideally any open spaces should be located where they command good views.
- Avoid locating buildings too close to the site boundaries so to protect privacy, daylight, sunlight and outlook of the neighbouring houses.

#### Sustainable development

- Pedestrian permeability requires improving as a priority as currently the site is a muddle and not legible. As stated above the creation of a green corridor incorporating an active travel route should be aimed for which should link with any nearby cycle routes and footpaths. Improved legibility of the road network also required. Refer to EDG and Edinburgh Street Design Guidance. Adequate cycle parking facilities should be provided.

#### SUDS

- Any SUDs measures should aim to enhance amenity and biodiversity.

#### Topographical

- Survey required to inform site analysis and for level information.

## Transport

Car and cycling parking standards for 2018 apply.

The redeveloped hospital will be a local/regional and national hospital so the transport strategy should reflect this.

Fast and rapid electric chargers should be installed for future use.

A shuttle bus used to run between the Western and RIE hospitals. This was discontinued. There is a need to explore improved public transport services serving the hospital from various parts of the city (particularly Leith).

Consideration should be given to amendments on car parking restrictions in the surrounding area.

### **Have Your Say Western General Hospital Staff / Patient Event**

**Date: 27 November 2018**

**Venue: Outpatients Reception, Western General Hospital**

- 5.4 A staff and patient event was undertaken at the Western General within the Outpatient reception.
- 5.5 The location of the event ensured a high number of footfall.
- 5.6 The purpose of the event was to gain an understanding of the area and what potential opportunities the site could provide.
- 5.7 Presentation boards showing research and analysis of the area provided the context to the consultation whilst hospital staff, patients and visitors had the opportunity to share their opinions and experience in relation to the site whilst considering current constraints and any future opportunities.
- 5.8 On the day an estimated 100 people participated in the consultation, of which 20 people filled out either the Place Standard Tool, questionnaire, or both. The presentation material and a further opportunity for feedback was made available online, and a number of responses was later received.
- 5.9 A full schedule of the collated comments is included at Appendix 2.

### **Have Your Say Western General Hospital Public Event**

**Date: 28 November 2018**

**Venue: St Ninian's Church, Comely Bank**

- 5.10 A public consultation event within the local community was undertaken at St Ninian's Church in Comely Bank, which is in close proximity to the site.
- 5.11 The purpose of the event was to gain an understanding of the area and what potential opportunities the site could provide.
- 5.12 Presentation boards showing research and analysis of the area provided the context to the consultation whilst hospital staff, patients and visitors had the opportunity to share their opinions and experience in relation to the site whilst considering current constraints and any future opportunities.
- 5.13 A number of local residents attended the event, including members of the Community Councils, former staff and community Police Officers.
- 5.14 On the day an estimated 60 people contributed to the consultation, of which 14 people filled out either the Place Standard Tool, questionnaire, or both. The presentation material and a further opportunity for feedback was made available online, and a number of responses was later received.



5.15 A full schedule of the collated comments is included at Appendix 2.

### Summary

5.16 Members of the public and WGH staff and site users had a glimpse into the future of the Western General at two 'drop-in' events.

5.17 The events showcased the ambitious programme of building works and service redesign scheduled to take place on the WGH site over the coming years. They also gave people an insight into the hospital's long-term 'Site Vision' to ensure the delivery of high quality and sustainable health services at the Western until 2045.

5.18 Both events gave people the chance to share their views and ideas on how the Western General Hospital should develop in the future, help shape plans for the site and have their say on what the hospital should look and feel like.

5.19 Members of NHS Lothian's Project Team attended both events to answer questions about the site redevelopment plans.

# SUMMARY OF FINDINGS

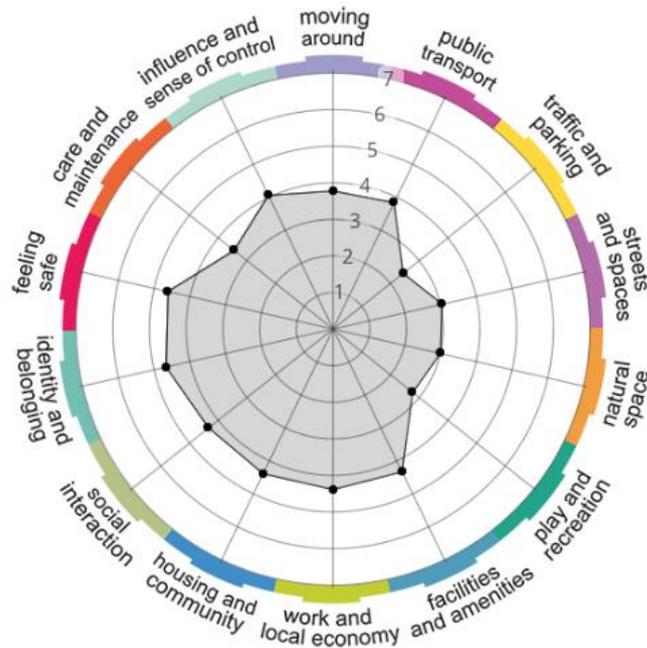
## Place Standard Tool

- 6.1 Over the course of the two consultation events, and further online engagement, 18 people completed the Place Standard Tool. The scores have been combined to provide an average result, feeding into an overall score for the Western General Hospital site.
- 6.2 The responses to the Place Standard questions, as an average rating, are presented below. This shows that generally the Western General Hospital site scored in the mid-range between 3 and 4 on all topics.
- 6.3 The following tables show the collated information gathered from the Place Tool exercise.

Participant No.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	Avg
Moving Around	7	4	5	4	3	3	4	7	3	4	3	4	1	5	1	3	5	2	3.7
Public Transport	7	4	3	3	5	2	2	7	4	4	2	4	3	6	2	3	4	4	3.8
Traffic and Parking	1	4	3	3	4	2	1	4	2	2	3	2	1	4	2	2	2	2	2.4
Streets and Spaces	3	4	2	4	3	2	3	3	4	4	2	4	4	4	1	3	2	3	3
Natural Space	4	4	2	5	2	2	2	3	4	3	3	4	2	5	2	3	2	2	3
Play and Recreation	5	4	3	3	3	2	1	4	3	2	1	2	1	6	2	3	3	2	2.7
Facilities and Amenities	5	7	4	3	3	5	5	5	3	4	3	2	5	6	4	3	5	6	4.3
Work and Local Economy	5	1	4	4	4	5	5	6	3	4	5	2	5	5	4	5	7	5	4.3
Housing and Community	5	1	5	4	3	4	5	6	4	5	5	4	4	5	4	5	6	4	4.3
Social Interaction	5	4	6	4	4	4	5	5	4	3	5	4	3	5	3	5	6	3	4.3
Identity and Belonging	5	3	5	5	5	4	6	7	4	5	3	4	5	5	5	5	5	3	4.6
Feeling Safe	5	4	5	5	4	2	6	7	4	4	3	4	7	5	4	5	6	3	4.6
Care and Maintenance	6	4	3	4	3	2	2	5	3	5	3	2	4	4	1	5	4	2	3.4
Influence and Sense of Control	5	3	5	4	4	4	4	6	4	5	2	4	4	4	3	4	5	3	4

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Postcode	EH3	EH7	EH11	EH21	EH4	EH28	EH6	EH4	EH7	EH12	EH22	EH4	EH30	EH4	EH4	EH10	EH4	EH5
Age	25-34	16-24	45-54	45-54	65-74	55-64	45-54	45-54	45-54	35-44	25-34	16-24	45-54	75+	45-54	25-34	35-44	25-34
Gender	F	F	F	F	F	M	F	M	F	F	F	F	F	M	F	M	M	F

6.4 The diagram below shows the collective scores.



6.5 The highest rated aspects were Identify and Belonging, Feeling Safe, Facilities and Amenities, and Work and Local Economy. This provides positives to build on within the Place Brief.

6.6 The lowest rated aspects were Traffic and Parking, Play and Recreation, Streets and Spaces, and Natural Space, suggesting that future opportunities could seek to improve these.

### Questionnaire Feedback

6.7 In addition to the Place Standard Tool respondents were asked a series of questions to gather further insight. The questionnaires allowed for more in-depth answers.

6.8 A wide variety of answers were received however a number of common themes can be identified.

6.9 Each questionnaire was recorded and the answers categorised below. A full schedule of comments is provided within this report at Appendix 1.

### Question 1: What do you like about the existing buildings on the Western General site? Do they contribute positively to the character and appearance of the surrounding area?

#### Summary

- Not easily accessible
- Beautiful buildings and grounds but older buildings are run down and need upgrading
- Require more open space such as gardens and places to meet and relax – important to health and wellbeing for both staff and patients
- Site is disjointed
- Signage could be improved
- History of the site to be celebrated and not lost
- Significance and value of the Clock tower
- Mix of old and new buildings

**Question 1: What do you like about the existing buildings on the Western General site? Do they contribute positively to the character and appearance of the surrounding area?**

- Elements of character remain
- Not patient friendly
- Good location
- More outdoor areas required
- Safe and relatively quiet neighbour though certain issues with light pollution
- Need for a positive working and patient environment

**Question 2: What types of new spaces would you like to see on the site?**

**Summary:**

- Parking is seen as a key issue on site, improved parking arrangements is essential
- Green spaces that are desirable / communal outdoor spaces / landscaped / tree planting / outdoor sculpture / gym perhaps outdoor / outdoor eating areas
- Secure cycle spaces and facilities on site, better connections to cycleways in the wider area
- Walkable / clearly marked footpaths and routes / running routes and recreational activities interwoven
- Convenience shops, bank machines etc. element of retail
- Require a joint-up and fully co-ordinated site
- Cancer centre with all services co-located
- Continuity between spaces
- Architecturally pleasing buildings that are fit for purpose / eco-friendly
- Simple layout
- Centralised public space / front door to Hospital
- Easy access to site and around it / signage to be improved
- Better public transport routes to and from the site / not all areas of the city are connected
- Distinction between roads/vehicles and pedestrians

**Question 3: Do traffic and parking arrangements allow people to move around safely and meet the community's needs?**

**Summary:**

- Parking is difficult for both staff and visitors / patients often panic about no spaces / poor parking facilities
- Decked car parks are a good idea / underground and multi-storeys should be developed further
- A bus route through the site would allow people to be dropped off nearer the facilities / not enough bus services / discussions to be had with Lothian Regional Transport
- Congestion is a big issue / the road system could be improved / a number of one way systems is confusing / too many dead end roads and barriers
- For many staff, driving to the Hospital is their only reasonable option
- Unclear signage
- No park and ride options have been developed / shuttle buses from different parts of the city would be an option

### Question 3: Do traffic and parking arrangements allow people to move around safely and meet the community's needs?

- Impact on community with staff parking out with the site
- Traffic should be prohibited from moving through the site, other than ambulances and essential vehicles.
- Emphasis needed on healthy active travel, with prominent and secure cycle facilities at key locations around the hospital and greater priority given to pedestrians
- Disabled parking facilities needed
- No formal reception directing people on arrival

### Question 4: What aspects of the Western General site and surrounding area do you think are important and should be considered in future plans?

#### Summary:

- Main entrance to hospital is needed / main foyer space / front door / welcoming central area with information, maps and directions to other sectors of the site
- Clock tower / celebration of history through use of plaques etc.
- Improved signage / more consistent / clear directions
- Need to address entrance and exit points, particularly in rush hour
- Planting on new trees and greenery
- Access with a focus on public transport / transport links need to be improved
- Safe and quick access for cycling routes / showering and storage facilities to encourage active commuters / connections to wider network
- A need to be realistic about the lack of car parking on site
- Important to retain some character on the site but also to provide fit for purpose clinical facilities
- A need for Green Travel planning / bus shuttle service
- Consider building higher to free up space between buildings whilst providing efficient level of floorspace / others suggest keeping height in relation to surrounding area
- The new cancer centre is key
- Open space
- Simplify layout of the site
- Maintain community feel of the hospital / encourage community use of the area e.g. children use the site to get to school
- Buildings designed with input from staff and patients
- Maximising views within and from the site
- Investment in environment

### Question 5: Please state your experience with the Western General Hospital site.

#### Summary:

The majority of respondents were staff and users of the Hospital, closely followed by local residents.

### Most referenced words:

History Clock Tower Difficult to navigate Character Mix of old and new buildings Lack of signage  
More open space Disjointed Parking Cycling Modern facilities Congestion Park + Ride Confusing  
Community Central space Environment Traffic Buses Landscaping

### Inspirational answers:

"I don't like the current buildings on the Western General site as they don't have a cohesive appearance..."

"The newer builds – the Anne Ferguson and the new Royal Victoria buildings look good, the University building is stunning and the little garden areas are lovely"

"...the clock tower is an iconic feature"

"The entire Western General Hospital site is a jigsaw puzzle of loosely connected buildings... the older buildings prohibit and restrict many options to modernise site facilities"

"The more modern parts of the hospital are well laid out and connected. It's reasonably well served by buses and some call close to the main buildings. Each of the buildings retains a strong identity which aids navigation and provides the hospital with a stronger character"

"It has a heart and soul that new builds lack"

"...The green spaces are essential. Look at the surroundings, landscaping and planting at Forth Valley Hospital if you need a good example. It's tremendous and uplifting"

"Steeped in history"

"I think they are disjointed not appropriate to today's medical necessities"

"It's a bit of a patchwork quilt"

"I like the old buildings in appearance from the outside, but they are not fit for purpose on the inside"

"It's a dense and complex area, not always beautiful"

"...although large and piecemeal the site does not dominate over the local area"

"A piece of history worth being preserved for future generations"

"Coherent and centralised public space aligned with sensible parking arrangements and a simpler layout to enable staff and visitors to move freely within the campus"

"Garden space where patients and families can have a break from the ward"

"More sight lines through buildings that give a greater sense of openness"

"Outdoor café seating area. Good spaces offering exercise at lunch times. Perhaps lunchtime boot camps in green spaces"

"The hospital is getting bigger and the [parking] spaces are getting fewer"

"The Western has a great community feel even though it is a good size hospital..."

## **MONTAGU EVANS**

4th Floor, Exchange Tower  
19 Canning Street  
Edinburgh EH3 8EG

+44 (0) 131 229 3800

[www.montagu-evans.co.uk](http://www.montagu-evans.co.uk)



# APPENDIX 1 PRESENTATION BOARDS



# Western General Hospital - Introduction

## Place Brief:

This year is the 150th birthday of the Western General Hospital site and the development of a Place Brief will underpin the ambitions of NHS Lothian to continue to deliver health services from here long into the future.

The proposed Place Brief will provide a flexible framework for the future phased development of the Western General Hospital Site and should allow for individual projects to be delivered over the next 20-30 years. Work has already commenced in upgrading cancer service facilities with proposals in gestation for a new state of the art regional cancer centre to be built on the site in the future. A new Renal Satellite facility is also currently being progressed.

The Place Brief will be led by NHS Lothian and developed in consultation with all key stakeholders in collaboration with the City of Edinburgh Council. The Place Brief will be subject to ratification by the City of Edinburgh Council through a formal committee process.

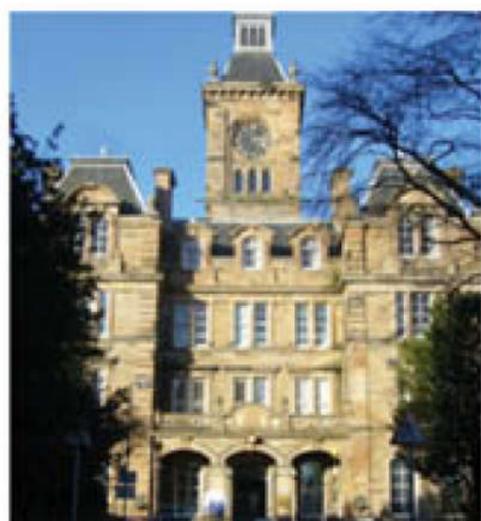
This is an opportunity for the wider community to support the Place Making for an important historic health facility in Edinburgh. It should build on the heritage of the site and the more local linkages in particular. The currently proposed Aims are identified on the right.



Aerial View of the Site

## Our Aims:

- To provide a future site Vision to 2045
- Supporting the vision for the clinical service model on site
- Providing programmes and sequencing of potential projects
- Incorporating the co-location of other organisations and services in proposals
- Reviewing and interrogating work already progressed
- Proposing alternative options for the Health Services site and relocation of services
- Proposing future site development options which are flexible
- Proposing improved clinical adjacencies and pathways
- Mapping out the programme and sequencing of all options
- Including site infrastructure improvements on a phase by phase basis
- Identifying a number of long term options for the potential development
- To achieve value for money



1. The Clock Tower



2. Royal Victoria Building



3. The MRC Institute of Genetics and Molecular Medicine



4. Courtyard at Anne Ferguson Entrance



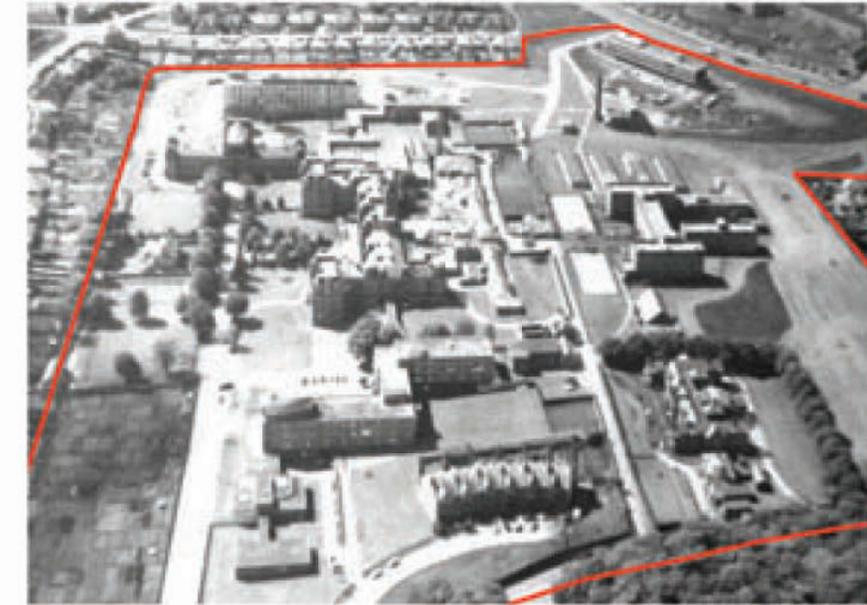
# Western General Hospital - Site History - The First 150 years



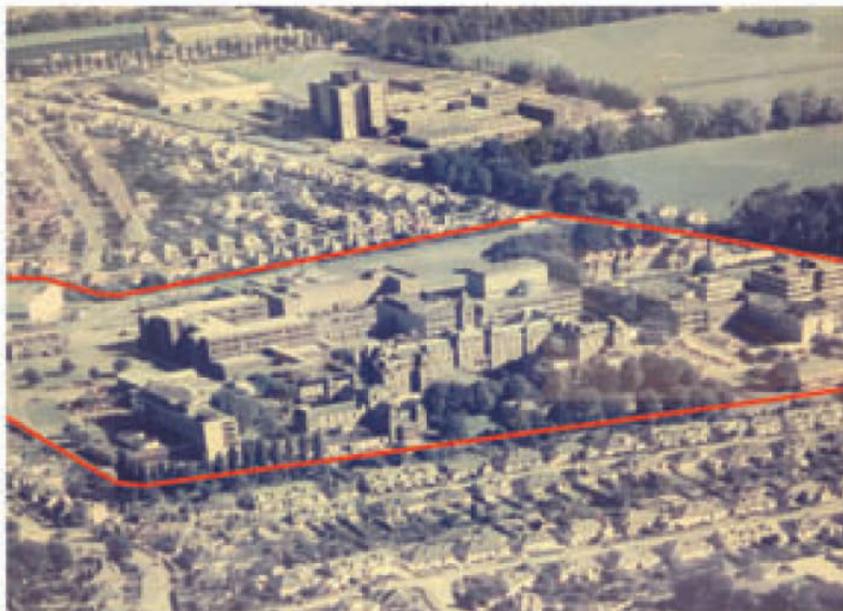
View to Clock Tower building from South West circa 1920's



Map of site Circa 1930's (Current Site Boundary in Red Outline)



Site Image Circa 1960's



Aerial View from the 1970's

The Western General Hospital has its origins in the poorhouse for the parish of St. Cuthbert's but originally no accommodation was provided. In 1744 it was decided to remedy this by building a poorhouse. It was not until 1761 that the poorhouse was opened on the site of the present Waldorf Astoria (Caledonian Hotel). The institution included a school where orphans could be taught a trade or craft.

It continued to serve the needs of the parish's paupers until 1914 when the hospital was taken over by the Army and used for the treatment of Forces casualties. At the end of the war, the institution continued for several years to be administered by the Ministry of Pensions. It then returned to the control of the parish council and the west wing was refurbished to accommodate 120 sick poor under the name of Craighleith Hospital. Edinburgh Town Council took over Craighleith Hospital among others in 1929. A scheme of renovation and improvement was begun, the aim being to equip and staff it as a fully efficient teaching hospital. As a municipal hospital Craighleith changed its name to the Western General Hospital with 280 beds now available.

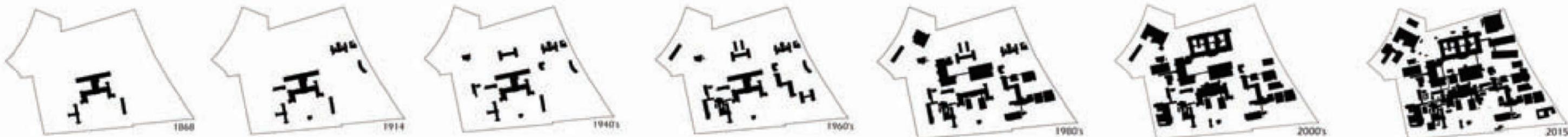
In 1933 it was provided with a residence for 12 medical students, and in 1936 a nurses' home was built. In 1948 the Western became part of the Edinburgh Northern Hospitals group of the South Eastern Regional Hospital Board, coming in turn under the control of the North Lothian District of Lothian Health Board in 1974.

In 1986 it formed part of the Royal Victoria, Western and Northern General Unit of Lothian Health Board. At this time departments of Leith Hospital began to be transferred to it as Leith was closed down. In 1994 the Western became a NHS Trust hospital.

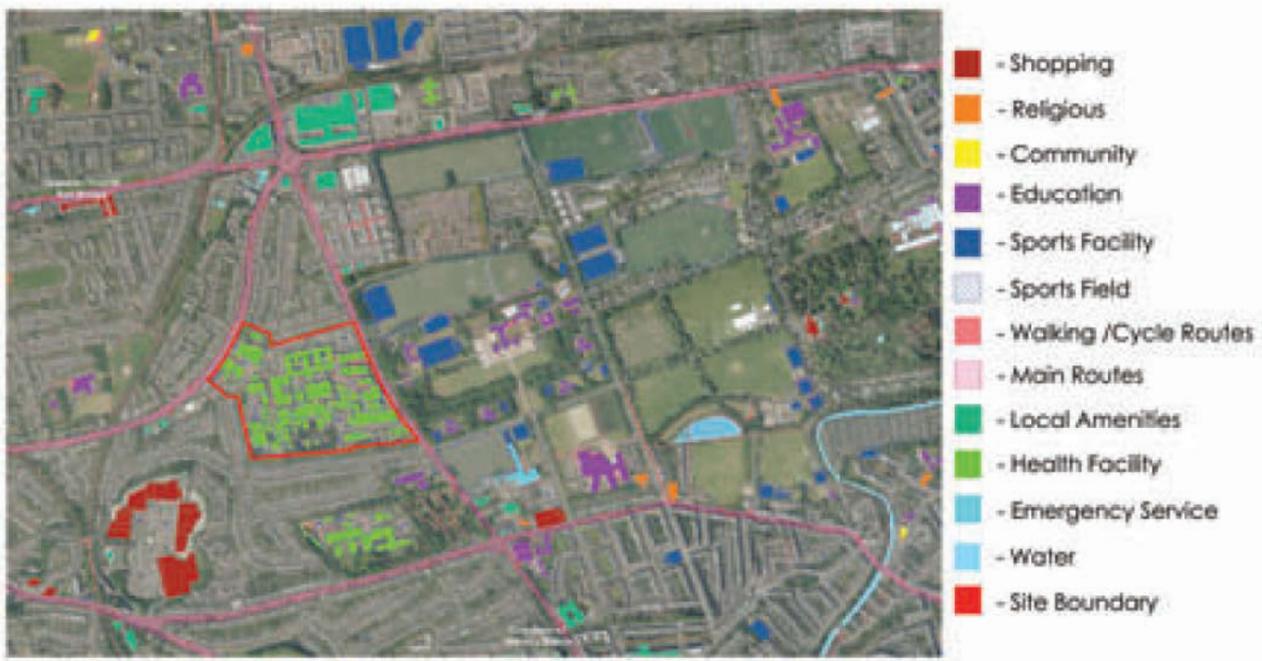
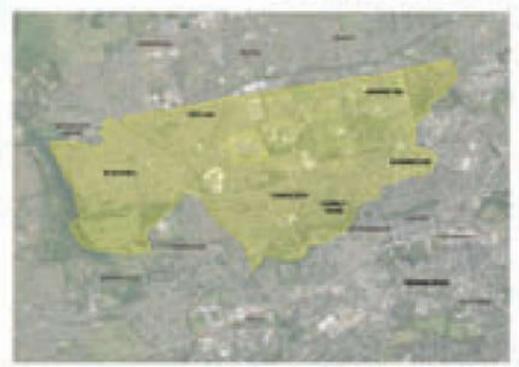
The Western has more recently developed through provision of a number of specialist units such as the coronary and gastro-intestinal units. It also currently has regional units for radiotherapy and neurosurgery.

The most recent buildings that have been constructed are the Anne Ferguson and Royal Victoria. These buildings provide an aspect of modern accommodation to the site. There has also been a series of smaller scale temporary buildings put on the site to satisfy short term accommodation requirements. These have ranged from 2 storey modular buildings to individual portable cabins. Although temporary in nature, they have tended to be used beyond their intended lifespan due to pressures on the site. The site layout of the early 1960's can still be seen but is masked with a multitude of extensions and temporary structures which make navigating the site difficult, and developing the site for the future in a controlled manner a challenge. The green spaces which were an integral part of the original and an aid to recovery and well-being are all but gone, replaced with buildings and tarmac.

## The Site's Historic Development

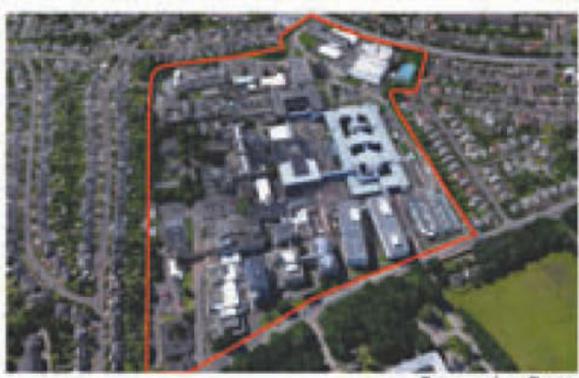


# Western General Hospital - Site Context



## Context: The City

The Western General Hospital is located to the North West side of Edinburgh, but just South of Ferry Road. The main site Access is off either Crewe Road South from the East or from Telford Road to the West. The hospital sits in a suburban context with many houses located to the North and South with playing fields and parkland to the East on the other side of Crewe Road South around the Fettes College site. The site itself is of mixed density with various scales of buildings that have been developed and redeveloped over the years. The largest buildings on the site are the Anne Ferguson, the Royal Victoria, the Alexander Donald and the historic Clock Tower. These are all approximately between three and four stories high. The site slopes down to the South and then further down to the East, that has a change of level of around two floors. Overall the level changes across site together with the actual building form means that there is the equivalent of at least 8 stories of building from the lowest part of the site to the highest floor level in the historic clock tower.



From the East

From South West

# Western General Hospital - Site Analysis

"Does this place have a positive identity?"

"Do I feel I belong?"

"Do I feel safe here?"

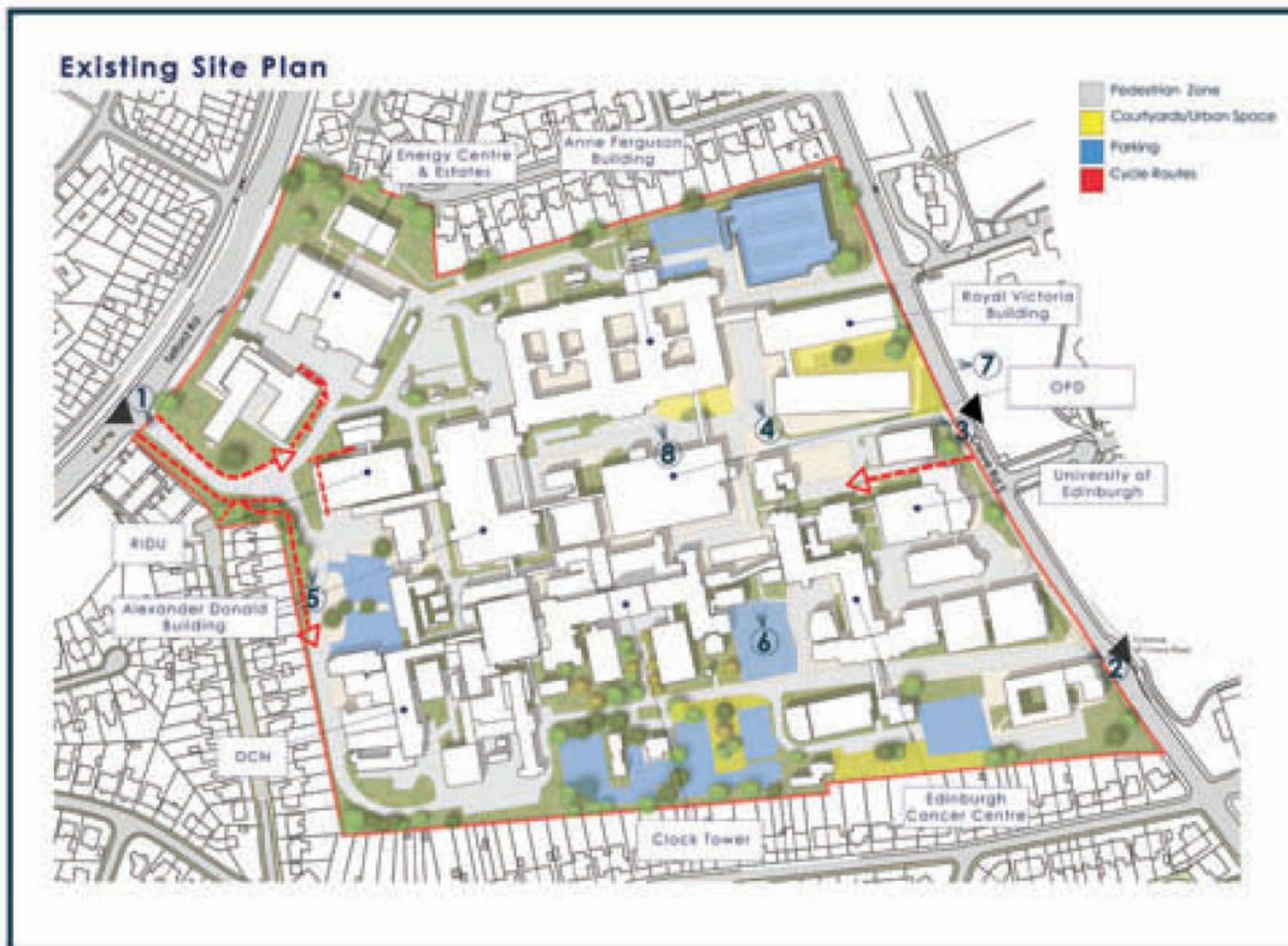
"Are buildings and spaces well cared for?"



1. One of three main vehicle entry points (Teiford Road)



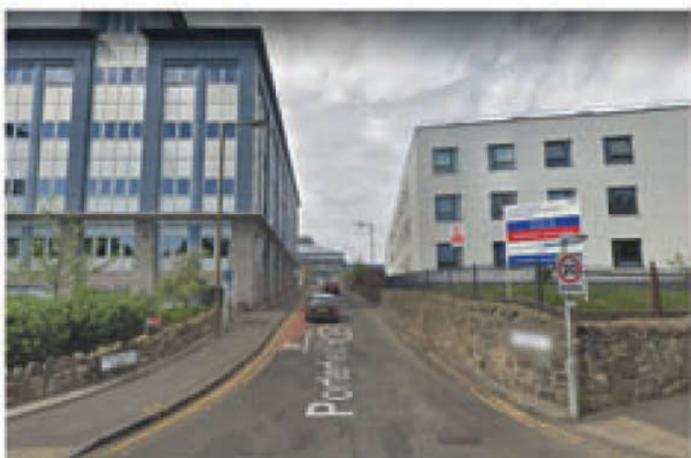
2. Many levels across the site equivalent to 8 levels from lowest to the top of the clock tower (Crewe Road)



4. One On-site bus stop on Porterfield Road



5. Open spaces for staff and visitors



3. Crewe Road vehicle entry point



7. External spaces mostly provided via enclosed courtyards



8. Landscaped entrance



6. Enclosed courtyard

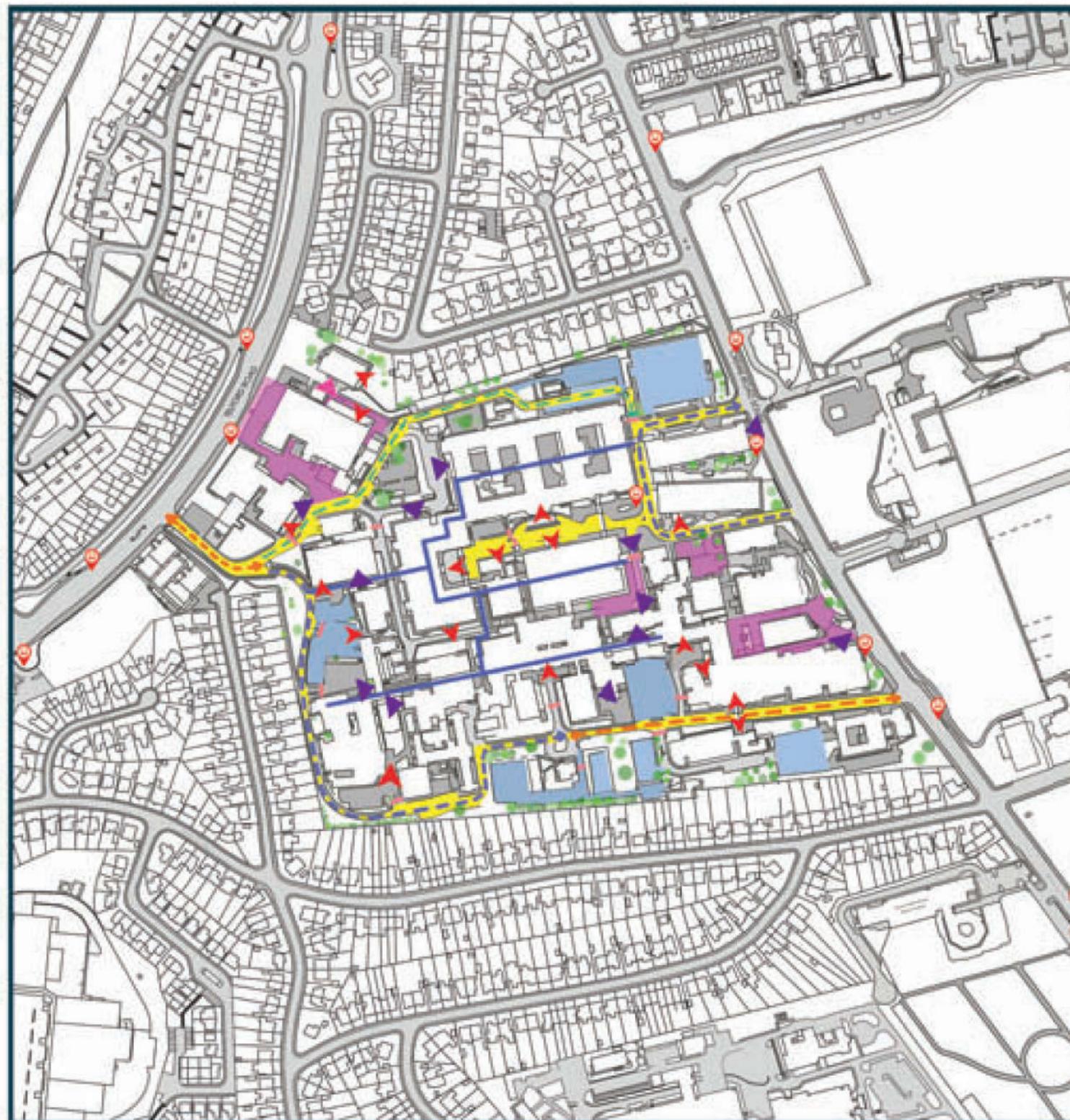


# Western General Hospital - Site Analysis Continued...

"Does public transport meet my needs?"

## Current Transport Information:

- The primary site circulation runs around the Southern edge and links Telford Road to Crewe Road.
- There is controlled circulation to the North of the site that is for servicing and staff ONLY.
- The roads are generally narrow and not suitable for large goods vehicles or buses.
- Approximately 760 parking spaces.
- Major Bus routes that have drop offs on Crewe Road and Telford Road.
- Bus stop within the site on Porterfield Road.
- The primary site circulation runs around the Southern edge and links Telford Road to Crewe Road.



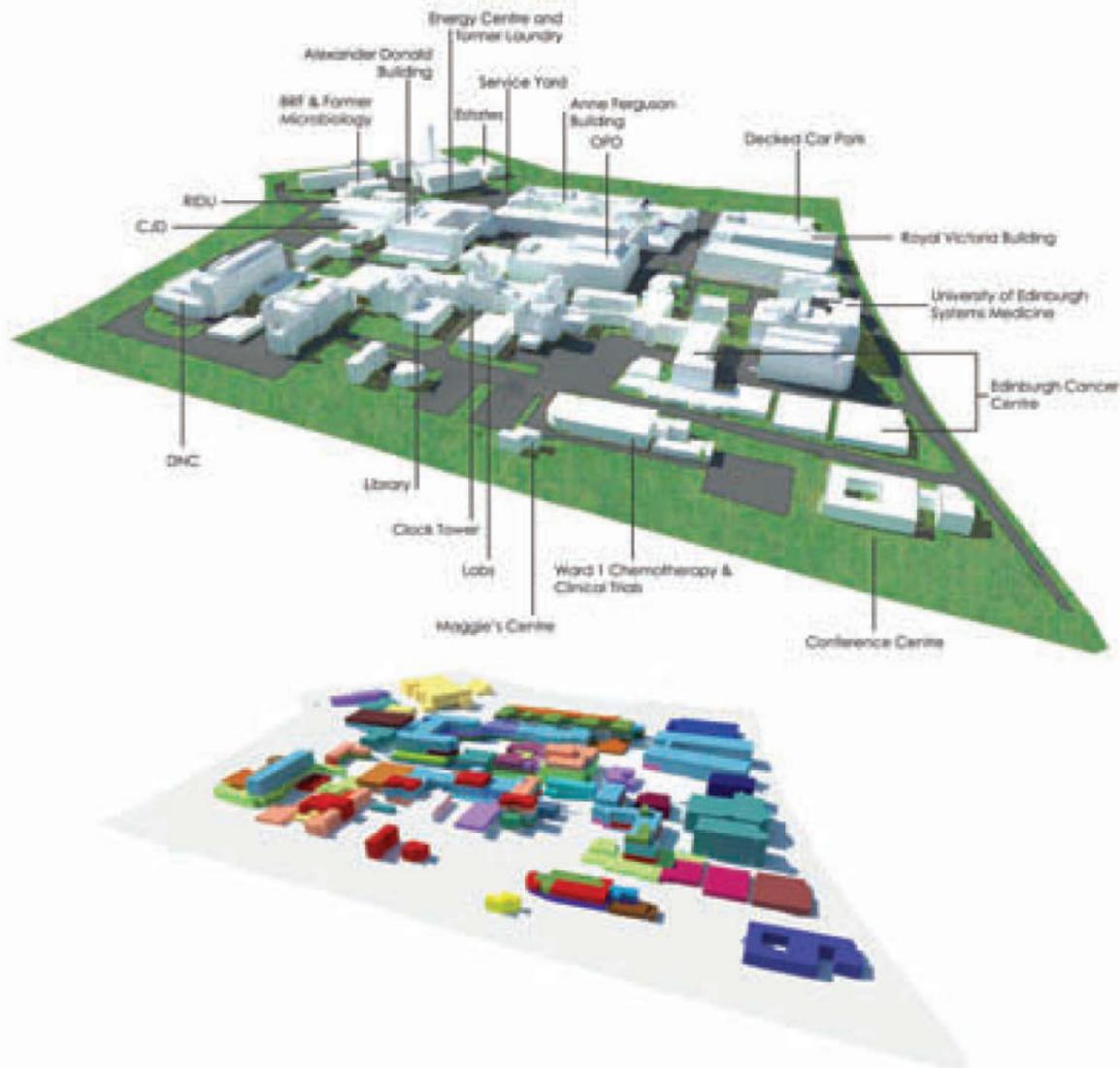
- Key Circulation Routes - To remain primarily accessible
- Existing Parking
- Building Service Access - To remain available
- Main Building Access
- Main Service Access
- 2-Way Vehicle Access
- 1-Way Vehicle Access
- Authorized Personnel Only Vehicle Access
- Main Internal Walking Routes
- Screened Road - Authorized Personnel Only
- Bus Stops



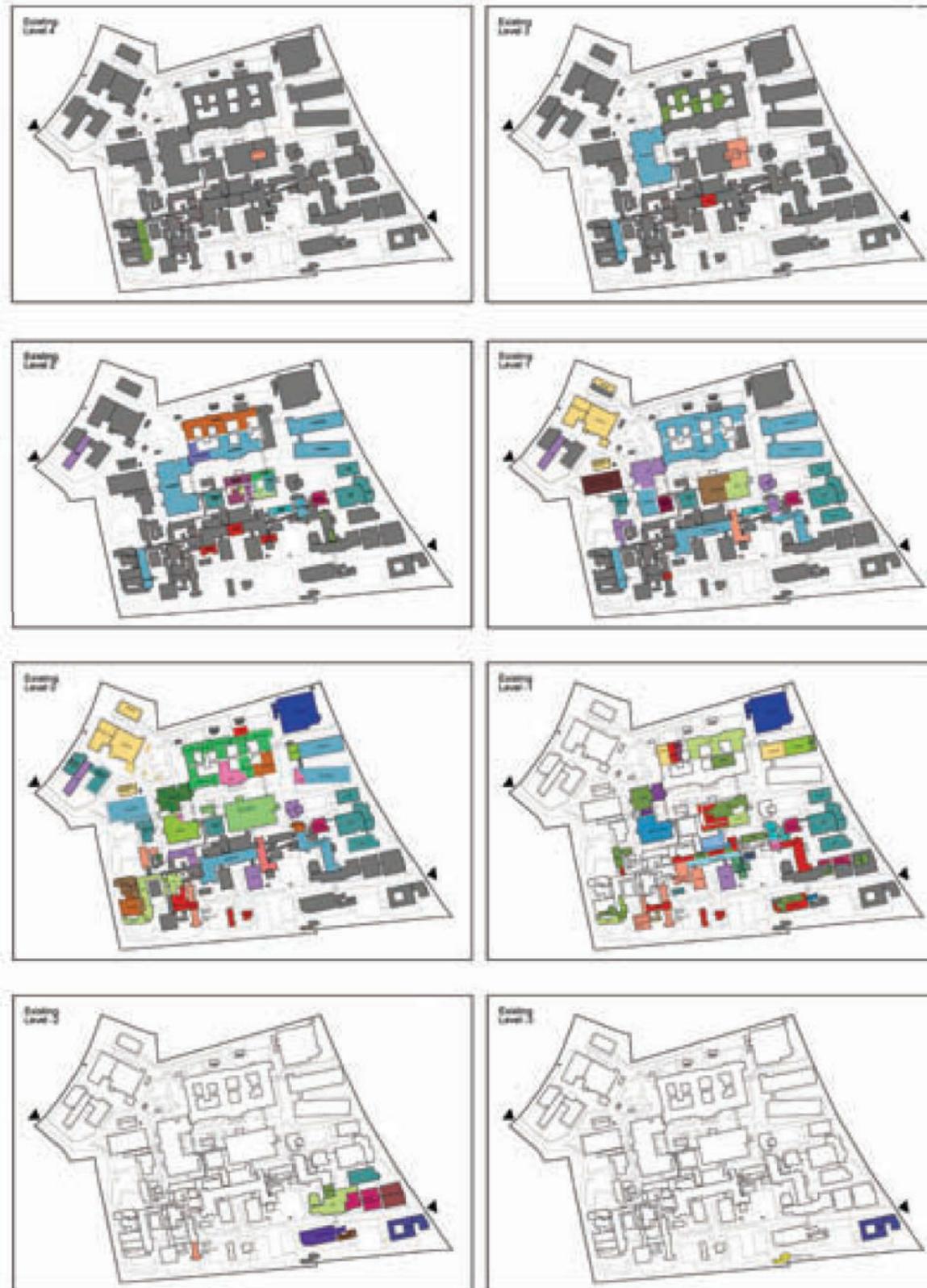
"Can I easily walk and cycle around using good quality routes?"



# Western General Hospital - Delivery of Services



*"Do facilities and amenities meet my needs?"*



Department	Colour
Admin	Red
Admissions & Assessment (ECC)	Orange
AHP	Yellow
Ambulatory Care	Light Green
Breast Unit (ECC)	Green
Car Park	Dark Blue
Chemotherapy (ECC)	Blue
Clinical Oncology	Light Blue
Clinical Support	Light Purple
CSSD	Red
Education	Light Green
Facilities Management (FM)	Yellow
Front Door Services	Light Green
Haematology (ECC)	Light Blue
In-Patients	Light Purple
ITU HDU	Light Purple
Labs	Light Purple
Maggie's Centre	Yellow
Main Entrance	Red
Medical Physics	Light Purple
Mortuary and Post-Mortem	Light Purple
NSS	Light Purple
Out-Patients (OPD)	Light Green
Palliative Care (ECC)	Light Green
Patient Hostel	Light Purple
Pharmacy	Light Green
Plant	Light Green
Radiology (ECC)	Light Green
Radioterapy	Light Green
Regional Infectious Diseases Unit (RIDU)	Light Green
Renal	Light Green
SCRN	Light Green
Staff Changing	Light Green
Staff Dining / Kitchen	Light Green
Theatres	Light Green
University of Edinburgh & Non NHS	Light Green

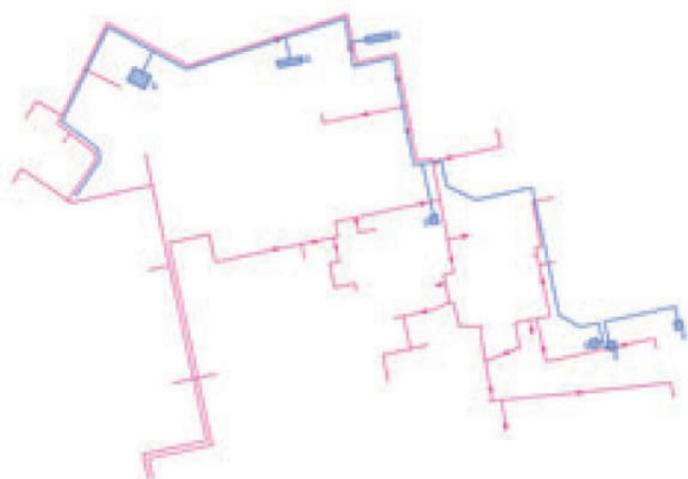
## Departmental Layouts:

The site slopes steeply both North to South and West to East and there is effectively a high plateau where the central courtyard is flanked by the Anne Ferguson, Alexander Donald and Out-patient buildings. This zone is the datum and the ground floor level here is defined as Level 0. All the other levels across the site are defined as either up or down from this and average height values have been determined for ease of reference as the actual number of separate "ground floor levels" is more than indicated on the following drawings. Drawings are coloured coded to reflect departmental function.

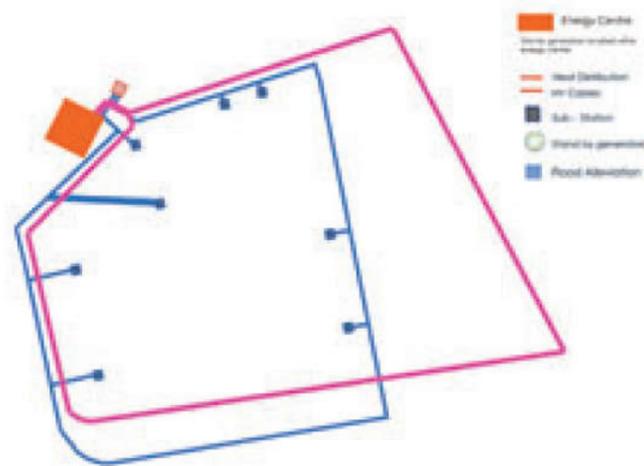
There are also several other stakeholders within the site. These include The University of Edinburgh, Maggie's, Macmillan Cancer, Cancer Research UK, Fight Against Cancer Edinburgh, Scottish Cancer Foundation, Breast Cancer Now, Kidney Research UK, Wellcome Trust, Diabetes UK, Edinburgh and the Lothian Health Foundation.



# Western General Hospital - Sustainability



Existing Heating and Power Network



Proposed Heating and Power Network

## Electric vehicle charging:

- Percentage of parking to align with council policy
- NHSL fleet to be upgraded
- Proposed infrastructure improvements to allow for additional load

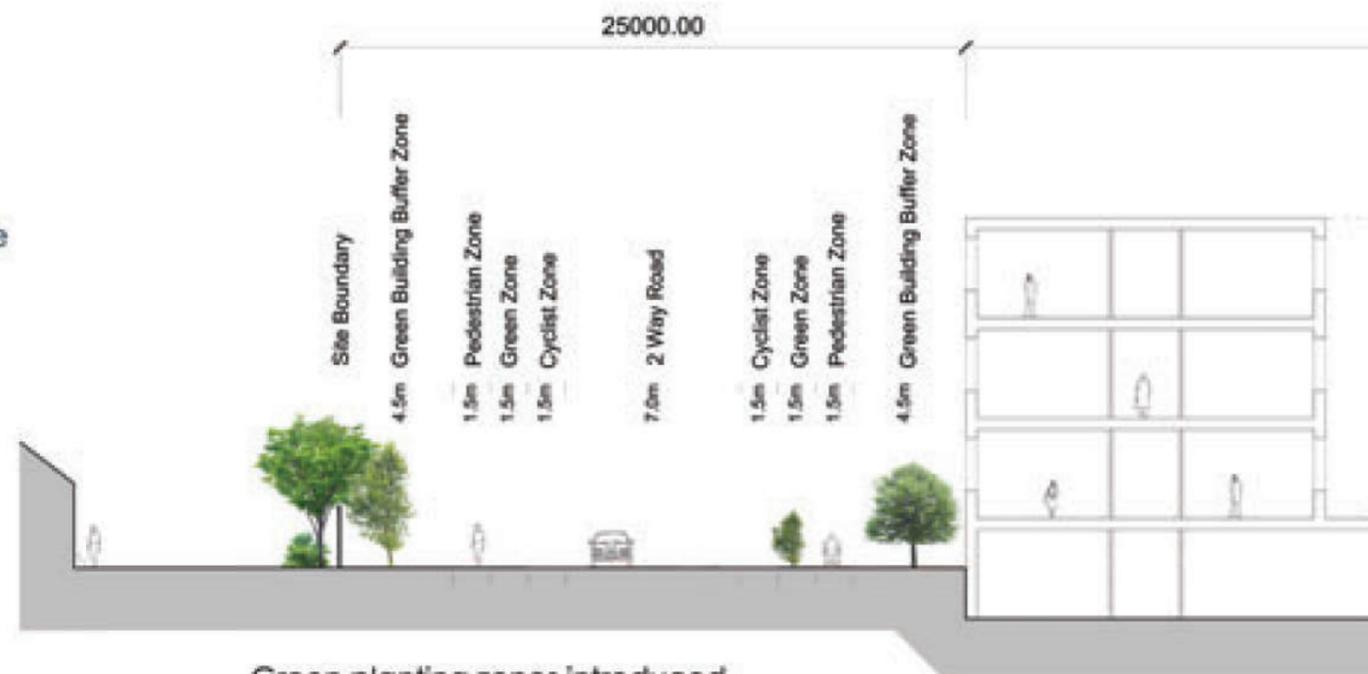


## Energy Infrastructure:

- Current arrangements to be upgraded to accommodate future site development proposals
- Proposed system reduces carbon levels to meet ambitious Scottish Government targets.
- Low Carbon technologies utilised.
- Potential connection to Edinburgh wide district heating networks.
- New infrastructure aims to provide 90% annual heat demand (up from 10% currently) And 60% future electricity demand (up from 25% currently)
- Improved resilience
- Reduce existing pressures on the site caused by backlog issues.
- Improved thermal performance.

## Green Travel:

- Improved public transport links
- Better on-site cycle facilities including storage
- Better pedestrian routes
- Reduction in vehicle movement on site



Green planting zones introduced to offset roads and footpaths



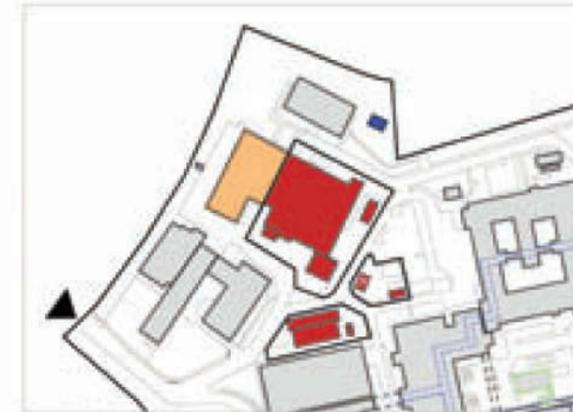
# Western General Hospital - Site Development - Current Projects

## Current Projects: This Section to be Co-ordinated With RMF Board

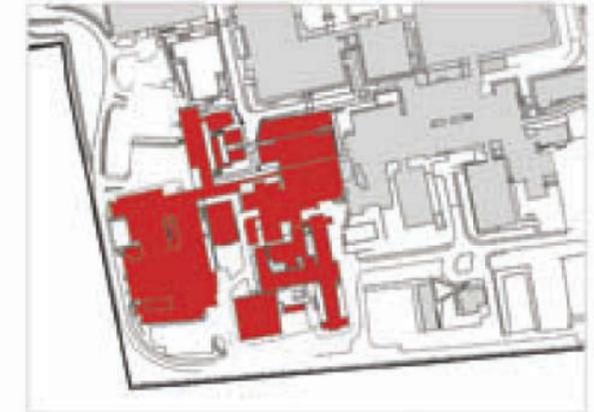
Due to the congested nature of the site, the ongoing reviews of the energy strategy and HV infrastructure and the pressures on utilities such as the steam distribution network, certain key decisions and initial projects will need to take precedence at the front end of the redevelopment programme. Some of these works should be considered essential and will become more difficult, costly and time consuming if they are not taken on board prior to the major redevelopment of the site.

The replacement of key elements such as boilers and the move away from steam should be developed in conjunction with the phases of the masterplan. Support services such as the pneumatic pipe system should be maintained and extended into the new developments. The development should allow new technologies and energy efficiencies to reduce the overall site load on services. Some key services may have to be relocated as part of the redevelopment.

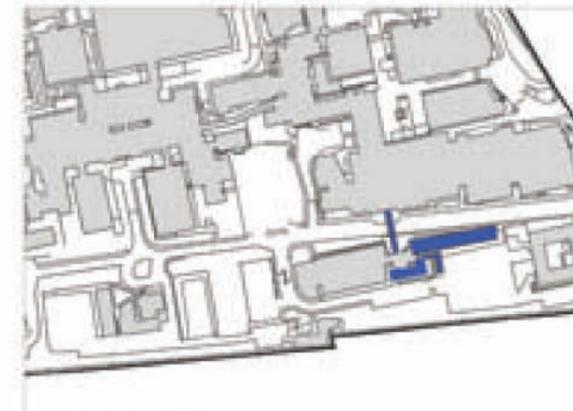
The transport issues within the site have been addressed to date within the confines of the existing site layout and operational requirements. Improvements can only be achieved by the redevelopment of the site. The proposals address this and allow for the road infrastructure to be upgraded in a controlled manner and align with the redevelopment at each stage. While it is recognised that during construction there must be disruption, when each phase is complete the new and old road network interfaces should be seamless and complement each other.



New HV Transformer and demolition of Laundry Building



DCN Demolished and Relocated Off Site



Renal Extension



New Linac's and Haematology and Oncology Redevelopment

## Site Development Options:



Existing



Option 1 -

The area to the East of the retained part of the Clock Tower block and where the OPD buildings is provide an area for large scale future development.



Option 2 -

There is a limited scope for future expansion on the site in this option though there are zones to the West of the retained Clock Tower and South of the new OPD / Ward block which provide future expansion potential.



Option 3 -

This option as per Option 1, provides good future expansion zones.



Option 4 -

This options provides the greatest scope for future expansion given its more limited new build footprint.



# Western General Hospital - Site Development Framework

## Key Drivers for site development:

The drawing below indicates a site section. The primary servicing is proposed from the existing service yard at Level -1 and this effectively links to a subterranean service street North to South and West to East which can permit tugs to be used for distribution. This zone can be used by other staff to access the various "buildings" from staff areas and in the new North Block. Patients and visitors routes are on the levels above and link to secondary node points to access the various departments and wards from the main arrival points.

There are a number of key and strategic drivers for the Masterplan and each Option effectively addresses these. They can be summarised as:

- Support the vision for the clinical service model on site
- Improve clinical adjacencies and pathways
- Provide flexibility in development sites and sequencing of potential projects
- Incorporate the co-location of other organisations and services on site
- Improve infrastructure
- Demolition of sub-standard estate (condition and functional suitability)
- Reduce backlog maintenance requirements
- Provide a future development framework for the site that can be supported by all key stakeholders
- Provide a suitable context for town planning dialogue and future planning approvals

*"Do I feel able to take part in decisions and help change things for the better?"*

*"Is there a range of spaces and opportunities to meet people?"*





# Western General Hospital - The Future Site?

"Does this place have a positive identity?"

"Do I feel I belong?"

"Do I feel safe here?"

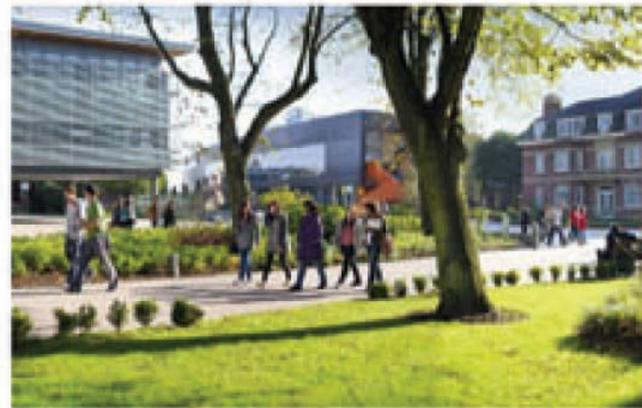
"Are buildings and spaces well cared for?"



Green Buffer Zones



Open spaces for staff and visitors



Safe pedestrian routes



Landscaped Entrance



Electric car Charging points



Landscaped Courtyards



On site bus stop

# APPENDIX 2

# SCHEDULE OF COMMENTS

**Site or property:**  
Western General Hospital

**Job number:**  
SV10537

**Client:**  
NHS Lothian

**Completed by:**  
Montagu Evans LLP

**Date:**  
January 2019

**Subject:**  
Comments received throughout the consultation process, both online and at the public events.

---

<b>Question 1</b>	<b>Page 1</b>
<b>Question 2</b>	<b>Page 9</b>
<b>Question 3</b>	<b>Page 17</b>
<b>Question 4</b>	<b>Page 26</b>
<b>Question 5</b>	<b>Page 35</b>

<b>Question 1: What do you like about the existing buildings on the Western General site? Do they contribute positively to the character and appearance of the surrounding area?</b>	
<b>1</b>	New RVB, so hard to access the hospital from the other two sides.
<b>2</b>	Yes.
<b>3</b>	History.
<b>4</b>	The clock tower is how I direct people to where they are going via Hospital Drive.
<b>5</b>	A lot of rundown and unused buildings on site which makes it look a bit neglected.
<b>6</b>	Yes, I love the original building.
<b>7</b>	I like the traditional buildings and the modern RVB. Much renovation required though.
<b>8</b>	The old buildings (e.g. clock tower building) add character, but most look quite tired interiorly, and untidy on the outside.
<b>9</b>	Not all buildings do. The Systems Medicine Building does; as does Ward 1; but the remainder offer little or no architectural significance. The trees should be kept.
<b>10</b>	No.
<b>11</b>	They are functional for health care provision. Some more so, some need maintenance. They do contribute very positively to the surrounding community. I am all of the below: a staff member, patient, visitor and local resident. Please amend available choices below as this will be true for many people.
<b>12</b>	Large windows, natural light. Prefer stone brickwork to match surrounding buildings. Nice area to live and work.
<b>13</b>	It is a beautiful, traditional building.
<b>14</b>	Some very characteristic others are is such a state that a bull dozer would be a blessing for them, especially the "temporary ones."

<b>Question 1: What do you like about the existing buildings on the Western General site? Do they contribute positively to the character and appearance of the surrounding area?</b>	
15	The site is a unique blend of old and new buildings which fit in well with surrounding areas.
16	I don't like the current buildings on the Western General Site as they don't have a cohesive appearance and many look very old and worn.
17	Nothing in particular. The hospital has evolved over many years so the buildings are all quite different.
18	Whole site is difficult to navigate because all the buildings have been added to for years. The older buildings should be preserved.
19	They are fairly easily identifiable and blend in with the surroundings.
20	Some of the buildings do but others definitely do not.
21	Beautiful buildings and grounds. It would be a shame to lose this.
22	No, some of the building look old, dilapidated and bring the visual of the area down. The only positive is that they aren't too high so are disguised by the surrounding houses.
23	Some of the period features of the building around the clock tower are stunning.
24	The newer builds - the Anne Ferguson & new Royal Victoria buildings look good, the University building is stunning and the little garden areas are lovely.
25	The whole site is muddled and difficult for patients and visitors to navigate clock tower and d block are no longer fit for purpose.
26	I think they have character but places like RIDU need a facelift.
27	Unique buildings, mix of old and new.
28	I like the mix of old and new, I will like them to be refurbished instead of knocking them down and starting again.
29	I like the quiriness of the Western being so many buildings and having so much history jumbled together but don't feel strongly enough that they contribute to the character.
30	No - old and run down and disjointed looking.
31	Garden areas seats for patients to sit.
32	Some are modern and clean and look fit for purpose which is far more important than how they affect the surrounding area.
33	Yes.
34	Some do others are deteriorating.
35	Old buildings are nice but a bit of a mixed bag of new and old and not easily accessible where new buildings have been added to old.
36	I don't like any of the WGH buildings, they all look in need of updating.
37	They are classical hospital buildings of their time & the clock tower is an iconic feature.
38	There are a couple of nice buildings (the clock tower and the lions, Turner House and Maggies).
39	No.

<b>Question 1: What do you like about the existing buildings on the Western General site? Do they contribute positively to the character and appearance of the surrounding area?</b>	
40	Some do some don't.
41	Clock tower and d block wonderful old buildings left to rot.
42	Place is run down. The nice features (like the clock tower) are never maintained.
43	It is possible to access the whole site using internal corridor network allowing patients to visit other areas such as cafés and gardens with relative ease e.g. by wheelchair, on beds. This is good for mental health of patients.
44	The buildings fit with the surrounding area although some buildings are dated and need addressed.
45	The buildings are a real mixture. The AFB and RVB are good. The ADB looks worse than it is! I know that wards 22, 23, 24, 25, 26 and 27 are getting refurbished which is great. If only the clock towers clock actually worked!
46	I like the clock tower and d block as it has character but lack of money spent on it its run down in some parts.
47	A lot of the older buildings are run down so look dilapidated.
48	Not really, there's a real mix of old and new and disjointed therefore hard to navigate.
49	There are still some dilapidated small buildings behind main ones which look bad. Signage has improved recently but the buildings are still too disjointed.
50	The newer buildings on site look cheap, and do not look like they will still be standing in 50 years. The poorhouse, old Urology block, OPD building and Ward One are the few buildings that actually have some character.
51	The entire WGH site is a jigsaw puzzle of loosely connected buildings that are in effect a maze to patients and visitors. No overriding planning seems to be in effect and the mismatch of appearance and styles of buildings is by no means pleasing to view. The older buildings prohibit and restrict many options to modernise site facilities.
52	I think some of the buildings have character and should be retained but a lot of the outbuildings should be removed and make way for better staff office space/car parking for patients and staff.
53	No, just a mixture of old and new buildings.
54	Clock tower good for historical interest.
55	They need to be rebuilt with state of the art facilities.
56	No, the buildings are old and run down.
57	BLANK
58	Yes think that they sit well within the area. Like the new and the old.
59	BLANK
60	I love the Victorian buildings externally - inside they have been adapted and don't really match their exteriors. I'm quite neutral about the new ones. The old ones match the old houses round Craighleith.
61	Hospital looking tired.
62	Buildings have practical use. They do positive job.

<b>Question 1: What do you like about the existing buildings on the Western General site? Do they contribute positively to the character and appearance of the surrounding area?</b>	
63	A sense of history.
64	No.
65	No.
66	The architecture of the old buildings.
67	Buildings like the clock tower are nice, but they're obscured by the hodge podge of semi-permanent buildings and car parks.
68	The igmm building looks good and the Anne Ferguson and royal Vic are nice to be in and work in. The cancer centre with bridge is very ugly and there are too many Porto cabins spoiling the old block.
69	The existing buildings from Anne Ferguson Building look okay, but unfortunately you notice the mismatch from the other Building i.e. infections unit. Which out on its own. And appearance does not look good at back Building. It just looks like car park.
70	The old buildings are lovely but surrounding ones look tired and dated.
71	The older building are nice but not fit for the job. Nice character, not made for the job for today though.
72	Newer buildings okay. Older buildings need upgrade.
73	Nothing, none of them have any character except the clock tower building and d block, which are so run down that they aren't fit for purpose.
74	Historical building that adds character to the area.
75	I don't think there is much to like. It's an old building that's been added to over the years with newer buildings and it's a hospital not a place to go to be aesthetically pleasing.
76	Some of the original buildings are lovely.
77	Old and outdated, the old building needs to be completely pulled down and replaced by a modern fit for purpose including a full size AEU to serve North and West Edinburgh.
78	Nothing, really run down.
79	They are a mish mash of different eras.
80	Yes.
81	Empty buildings no.
82	The more modern parts of the hospital are well laid out and connected. It's reasonably well served by buses and some call close to the main buildings. Each of the buildings retains a strong identity which aids navigation and provides the hospital with a stronger character.
83	BLANK
84	It has a heart and soul that new builds lack, too clinical.
85	I like their look, please preserve the older buildings where possible. They are iconic and fit in well with the area.
86	The new buildings look quite good (cancer research I think). The car park double decker is a little unsightly!
87	Yes. They have good character.

<b>Question 1: What do you like about the existing buildings on the Western General site? Do they contribute positively to the character and appearance of the surrounding area?</b>	
<b>88</b>	There is not much to like about the current buildings at the WGH, they are a varying assortment of different decades of architecture and all look out dated and ugly. They detract from the surrounding area, with miles of walking to get from one area to another. Parking is a complete nightmare (unless you are a cancer patient as I am).
<b>89</b>	Nothing.
<b>90</b>	Crewe road south aspect far better than Telford Road.
<b>91</b>	The newest development looks modern and fit for purpose. The historical clock tower building is attractive and blends well with other historic buildings elsewhere. The remainders are ugly and ramshackle and very difficult to navigate around. The porta cabins look messy. The Anne Fergusson building is better and seems to work well. The new RVH building is good. The green spaces are essential. Look at the surroundings, landscaping and planting at Forth Valley Royal Hospital if you need a good example. It's tremendous and uplifting.
<b>92</b>	I was in the day surgery area and then the temporary ward 15. The old part of the hospital is in some parts quite worn and narrow corridors and tiny lifts the further into the old parts you go.
<b>93</b>	Yes especially the clock tower building.
<b>94</b>	There is absolutely nothing about the existing buildings on the Western General site that would contribute positively to any surrounding area.
<b>95</b>	The newer buildings perhaps, but there are old and less attractive buildings which do nothing to inspire confidence!
<b>96</b>	Yes.
<b>97</b>	Not really.
<b>98</b>	Far too focused on roads and cars, rather than pedestrian access.
<b>99</b>	No. They are sprawling and ugly.
<b>100</b>	I think they're functional rather than aesthetically pleasing but I don't mind that.
<b>101</b>	A bit confusing. Does not contribute positively to the local area.
<b>102</b>	BLANK
<b>103</b>	No.
<b>104</b>	Some buildings are nice and add character, however others need some maintenance.
<b>105</b>	It's an "interesting" mix... don't really mind as long as it is functional and any changes improve the work of all the great staff and provides access for the patients.
<b>106</b>	The old buildings are lovely but not fit for purpose. The old and new clash.
<b>107</b>	Interesting mishmash of old and new. Always lots of flowers in the gardens.
<b>108</b>	Low level building. Need updating bit old and don't give a positive vibe.
<b>109</b>	I only like the 'old' buildings such as the clock tower part, the rest (apart from royal Victoria building is too dated and does not contribute to any part of the area.
<b>110</b>	Ugly looking exterior, especially from Telford road side.

<b>Question 1: What do you like about the existing buildings on the Western General site? Do they contribute positively to the character and appearance of the surrounding area?</b>	
<b>111</b>	The original buildings.
<b>112</b>	Yes.
<b>113</b>	No, it's a pretty ugly, utilitarian site.
<b>114</b>	The clock tower is well known and recognised
<b>115</b>	It's old. It was too hot in the summer. People with Pyrexia in boiling rooms with fans blowing hot air.
<b>116</b>	The older buildings have character and suit the Craighleith side.
<b>117</b>	The Royal Victoria building is fabulous. Modern light airy. The rest of the site could do with a face-lift.
<b>118</b>	There's little to like. Leaks and cracks everywhere. Every time we change something in the OPB we risk asbestos exposure.
<b>119</b>	I like the cafe and the coffee shop in the Anne Ferguson and Royal Victoria areas of the hospital. They're nice areas to socialise with relatives I'm visiting.
<b>120</b>	No! It's a mess and so un patient friendly. The clock tower is nice.
<b>121</b>	They're ok. In need of modernisation in places and more green spaces would be good.
<b>122</b>	Not really relevant, given there are a mix of building ages, types and purposes. It is a hospital after all. Money spent on new buildings could be much better spent on frontline health services.
<b>123</b>	The older buildings are lovely to look at but are in need of upgrading.
<b>124</b>	Mixture of old and new.
<b>125</b>	New buildings more pleasing to the eye than the additions added on to original buildings.
<b>126</b>	Steeped in history.
<b>127</b>	No.
<b>128</b>	The older style buildings allows air into it. As a bank staff worker I work across all NHS Lothian sites and find that newer buildings like RIE put me off doing shifts due to the heat.
<b>129</b>	I think they are very disjointed and not appropriate to today's medical necessities. However, the clock tower etc. entrances are pretty and would be nice to keep.
<b>130</b>	No don't. Sadly the site is a mishmash and very muddled. Perhaps the only light is the new Replacement for the Royal Victoria MoE service. A nice simple design.
<b>131</b>	I love that even though it looks like a commercial site, it is softened with gorgeous landscaping making it more welcoming for patients and visitors.
<b>132</b>	They are not particularly pleasing to the eye or blend in.
<b>133</b>	Some of the buildings look ok but it's a bit of a mix and match.
<b>134</b>	Easy to access. Central. Accessible parking that is free.
<b>135</b>	It's not offensive.
<b>136</b>	Buildings not too high. Mixture of architecture.

<b>Question 1: What do you like about the existing buildings on the Western General site? Do they contribute positively to the character and appearance of the surrounding area?</b>	
<b>137</b>	Sadly there is very little to commend about the present buildings and neither detract or enhance the surrounding area.
<b>138</b>	Like the history behind the old buildings but the "hospital" appearance of the AFB + RVB.
<b>139</b>	Not really quite a mish mash of different buildings.
<b>140</b>	Nothing, they should be demolished.
<b>141</b>	Nothing in particular at present.
<b>142</b>	Clock tower building needs some love but still looks good. It's a bit of a patchwork quilt...the rest of the buildings and porta cabins are pretty unattractive.
<b>143</b>	I love the old building especially the clock tower.
<b>144</b>	Not really. Mish mash of old and new buildings with too many porta cabins stuck in between buildings.
<b>145</b>	Good mix of historic and modern.
<b>146</b>	The old buildings are characterful (at the end of the Lion's entrance) but are likely to be showing their age externally and internally. The new(ish) build Anne Ferguson building is fit for purpose with a nice cafe area, as is the new RVB. The ARU building is looking tired now. The Oncology bays are extremely small- not allowing for privacy (you can hear all the conversations staff are having with patients).
<b>147</b>	I like the new RVH.
<b>148</b>	New Victoria building is lovely.
<b>149</b>	I believe so yes.
<b>150</b>	No. Old and falling down.
<b>151</b>	I like the character and history of the old original buildings but think they do not suit a modern hospital environment.
<b>152</b>	Character makes it more homely and less sterile than the Royal.
<b>153</b>	I like the old buildings in appearance from the outside, but they are not fit for purpose on the inside.
<b>154</b>	Yes.
<b>155</b>	No.
<b>156</b>	Good location.
<b>157</b>	No.
<b>158</b>	Clock tower and Lions buildings do. Otherwise it's just a maze of corridors.
<b>159</b>	The rehabilitation centre and the modern buildings are much more refreshing to attend as a patient. The older parts of the hospital are in need of a revamp to be more accessible and clean.
<b>160</b>	Some of the buildings, RVB, AFB, ADB are ok. The old laundry and old lab buildings are an eyesore and should be demolished. They really are a blight on the landscape.
<b>161</b>	Not sure I like anything. Too many interlinked buildings.

<b>Question 1: What do you like about the existing buildings on the Western General site? Do they contribute positively to the character and appearance of the surrounding area?</b>	
<b>162</b>	WGH doesn't resemble an airport - like RIE and I like the fact that it is a collection of buildings of different ages - but perhaps this is a functional drawback for staff and admin? It needs more green space / trees / outdoor created areas.
<b>163</b>	BLANK
<b>164</b>	BLANK
<b>165</b>	The existing building is currently run down in areas. They need a bit of uplift. The cancer centre wards could do with some TLC and also more parking spaces.
<b>166</b>	It's a dense and complex area not always beautiful. It's a safe and relatively quiet neighbour (my property in Davidson Road borders on its boundary). Some newer existing buildings are very stark e.g. decontamination unit.
<b>167</b>	BLANK
<b>168</b>	Street lights on the left of SHSC (and lights coming from other buildings) are aimed high and should be tilted down to prevent glare and brightness shining into local resident properties - especially at night.
<b>169</b>	Not much. It is a very large congested site with a whole lot of very different buildings - some modern - but many quite old and in need of upgrading and maintenance.
<b>170</b>	Nice mix of old and new - but could be substantially improved.
<b>171</b>	Although the clock tower is lovely and should be kept, the inside is in dire need of renovation but has great potential. Although large and piecemeal the site does not dominate over the local area.
<b>172</b>	Stone building with character, new buildings e.g. Victoria Hospital Building, covered walkways e.g. to Anne Ferguson Building, IGMM Building fantastic, green areas e.g. garden by cancer centre, wild flowers in front of IGMM.
<b>173</b>	D Block and Turner House are one only buildings with character and that fit with the surrounding area. The Anne Ferguson Building has a new charm and is clean, tidy, includes RUB. The rest of WGH site is tired, old and mismatched. Despite regular cleaning, many areas have a grubby appearance and do not ensure confidence as a national or local centre for healthcare quality. The spiritual care centre chaplaincy is dire and yet a vital area for people in distress.
<b>174</b>	People regularly get lost. I'm happy to provide directions but if I'm hurrying somewhere, I know to avoid certain routes where I'm sure to be stopped.
<b>175</b>	Clock tower and IGMM. Very little else - an array of porta cabins and ad-hoc development.
<b>176</b>	BLANK
<b>177</b>	Yes I think WGH has some very characteristic and interesting buildings. Please preserve the clock tower and all its history.
<b>178</b>	Historic!! Blends into the general façade of Edinburgh well. A piece of history worth being preserved for future generations.
<b>179</b>	The clock tower is iconic but the other 'older' buildings are not fit for purpose. These should be demolished and new efficient buildings erected. Anything 60s onwards should go. The site is a mishmash of buildings erected in spaces that are no flowing or conducive to a positive working environment.

<b>Question 1: What do you like about the existing buildings on the Western General site? Do they contribute positively to the character and appearance of the surrounding area?</b>	
<b>180</b>	Buildings seem to be un-uniformed, feeling like add on rather than well thought out. Some areas look poorly maintained, old-fashioned and tired.
<b>181</b>	BLANK
<b>182</b>	The older buildings should be preserved if possible as they do fit in well with the surroundings.
<b>183</b>	No. Been here on and off for 35 years. It's a disgusting 'dump'!
<b>184</b>	There's not much to like, really. It's a higgledy-piggledy mish-mash: glossy, glassy modernistic buildings, tired, dreck and ugly 60s and 70s buildings and faded 19th century elegance. The orangey-red 'bridge' and associated buildings just after the Edinburgh Cancer Centre are ugly and unwelcoming. The tubs of flowers all around the hospital and the existing trees are a delight and the WGH site management team are to be congratulated for keeping the flowers and plants spick and span and cheery. Some departments also have trees in the courtyards and house plants to and/or in the O/P departments and waiting areas. Please, please keep all the flowers and trees and plants and make room for as many more as possible. Please also keep views to the south of the Pentlands in Wards and Sitooteries (glassed in balconies in Ward 6). Ensure any new builds have pleasant and life enhancing outlooks - views, trees, hills and beyond. And if outlooks are onto internal courtyards (like the uninspiring views at the Royal Infirmary of Edinburgh) add some cheery murals as its infinitely depressing looking out onto blank walls. While I accept that some areas can't have natural daylight such as some Radiotherapy Treatment areas, dark airless spaces with no natural light (e.g. some examination rooms, waiting area at Brachytherapy) are unacceptable and depressing as daylight is important for patients, visitors and staff. And in the light free zones / rooms the air conditioning is noisy and distracting. I definitely wouldn't want to work in artificial light throughout a 12 hour shift.

<b>Question 2: What types of new spaces would you like to see on the site?</b>	
<b>1</b>	Parking for staff and patients.
<b>2</b>	Parking.
<b>3</b>	More history.
<b>4</b>	Non clinical, peaceful ones, sometimes patients, carer's and staff need a little of Oasis of calm in the hustle and bustle of life at the WGH.
<b>5</b>	More garden areas and more parking.
<b>6</b>	I would like more green spaces.
<b>7</b>	A patient and carers green area for reflection and relaxation.
<b>8</b>	Outdoor garden area for inpatients to get some fresh air. Canteen/ shops of a larger variety and possibly more cash machines?
<b>9</b>	Joined up and fully co-ordinated. Consider using the old RVH as a buffer site to account for displaced services during the re-build and construction phases.
<b>10</b>	More parking.
<b>11</b>	Setup very functional as it is. Existing buildings need maintenance. That's all.

<b>Question 2: What types of new spaces would you like to see on the site?</b>	
<b>12</b>	Sunny garden for lunchtime. New Research Offices for NHS research staff as we use substandard offices with no central heating.
<b>13</b>	I wouldn't -the site is already bursting at the seams, and any further building development should be moved to a different site.
<b>14</b>	Modern buildings with classic design in keeping with D block and Clock tower.
<b>15</b>	Car parking and retention of/more green space.
<b>16</b>	More free car parking for patients and staff and more communal outdoor green spaces. More internal meeting rooms and admin offices.
<b>17</b>	No opinion.
<b>18</b>	Better disabled access. Quiet areas.
<b>19</b>	More green space with seats and shelters some trees and shrubs so people can get away from what is going on inside the buildings.
<b>20</b>	Green space, improved parking for patients, more modern buildings.
<b>21</b>	Old buildings repurposed for 21st century working. More car parking.
<b>22</b>	More parking as the surrounding houses suffer for the lack of parking. Would be nice to see more greenery on site, similar to what was done with the new royal Victoria building.
<b>23</b>	Rehabilitation services.
<b>24</b>	More parking - it's a nightmare for patients, visitors and many staff, which makes a potentially worrying event so much more stressful.
<b>25</b>	Purpose built clinical and non-clinical work areas for all staff.
<b>26</b>	Parking.
<b>27</b>	Car park and better, more accessible canteen. The wards cafe is ok but would be nice to have a place patients could go to get an actual meal with visitors.
<b>28</b>	Keeping the site acute. Getting spaces that were temporary a permanent home. I.e. - RIDU minor injuries. Old building that are empty just now being used or refreshed. Car parking is lacking completely for staff and not well organised for patient which is a horrible added stress for people.
<b>29</b>	Departments in temporary buildings moved to a permanent location within the WGH.
<b>30</b>	Clean, defined minimalist for clinical areas with warming welcoming waiting areas - TV on walls which is updated with any delays on 'today's' clinics and the names of doctors actually on as opposed to those whose name is associated with clinic template sheet. Rotational artwork for variety when coming back for repeated visits. Spacious breakout areas for staff within their own service area. Large canteen split between sofa waiting area and dining area per SJH.
<b>31</b>	More car park spaces for staff and patients.
<b>32</b>	More secure bike parking and outdoor staff seating areas.
<b>33</b>	Green areas.
<b>34</b>	Parking.
<b>35</b>	Some green spaces between buildings would be nice.

<b>Question 2: What types of new spaces would you like to see on the site?</b>	
<b>36</b>	More parking, modernised buildings.
<b>37</b>	I think that the minor injuries porta cabins type of building would work well for other specialities where patients are well.
<b>38</b>	More parking (a multi-storey car park for staff and patients) Buildings that blend harmoniously with the existing buildings and the neighbourhood a cancer centre with all services co-located and a clinical trials area that is safe and comfortable for patients.
<b>39</b>	Parking for staff.
<b>40</b>	Staff parking.
<b>41</b>	Park and woodland.
<b>42</b>	Bicycle Sheds. More parking facilities.
<b>43</b>	More areas for patients to visit within wards and other areas of hospital that are less clinical and more geared up for mental health of patients. St. George's London and many children's hospitals are already doing this.
<b>44</b>	Car parking and some green space.
<b>45</b>	More continuity between the areas. And a clock tower clock that works.
<b>46</b>	A decent multi storey car park built or flatten the old RVH and make that into staff parking to ease the congestion.
<b>47</b>	More windows on buildings.
<b>48</b>	Outdoor space, expand Maggies.
<b>49</b>	Access to outdoor spaces for patients to go and sit. Nicer staff dining area. More visitors' toilets on the main corridors. Manned reception areas at each main door.
<b>50</b>	A bit more greenery and a bit more tree planting in spaces that could support this. More thought going into planning, even a bit more expense going into getting buildings that are architecturally pleasing, fit for purpose, that will last and that don't make patients feel "hospitalised". After all, the RIE at Lauriston will still be around a long time after the Little France buildings have fallen into more disrepair.
<b>51</b>	Coherent and centralised public space aligned with sensible parking arrangements and a simpler layout to enable staff and visitors to move more freely within campus.
<b>52</b>	It is a large area and it would be good to see some retail space - a nice shop, bank area. Too many WRVS shops which are expensive and don't offer enough competition or choice. More staff quiet areas where you can switch off with your lunch. Canteen and Anne Ferguson Building can be very busy/noisy.
<b>53</b>	Something that is all tied together, so either all modern or all old style rather than the mix there is now.
<b>54</b>	Safer storage areas for bicycles, non-smoking areas enforced in doorways and loading bay area.
<b>55</b>	Modernised Acute Medical Receiving Unit and well organised/streamlined ward bases.
<b>56</b>	More wards delivering more bed spaces.
<b>57</b>	PARKING FOR ALL!!! Green space, unpolluted by smokers.
<b>58</b>	More open green land space that is landscaped and suitable and used by all.
<b>59</b>	STAFF PARKING, STAFF PARKING.

<b>Question 2: What types of new spaces would you like to see on the site?</b>	
<b>60</b>	Places for patients, staff and relatives to walk safely. Perhaps an outdoor sculpture, health related. Places for people to sit. Scented flowers to enhance the senses.
<b>61</b>	Increase parking, Increase hours for MIU to take pressure of RIE.
<b>62</b>	Free Staff Gym.
<b>63</b>	More greenery, more eco-friendly design e.g. living buildings and more bicycle parking.
<b>64</b>	Patient areas to relax.
<b>65</b>	Car parking.
<b>66</b>	Park/green space to take relatives out to in the summer where appropriate(something like what we have At AAH)
<b>67</b>	Green space and more break out areas not attached to cafes or along corridors for people to meet outside of clinical/cafe areas.
<b>68</b>	A garden for staff and patients.
<b>69</b>	More walk ways. And easy access to other area of the hospital.
<b>70</b>	Better range of services.
<b>71</b>	The whole place knocked down and purpose built with a forefront of common sense for clinical and clerical working environments.
<b>72</b>	Parking.
<b>73</b>	More green space. Over the years the green space has disappeared. And more quiet spaces for visitors and patients outside.
<b>74</b>	More parking spaces. More outdoor garden space.
<b>75</b>	Parking?
<b>76</b>	More seating or green areas for patients and staff.
<b>77</b>	AEU is most vital for the North West of Edinburgh.
<b>78</b>	More modern spaces.
<b>79</b>	Modern, quality facilities.
<b>80</b>	Family areas.
<b>81</b>	Staff car parking.
<b>82</b>	Some of the older buildings, particularly the Clock Tower and Clinical Neurology buildings are very dated and no longer fit for purpose. The former should be remodelled and refurbished and the latter replaced.
<b>83</b>	BLANK
<b>84</b>	More communal garden areas, bring all sites together.
<b>85</b>	Better shopping facilities for both staff and patients. Access to food out with canteen opening hours is poor and there is little for sale in the existing shops.
<b>86</b>	More modern buildings. Porta cabins to go. Better signage.

<b>Question 2: What types of new spaces would you like to see on the site?</b>	
<b>87</b>	Better parking facilities and perhaps some shops.
<b>88</b>	One continuous building that is uniform and coherent with single rooms and day areas (staff and patients), far better parking. Frequent green spaces also required.
<b>89</b>	More car parking, more wards closer together. Improve parts of DCN to facilitate an outpatient hub for all specialties. Makes more room at the RIE.
<b>90</b>	Outside space that can be used by patients, families and communities- walking/ running routers.
<b>91</b>	Modern, accessible, inclusive and including great design and lovely outdoor space.
<b>92</b>	Would be nice to see some of the spaces upgraded. I really felt bad for the porter and nurse who had to transfer me from the recovery ward. Better lifts.
<b>93</b>	Better parking and fewer porta cabins and more green space.
<b>94</b>	Very strange question.
<b>95</b>	Another car park building if space and money allows. New purpose built areas to fulfil the need for an A & E rather than what is presently struggling to deal with emergencies. The A & E at Little France could deal with one side of this huge Edinburgh and East Lothian and the Western with a purpose built A & E could handle the other side. I hope a Gynaecology unit could be developed to save East Lothian women having to travel to Livingston, it's a long way both for patients and their visitors.
<b>96</b>	Car parking.
<b>97</b>	Spaces for people to walk, sit and reflect.
<b>98</b>	Very clearly marked, pleasant footpaths.
<b>99</b>	Less sprawling. More compact.
<b>100</b>	Outdoor shelters, wood and glass suntraps, in small garden areas.
<b>101</b>	Green spaces.
<b>102</b>	Green (non-smoking).
<b>103</b>	More open space.
<b>104</b>	More Garden space for both staff and patients, a nice garden would be lovely. Some quiet space for people to go too for reflection.
<b>105</b>	LOTS more bicycle parking is needed, if you want to encourage people (staff, outpatients, visitors) to use the areas available for parking more efficiently. There is virtually no bike parking for outside Ward1 (Oncology & radiotherapy), what little there is always full.
<b>106</b>	Open space for staff to walk/sit / reflect. Children play area. Wheelchair accessible outdoor space.
<b>107</b>	Places to sit outside. Better car parking.
<b>108</b>	Bit more green space.
<b>109</b>	More outside space would be nice, for visitors and patients to sit and relax.
<b>110</b>	More access to the shop and more cafe space.
<b>111</b>	I believe the cancer centre could be upgraded.

<b>Question 2: What types of new spaces would you like to see on the site?</b>	
<b>112</b>	Car parking.
<b>113</b>	Green spaces where visitors, staff and patients can find some tranquillity and beauty.
<b>114</b>	Car parking!
<b>115</b>	Air conditioned. More space in bays.
<b>116</b>	Better car parking.
<b>117</b>	Better parking!!
<b>118</b>	Significantly more parking facilities. More multi-stories?
<b>119</b>	Dementia safe spaces. Although there isn't a children's unit at this hospital child friendly waiting rooms with toys for families visiting the hospital.
<b>120</b>	Modern build and sufficient car parking for staff and patients.
<b>121</b>	More parking, more green spaces.
<b>122</b>	None. Money should be spent on frontline health services rather than lining the pockets of private developers.
<b>123</b>	Car parking.
<b>124</b>	Green space for oncology patients.
<b>125</b>	Increased parking required.
<b>126</b>	Nil happy with it the way it is aside from staff car parking.
<b>127</b>	More modern.
<b>128</b>	Cheap places to eat, a place for vulnerable people to go and stay warm over winter.
<b>129</b>	We are in desperate need for the Edinburgh Cancer Centre to be moved and all be together. Oncology is spread about the place and looks horrendous when those are receiving treatment. It should be main priority.
<b>130</b>	Top of the pile is a new cancer centre. Some green Space. More parking. Make the multi-story higher. You cannot add to the site without more parking.
<b>131</b>	Gardens for patients, visitors and staff to use.
<b>132</b>	Green public space, no smoking.
<b>133</b>	Better parking options. More signage or better signage.
<b>134</b>	Up to date accessible toilets in each ward. Currently inadequate number, especially in cancer wards which should reflect high levels of cleanliness. Currently showing and toilet facilities are a disgrace for neutropenia patients. New cancer wards which reflect needs of patients and staff for working in. Spiritual care centre with quiet room.
<b>135</b>	More parking.
<b>136</b>	Gardens. Eating areas.
<b>137</b>	Creating more bed space should be a major priority.

<b>Question 2: What types of new spaces would you like to see on the site?</b>	
<b>138</b>	Enough car parking spaces for staff who do not have passes - the parking situation is ridiculous. Have to be at work 1.5-2 hrs before starting time in the hope can get a space.
<b>139</b>	Parking.
<b>140</b>	A new hospital with better parking and green space.
<b>141</b>	Improved parking space/entrance /exit.
<b>142</b>	Green space that patients are encouraged to use for fresh air...NOT smoking!
<b>143</b>	Garden space where patients and families can have a break from the ward.
<b>144</b>	It would be good if one could start again.
<b>145</b>	Cycleways, running route with exercise equipment e.g., monkey bars. Space to walk in and think.
<b>146</b>	A garden or green space would be nice. More seating would be an advantage.
<b>147</b>	More parking. More green spaces for patients.
<b>148</b>	More green space would be nice but probably unrealistic! Maybe more use of the court yards in AFB could be made - seats for patients/visitors etc.
<b>149</b>	Green space, outdoor space for patients, better facilities all around.
<b>150</b>	Green spaces.
<b>151</b>	Spacious patient care areas/wards with easily maintained environment. Better public transport access and car parking.
<b>152</b>	Car park for staff.
<b>153</b>	More parking, the parking is awful. This is seen every day with queues all around the site at visiting. More grass/garden areas for patients to spend time. There is nowhere close to the Alexander Donald building/ Anne Ferguson or old building for patients to go.
<b>154</b>	Better dining/catering spaces.
<b>155</b>	Car parking.
<b>156</b>	More parking, better Staff break areas.
<b>157</b>	Car parking.
<b>158</b>	Car parking.
<b>159</b>	More space on wards and privacy.
<b>160</b>	Possibly nice green space where staff etc. can sit out in better weather.
<b>161</b>	Staff only rest and dining facilities - M&S, John Lewis staff are not expected to have their breaks with customers so why are we?
<b>162</b>	Trees / green seated areas for patient and staff. Picnic tables. Wild flower meadows for bees and butterflies.
<b>163</b>	Staff car parking.
<b>164</b>	Parking for staff!!!

<b>Question 2: What types of new spaces would you like to see on the site?</b>	
<b>165</b>	Parent and child parking spaces especially for out of hours when you have a sick child. Also extra parking spaces around the hospital and more public transport into hospital from other areas of the city.
<b>166</b>	More sight lines through buildings that give a greater sense of openness.
<b>167</b>	BLANK
<b>168</b>	BLANK
<b>169</b>	More green spaces required.
<b>170</b>	Better links paths for pedestrians and cyclists between the buildings. More green space. Trees!
<b>171</b>	Some greenery - currently very much concrete.
<b>172</b>	BLANK
<b>173</b>	Quiet private spaces for communal and discussions with patient families and important others.
<b>174</b>	More green spaces - areas for staff and patients to 'get out'.
<b>175</b>	More green space. More clear connecting avenues between different parts of the site.
<b>176</b>	BLANK
<b>177</b>	More gardens and areas of relaxation for patients and staff. More places for staff to take breaks.
<b>178</b>	Greenery - more trees (reference Singapore Hospitals like Khou Teck Private Hospital). More enclosed open spaces that allow natural light in. Better medical education centre (with working lockers). Not sure where to put this - better wayfinding is needed!! Both outside and inside the buildings. Even displaying the main entrances more prominently will be good.
<b>179</b>	More outdoor seating areas. Shopping would be a bonus. More parking.
<b>180</b>	Areas to sit, green trees, fresh uncluttered areas to escape to.
<b>181</b>	Parking.
<b>182</b>	Outdoor café seating area. Green spaces offering exercise at lunch times. Perhaps lunchtime boot camps in green spaces.
<b>183</b>	Similar to Quatermile (old RIE). Trees, Grass. Wind shelter.
<b>184</b>	Parking is a complete nightmare. Any chance of underground parking being developed on site? Or a deal with City of Edinburgh Council to allow people to park on Crewe Road South? Free for people having cancer treatment. Also need to add more spaces for people with disabilities. Bus access is poor - Lothian Buses should be required to add bus stops within the WGH site for the 24 and 29 buses. There's currently no direct access by bus from Leith as you have to go around the houses and this is complex and time consuming. Access from East, West and Midlothian should be reviewed including by bus. Can Lothian Buses link the bus and tram app to specific departments and wards? For example, although it currently lists the Maggie's Centre, the Edinburgh Cancer Centre has disappeared. Confusing to say the least. Free Wi-Fi across the site could help here too. Porterfield Road is a nightmare for pedestrians - no pavements which makes it very dangerous. And as for those endlessly dim corridors... where getting lost is as easy as can be... And walking through the site isn't a pleasant experience - more pavements, better signage - all very confusing and risky at the moment. Signage is poor - ditto site maps - e.g. the one of the WGH on the NHS Lothian website has a list of departments which is out of date. Need some coordination here. Walking times listed on the story boards: do not define age and ability of people doing these timings. Has anyone checked to see how long it takes people with mobility problems, wheelchair users, and older people to trundle

**Question 2: What types of new spaces would you like to see on the site?**

round the hospital site? Please have a look at <https://www.designinghealthcare.co.uk> a joint NHS Lothian and Glasgow School of Art Department of Product Design collaboration. This was a design based review of the processes involved in Outpatient Chemotherapy Delivery and the Edinburgh Cancer Centre about human centred product design. The report includes useful recommendations and is well worth a read. Ditto wayfinding Status in NHS Scotland Best Practice Guidance. Wayfinding Effective wayfinding and signing systems guidance for healthcare facilities, August 2016.

**Question 3: Do traffic and parking arrangements allow people to move around safely and meet the community's needs?**

<b>1</b>	Yes.
<b>2</b>	No.
<b>3</b>	No it's a big out of hand for staff and visitors and patients.
<b>4</b>	No, for example the queues at times for patients going to radiotherapy as outpatients can be long and stressful to them be asked by parking attendant to prove they are a patient and show their schedule. This can be very difficult and add to the pressure of cancer treatment. Sometimes card don't stop at pedestrian crossings. Parking is difficult at a time when people are vulnerable. What is positive though is it is free but maybe validation is required to stop park and riding.
<b>5</b>	Parking poor for both staff and patients. Often see queues to get into carpark.
<b>6</b>	It is very busy at Visiting times, I would walk or get a bus rather than take the car.
<b>7</b>	Broadly yes, although car parking permits for workers are at a premium.
<b>8</b>	No. more parking required for patients and staff. Patients often panic about not being able to find a parking space.
<b>9</b>	No, not existing. The decked car park is a good idea. Any parking consideration needs to be fully thought through in terms of each service. The bus route through the site is a good one.
<b>10</b>	Move safely but doesn't meet the community's needs.
<b>11</b>	Yes. I travel by bike. Also very good bus connections. Feels safe at night.
<b>12</b>	No, the level of parking in surrounding streets is unacceptable and causes bad feeling between hospital and community. Need more buses coming into the site. I walk to/from work from the North side and it is unsafe. Access alongside the multi-story car park at busy time's means you encounter cars blocking the pavement and total ignoring the pedestrian crossing. Via the Porterfield road entrance means you have to take a chance crossing and hope that no car comes speeding with no indication. It appears to be all about bike safety, what about those who walk!
<b>13</b>	Absolutely not -the traffic links are awful, & the provision for onsite parking is terrible for patients & staff alike.
<b>14</b>	Not really there are too many pressures on the limited space with some drivers paying little respect for other users of the site.
<b>15</b>	Parking is limited which often causes congestion on site, anxiety for patients trying to get to appointments and staff trying to get to work. The road system could definitely be improved.

<b>Question 3: Do traffic and parking arrangements allow people to move around safely and meet the community's needs?</b>	
<b>16</b>	No not currently. Not enough bus routes through the hospital and too many dead end roads.
<b>17</b>	No. It is currently dangerous for pedestrians. Few buses now directly serve the site so more people are on foot or use cars. The multi-storey car park is constantly full which results in queuing traffic through the site which often blocks the bus which does operate.
<b>18</b>	Bit better since the two level car park but if it could have an entrance and exit away from the hospital main thoroughfare it would be better for those on foot. There will never be enough parking.
<b>19</b>	Parking does not meet needs but think it is as good as it can be.
<b>20</b>	No. Parking for both staff and patients is poor with a number of one way systems which tap people, including the ramp entry to the multi storey carpark.
<b>21</b>	No.
<b>22</b>	Not enough parking for the hospital so makes the surrounding area congested.
<b>23</b>	No. I attend for apt's from West Lothian and get public transport for the journey as the parking is horrendous and the commute home would take 2 hrs due to my apt time.
<b>24</b>	In theory, but traffic does sometimes go too fast around the site. Lack of parking causes frustrations, bad driving and inconvenience to local residents.
<b>25</b>	No parking is awful but you need to recognise that for many staff driving is the only reasonable option.
<b>26</b>	Not even slightly.
<b>27</b>	No definitely not. On street parking far too far away for people to walk to visit or appointments when tiny car park is full. Unclear signage of where different buildings are and where best to park from them. E.g. if you enter from Crewe road how do you get to car park for neurology or infectious diseases, or if enter from Telford road how do you park for Anne Ferguson or Royal Victoria buildings.
<b>28</b>	No it's disorganised and messy. There is clearly not enough. No park and ride options, not enough buses. Parking is confusing and signage is terrible! The small spaces to get in and out of car parks is difficult and can cause added stress or patient/visitor not wanting to use them or being difficult. The community are sick of staff parking in their streets, outside houses, we have all had people say something or cars vandalised. I know as a staff member I find it stressful and leave at least an hour before I could if parking or a bus straight here was possible. It is not ideal being here walking as a lone female in the dark in quiet streets and makes weekday working a harder longer day as opposed to a weekend shift when I can park onsite. We find it hard to get bank staff for dayshifts through the week and I am not surprised when we make it so difficult to get here/park and pay you less!
<b>29</b>	No. Drivers entering the Telford Rd entrance often drive very fast and not at the 10 mph limit (poor signage). Poor parking facilities overall. Have to arrive an hour before my shift starts if getting a lift from a colleague otherwise they will be unable to find a space. We are parking in front of people's houses which makes us feel uncomfortable and we know they are not happy about it either but there is so few spaces. My colleagues driving in are driving because there is no public transport from their area in within Edinburgh not just because they prefer to or are being lazy. The bus service from the north and east of the city is very poor with Crewe Toll being the nearest drop off for the 1 bus that does travel that side. It's a very long walk in the dark coming up Telford road, and a nightmare in the winter for ice. We seriously need to look at how we help get staff to and from work as we already know that it is impacting on staff taking jobs and bank staff booking shifts. Park & ride? Shuttle buses from different sides of the city? Ask LRT to consider

<b>Question 3: Do traffic and parking arrangements allow people to move around safely and meet the community's needs?</b>	
	more bus routes directly into the hospital, specific routes just to get staff to work on time and home i.e. Edinburgh Airport has always been serviced for travel and their staff throughout the night...
<b>30</b>	No - not enough parking for staff or patients/visitors alike. Direct bus services from park and rides would help enormously and ensure minimal travel time particularly for staff who work antisocial hours (i.e. the majority of clinical staff).
<b>31</b>	No. Terrible that staff use disabled spaces.
<b>32</b>	No, not enough parking, patients arriving early see empty car parks with "Full" signs and get stressed not knowing how/where to park.
<b>33</b>	Yes.
<b>34</b>	No.
<b>35</b>	No too busy now, a multi-storey car park for patients and staff would free up surrounding roads being clogged up with traffic. On site flow would be better too.
<b>36</b>	Yes but more parking would be beneficial.
<b>37</b>	Safely - hopefully - but parking is extremely difficult, especially for elderly patients who are often really struggling to find spaces.
<b>38</b>	No.
<b>39</b>	Yes.
<b>40</b>	No.
<b>41</b>	No.
<b>42</b>	No.
<b>43</b>	Should have built a multistore car park! Many families visit from outside Edinburgh. If the Western General is to become a Cancer centre for Scotland people will come from far and wide. Whiston Hospital on the outskirts of Liverpool as 8 storey car facility and direct access by bridge into the building. Worth a look!
<b>44</b>	Impact on the community with staff parking out with the site.
<b>45</b>	Parking for patients seems alright however trickier for visitors and certainly staff.
<b>46</b>	No the hospital is getting bigger and the spaces are getting fewer.
<b>47</b>	No, parking is awful. Not enough spaces for patients and staff really struggle to get here using public transport that is reasonable in price and doesn't involve lots of buses.
<b>48</b>	Not enough parking.
<b>49</b>	Need more disabled parking. Need designated areas where patients can be safely dropped off while the driver goes to find a parking space. Patients & visitors often find the hill up from Crewe Rd too steep.
<b>50</b>	Parking is not fit for purpose. Traffic between Telford Road and Crewe Road South is often at a standstill as parking on WGH site is not fit for purpose. A multi storey car park with one storey. A 10 MPH speed limit that nobody sticks to.
<b>51</b>	Not in the slightest. Parking is a complete lottery, staff car parking has been eroded with the addition of new buildings and there is no sign of a comprehensive plan to address this for either visitors or staff. Every

<b>Question 3: Do traffic and parking arrangements allow people to move around safely and meet the community's needs?</b>	
	time a new development is proposed the first thing to go is staff parking spaces. The number of staff spaces has fallen significantly over the past decade. This results in staff utilising residents areas for parking and resorting to parking on pavements.
52	I find patients call regularly to say they are stuck in a queue for a car park and are going to be late for appointments. I think we could find more areas where we could put 2 storey car parks up to help patients/staff alike. Buses seem to be able to access site well and are well used.
53	There is never enough parking but traffic arrangements work.
54	Parking issues constantly for visitors to the department. Site needs a better multi-storey car park to cut down stress for staff and visitors.
55	OK, Parking can be segregated to a single area.
56	Public transport like buses are frequent enough. It is not near the train station and there is added time to travel from train station to WGH. Car park is insufficient for public, much less staff. People are parking outside the WGH along Crewe Road South single yellow line which jams up the road. It should be double yellow lines.
57	No.
58	No. Distinct lack of parking for all groups. Proper underground or multi storey car parks need to be considered. Knock down the defunct laundry and use that space.
59	No.
60	Absolutely not. Drivers regularly ignore the pedestrian crossing at Porterfield Road/Aroma. Would be amazing if there was an exit to Telford Road much further down to save walking all the way up from Ferry Road - the buses on Telford Road are very poor.
61	No.
62	Yes.
63	I suspect there is a lack of parking.
64	Not at all need more parking.
65	No.
66	No build multi-storey carpark.
67	Many staff park at their expense on the streets around WGH whilst many permit/patient areas are half full. If they're manned by staff, why can't they allow a 10-20% leeway if not busy for staff/non-permit to park?
68	No.
69	Need to increase parking space as car park is full most time and put pressure trying to find a space difficult. More bus going into the site may reduce people using cars.
70	It does near the RVB and outpatients but not at the far end of the site.
71	Parking is horrendous for both patients and staff. The layout of the access is rubbish for general, public and emergency vehicles.
72	No. Lack of parking onsite leads to parking off site.

<b>Question 3: Do traffic and parking arrangements allow people to move around safely and meet the community's needs?</b>	
<b>73</b>	No. Even though there are zebra crossing most are in the wrong places and people don't use them. Especially round about the multi storey area which is a shambles during peak times.
<b>74</b>	Not enough parking space and unbelievable that there is limited staff parking spaces.
<b>75</b>	It's much improved but still very confusing.
<b>76</b>	There are no parking for staff and the parking for patients are limited. Separate car park for staff would be an improvement. Frontline staff to get parked closer to the hospital.
<b>77</b>	Parking needs to be increased to relieve parking on side and main streets surrounding the hospital especially for staff.
<b>78</b>	No.
<b>79</b>	No. Poor provision for bikes. One way system confusing.
<b>80</b>	No, very poor parking.
<b>81</b>	No.
<b>82</b>	Traffic should be prohibited from moving through the site (other than ambulances and essential vehicles). There should be more focus on reserving spaces for patients who are unable to use public transport or walk from peripheral car parks. This could be done for example by including bar codes on appointment letters for those who it is considered must have parking spaces. Far more emphasis should be given to healthy active travel, with prominent and secure cycle parking at key locations around the hospital and greater priority given to pedestrians, particularly in the areas around the Oncology Department and at the Telford Road end of the hospital. There is a major problem on Telford Road where visitors to the hospital park on the pavement causing a serious safety hazard for both pedestrians and vehicular traffic as they mount and dismount the pavement. The NHS should take action to resolve this with the Council.
<b>83</b>	BLANK.
<b>84</b>	Yes.
<b>85</b>	Parking is a problem. Staff members are not always able to take the bus/cycle to work due to family constraints, shift times and cost. Parking is not even enough for patient's onsite and it would be good to see more parking provided for them. As well as a staff member, I have also been a visitor and have found this to be very problematic. The surrounding community do not seem to like staff members parking in their area and I hear a lot about damage to cars which is worrying. It may be possible to set up a working group between the hospital and the community to combat this.
<b>86</b>	Yes in general they do. Good Bus service. Can drop off near buildings.
<b>87</b>	No. The parking and dropping off is highly inadequate.
<b>88</b>	No the parking is totally inadequate and very stressful to use. There is not enough parking for staff or visiting staff or for patients (unless they are cancer patients for which the arrangements are good). But if for example you had MS or stroke you would struggle greatly.
<b>89</b>	Yes.
<b>90</b>	Access to parking on site is difficult; people travel from all over Lothian and beyond. Need to think about links with park and ride from all directions being better publicised.

<b>Question 3: Do traffic and parking arrangements allow people to move around safely and meet the community's needs?</b>	
<b>91</b>	Would be good to increase pedestrian access so the site could be accessed from the south as well as the west and east entrances. Parking is pretty difficult on site with not much in the environs.
<b>92</b>	I don't think there's enough parking but I personally haven't had any problems but I know visitors did. It's good that there's parking at different locations around the hospital so access to different departments is easier. The drop off and collection points are placed well but o. This occasion I had to go down steep back stairs to exit at the back of the hospital, this was to avoid the long walk to the main entrance.
<b>93</b>	Safer cycling on Telford road and from Stockbridge would help encourage more cycling. More parking also required. Council restrictions in the local area have been misguided and are making matters worse not better for the community overall.
<b>94</b>	The site is all a bit random. There is an impression that it has been added to at various times over the years with little thought given to the movement of pedestrians around the development.
<b>95</b>	A week of visiting my husband in hospital at the Western made me both extremely grateful for the free parking and aware that I often sat in long queues whilst one at a time a car left the car park and another was allowed in.
<b>96</b>	No. Bad parking for staff patients and visitors.
<b>97</b>	Absolutely not.
<b>98</b>	No. Pedestrian access feels like second class afterthought.
<b>99</b>	I think they are ok. I appreciate the free parking.
<b>100</b>	Yes.
<b>101</b>	It looks chaotic.
<b>102</b>	Congested. Appealing parking.
<b>103</b>	No, isn't really any space for traffic and a very small car park. This results in the surrounding area being very busy with cars and parked cars.
<b>104</b>	No, it is especially difficult on this site to get parking which is so hard when you attending an outpatient appointments.
<b>105</b>	The car is king, for the most part, unfortunately. More bicycle parking is desperately needed, and some of the walk ways are very convoluted and hemmed in by barriers - feels very hostile and impractical.
<b>106</b>	Will always be a challenge!
<b>107</b>	Yes.
<b>108</b>	Parking not great but well managed.
<b>109</b>	No, it's a bit of a small space when it comes to pick up/ drop off and crossing roads.
<b>110</b>	Exceptionally poor parking for visitors and staff. Back roads are narrow with blind spots and poor in winter weather.
<b>111</b>	I believe parking is better than the ERI.
<b>112</b>	Parking is horrible and safety is at risk due to this.

<b>Question 3: Do traffic and parking arrangements allow people to move around safely and meet the community's needs?</b>	
<b>113</b>	Live within walking distance so not an issue for us. Having residents' parking permits and on street charges mean we're not affected by staff/ visitors parking outside our house.
<b>114</b>	No but also does not meet staff and patients need.
<b>115</b>	No.
<b>116</b>	No. Car parking is always crowded. No staff parking for nurses, secretaries shouldn't have priority for a parking pass over folk working 13 hour days. Staff and visitors park everywhere, obstructing pavements and yellow lines at times.
<b>117</b>	Better parking facilities. Crossing points with "green man" not just zebra crossing would make it safer. Better lighting. Signage.
<b>118</b>	No, insufficient parking for staff, patients and everyone else. This leads to double parking, dangerous parking, etc.
<b>119</b>	Although the traffic system is well managed it's difficult to park and transport links from some parts of Edinburgh are quite poor.
<b>120</b>	No - parking is a nightmare.
<b>121</b>	Not really. Parking is very inadequate. On one visit I had to park a 20 minute walk away which was the closest we could find a space. Not good if you are in pain or have any mobility issues.
<b>122</b>	No - provision for pedestrians is poor.
<b>123</b>	No.
<b>124</b>	No.
<b>125</b>	No, increased parking spaces required. Not everyone can travel by public transport.
<b>126</b>	No.
<b>127</b>	Yes.
<b>128</b>	No.
<b>129</b>	A lot more could be done for staff parking as many travel across from the bridge and like myself, borders way.
<b>130</b>	Yes. They're fine except further lack of parking.
<b>131</b>	More parking is definitely needed for both patients and staff. I feel the surrounding community would benefit from this.
<b>132</b>	No.
<b>133</b>	There is not enough parking for everyone. Waiting in a queue to get into the top tier of the multi storey parking area is not great. There is no option to turn and find a place elsewhere and cars behind sometimes don't understand the barrier is down and start getting impatient behind you.
<b>134</b>	Yes, this is one of the strengths of the hospital.
<b>135</b>	No. Staff parking at kimmerghame is a real issue for residents.
<b>136</b>	Yes.

<b>Question 3: Do traffic and parking arrangements allow people to move around safely and meet the community's needs?</b>	
<b>137</b>	The traffic appears to move reasonably well but access to the hospital for disabled patients is woeful.
<b>138</b>	Staff parking ridiculous.
<b>139</b>	No.
<b>140</b>	Absolutely not.
<b>141</b>	No. Parking is not good at present. This needs improvement.
<b>142</b>	Not at all but this is a massive challenge at inner city hospitals across the country. People should be more considerate when parking as residential areas are effected and emergency vehicles using Crewe road can be delayed but I understand why people might end up parking where they do because of being worries about being late.
<b>143</b>	There is a lack of parking for staff and patients. On street parking is limited and expensive and you often have to park quite a distance from the hospital which isn't particularly safe in the winter months.
<b>144</b>	Probably not. Quite a residential area.
<b>145</b>	Yes.
<b>146</b>	Having free parking is excellent, although the queues to enter the multi-storey car park can be very long.
<b>147</b>	Not enough parking for patients, staff or visitors.
<b>148</b>	Generally although zebra crossings can sometimes be dangerous. Far too small an amount of parking for patients. Need to ensure staff and medical students are not depriving patients of parking spaces.
<b>149</b>	No.
<b>150</b>	No.
<b>151</b>	No they do not. The amount of parking spaces are inadequate for the numbers who attend the hospital. Bus access is poor and very distant from entrance to hospital buildings for anyone with a disability.
<b>152</b>	No.
<b>153</b>	No. There is always a queue for disabled parking at visiting time, this can impact on access around MAU and Anne Ferguson.
<b>154</b>	No.
<b>155</b>	No, one way system is awful.
<b>156</b>	Not currently.
<b>157</b>	Sometimes.
<b>158</b>	No. Car parking is a huge issue.
<b>159</b>	More parking would be good.
<b>160</b>	I cycle to work and there is a major shortage of covered secure spaces to lock bikes in. The main area under the AFB is appalling. Public and staff use the area as an ashtray and litter bin. It is disgusting and is never cleaned up. This issue has been highlighted to the site director, but to date no action has been taken to resolve it.

<b>Question 3: Do traffic and parking arrangements allow people to move around safely and meet the community's needs?</b>	
<b>161</b>	No! Not enough visitor, patient or staff parking. 2018, everyone has a car so they need to be seriously considered going forward. To enable services to have enough staff, hours need to be flexible and staff need parking e.g. after school drop-offs - in middle of day etc.
<b>162</b>	I've found the parking around the cancer centre to be excellent - when I have needed it. I use the bus / walk so I don't know about the car parking elsewhere. I find access to buses is fine for me.
<b>163</b>	Patient parking is difficult as not many spaces for clinics and visiting when coincide same times.
<b>164</b>	No the car parks are not big enough or there are not a lot of spaces. Traffic at lunch time is ridiculously busy and there is always a queue of tailback.
<b>165</b>	There is not enough parking spaces within the hospital to facilitate the public and needs.
<b>166</b>	Staff and visitor parking can be problematic. I am often asked if there is a 'quick way through' from Davidson Road - there isn't.
<b>167</b>	There is not enough staff parking.
<b>168</b>	BLANK.
<b>169</b>	Parking is dreadful and very busy. Street parking creates problems for many householders. Transport does not serve all parts of Edinburgh and Midlothian. Bus access is very limited. Perhaps make use of Park + Ride - but where?
<b>170</b>	No. Better provision for cyclists is urgently needed both for current cyclists but more importantly to encourage more people to actively travel to the hospital. Need to better link up with the Roseburn Cycle Path which is great and used by lots on the site, however it is poorly connected. Better provision of covered cycle parking, showers and drying facilities also needed and information on them easily available.
<b>171</b>	No. CEC is trying to limit reliance on the car but people come to WGH from further afield. Lovely map showing how good the public transport links are does not include even Barnton far less South Queensferry. Bringing a patient who is elderly, confused or just 'not well' does not lend itself to public transport. For outpatients people may have other places to go before or after. Staff working 12 hour shifts often live miles away e.g. Fife, Kinross, South Queensferry and understandably do not want to extend that to being away from home for 14 hours using public transport particularly if child care is involved. This is the minor injuries for South Queensferry but takes 2 buses (or a train to Dunfermline). CEC should consider Park and Ride before Barnton with frequent shuttle bus direct to WGH.
<b>172</b>	Too many barriers in places e.g. clock tower entrance and between ARU and Anne Ferguson Building - people often ignore. Need more parking.
<b>173</b>	The site plan is confusing, particularly for people navigating from the south corridor, link corridor to Anne Ferguson and Alexander buildings. Parking is poor - is there a possibility for multi-storey car parking or sub terrain levels? Pressure on parking causes risks to safety - pedestrians and drivers - due to double parking and frustration in queuing at busy times.
<b>174</b>	See over.
<b>175</b>	No. Too many fences heroin pedestrians show how wrong this is. Should be no parking in centre site (taxi rank and disabled). Priority to walk / cycle - needs 'through' cycle routes. Bus stop on site not needed - Crewe Road is fine.
<b>176</b>	BLANK.

<b>Question 3: Do traffic and parking arrangements allow people to move around safely and meet the community's needs?</b>	
177	No, traffic inside hospital grounds is tight and at times manic.
178	Yes.
179	Absolutely not! 2 fatalities and regular aggression of stressed out individuals unable to find parking spaces to attend apt's / visit relatives. Staff having to walk longer distances to do a 12 hour shift is unacceptable because no spaces on site or in near vicinity. Duty of care to workforce to arrive and leave after shifts is not being met for safety reasons.
180	No - too few car spaces for patients causing congestion. Signage poor - no one at reception at outpatients to direct people to right place. Lack of a warm helpful greeting.
181	No not at all need to arrive at least an hour before an appointment.
182	No. From a personal point of view I cycle from Musselburgh in the summer so I don't need to worry about parking. I don't like to cycle when the clocks change as its dusk and the cycle path from Crew Toll down to Newhaven I don't feel safe on. I would like to see park and rides, cycle etc. set up so people like myself can drive part of the way and then cycle or walk into work or take a shuttle bus. There could be bikes available for staff to use at the park and ride. I don't feel there are enough spaces for staff and visitors at present and therefore alternatives to car parking on site should be investigated.
183	No. One way system needed. Poor parking. Poor disabled and focal access.
184	More outside seating for sunny days - like the ones at the Edinburgh Cancer Centre. Softer lighting in waiting areas. Much more privacy - waiting areas everywhere. Internal signage and wayfinding has to be made easier to follow. Maybe using patient friendly descriptions of wards might help here - e.g. it is confusing to see signs for the Edinburgh Cancer Centre and also for Oncology. Cancer investigation / treatment. Signage to toilets is essential and woefully lacking at the moment. More green spaces please.

<b>Question 4: What aspects of the Western General site and surrounding area do you think are important and should be a considered in future plans?</b>	
1	Refurbished.
2	Parking.
3	Clock tower and the long corridors.
4	Minor injuries, outpatient clinics and surgery. Cancer services and Maggies. ITU.
5	Parking as clogging surrounding streets. Good signage in hospital as currently often get asked for directions.
6	I like the feel of it being a local hospital. Much easier to access than the Royal Infirmary.
7	The big issue is whether WGH still provides acute care for its residents. I believe it should, but not before the surrounding locality service develops considerably.
8	Entrance/exit to Crewe Road South. Right turns into Crewe Road South often problematic during rush hour.
9	The site topography. The differing levels and other constraints need to be considered in full. Keep the trees and plant new. The old poplars have not yet been replaced that were previously felled in the south-west sector of the site. Screening to the Telford Road should also be considered.

<b>Question 4: What aspects of the Western General site and surrounding area do you think are important and should be a considered in future plans?</b>	
<b>10</b>	Parking.
<b>11</b>	Friendly hospital. Good work culture and management, not toxic as elsewhere in Edinburgh. High quality patient centred healthcare. Good access with public transport for patients, relatives and staff, safe and quick access via various cycling routes no rip off parking.
<b>12</b>	Must stop the parking around the residential homes. Keep the character of the buildings by using stone/brick. Access to more buses on the site especially from Leith side. More parking needed.
<b>13</b>	Being realistic about the lack of space/parking on the site -it is very badly congested.
<b>14</b>	Although in favour of modernisation there needs to be consideration of how patients and staff move within and to/from the site. This should take precedence, less style over substance.
<b>15</b>	Important to retain some character on the site but also to provide fit for purpose clinical facilities for patients. Retaining some green space is essential.
<b>16</b>	Free car parking. A main general reception area manned by staff. Better consistent signage and clearer directions.
<b>17</b>	Parking! The WGH has to actively discourage staff and visitors from using cars and positively promote the use of public transport. This would help alleviate the pressure on neighbouring streets. Priority for on-site parking should restricted to disabled people and those with particular needs.
<b>18</b>	Original buildings may be difficult to maintain but should be preserved and upgraded rather than abandoned or demolished.
<b>19</b>	Would like to see a shuttle service for the public to the City Centre (Bus train Stations) and other hospitals within Lothian.
<b>20</b>	Access. Improved use of existing space, e.g. wasteful single storey buildings in the centre of the hospital. Proper functioning buildings e.g. ensuring all windows close/open.
<b>21</b>	The trees on the site. Better use of unused buildings.
<b>22</b>	Aesthetically it needs to fit in with its surroundings, needs to not be too multi story, needs more greenery, needs more parking.
<b>23</b>	The historical elements need to be preserved.
<b>24</b>	Parking really needs addressed. There is, I believe, an empty building which, surely can be demolished or converted.
<b>25</b>	Less patchy buildings dotted about, some green space and adequate parking for staff and visitors.
<b>26</b>	Better signposting, ensuring directions are put on outpatient letters.
<b>27</b>	Sort car parking, especially for staff. Update buildings that are very poor quality like the infectious diseases wards as they look unsafe and unclean (floors feel like they move beneath you and brown and cream paintwork make it a very depressing place to be a patient for any let of time).
<b>28</b>	I think it's important to keep the WGH an acute site, and keep it fit for purpose. Old building used or gone, clearer signage and pathways. Maintain the site.
<b>29</b>	That it remains an acute site, we have many specialised departments on the WGH grounds and important we keep them here. We need to consider building higher? Appreciate that there are houses around but the WGH is an extremely flat site and perhaps a small increase would have little detrimental effect to our

<b>Question 4: What aspects of the Western General site and surrounding area do you think are important and should be a considered in future plans?</b>	
	neighbours but give us more space. Get rid of buildings that are already empty and not fit for purpose i.e. the old Micro building. The protected building behind RIDU (due to shape of roof) is an eyesore, constantly has broken windows and is infested by pigeons - should be pulled down.
30	Remembering the history that shapes the building names so plaques explaining this would be helpful - naming hospital areas as well as numbering them (e.g. Wards) makes it more welcoming.
31	Bus stops.
32	The only thing that needs considered is the provision of a quality health service rather than aesthetics of spaces and buildings.
33	Car parking.
34	Traffic flow and access.
35	The character of the old central building would be nice if kept but would need a lot of upgrading as the interior not suitable now for a modern hospital.
36	The Cancer Centre.
37	The buildings and capacity are not really fit for purpose without rethinking things, especially at the front door area. MAU needs to be bigger, with a better waiting area, and more capacity for ambulatory care patients which are likely to become increasingly common in the future.
38	Access to the hospital (roads in and out) as well as enhanced car parking facilities.
39	Parking for staff.
40	Extra parking for all staff.
41	The history.
42	Car Parking, Traffic Management. Updated CCTV.
43	Please do not build any more hospital buildings with single patient rooms only. The Victoria building may be a triumph for Infection control but is a disaster for mental health. Elderly patients isolated at home crave companionship in hospital, not further isolation. The single room policy strikes me as a policy made by younger people that suits younger patients. Given that the majority of patients are over 70 I think we have to be a little bit more sensitive to their mental health needs too!?!?
44	Height of buildings and open space as well as traffic safety and volume.
45	Revamp of the DCN building when it moves? Could this house wards 11 and 15?
46	As long as it doesn't turn into a farce like the new royal it should be fine.
47	Lots more parking and retain some green spaces.
48	Better signage to enable identifying where to go.
49	The gardeners have done a great job in the past couple of years - they need more resources. Can the clock in the Clock Tower be repaired and work.
50	Buildings that are nice, and that actually fit into a city with an architectural heritage that is now routinely ignored by NHS Lothian.

<b>Question 4: What aspects of the Western General site and surrounding area do you think are important and should be a considered in future plans?</b>	
<b>51</b>	The clock tower building is the only building that has any form of architectural value, but it is significantly problematic to house any services within effectively.
<b>52</b>	I think the whole site needs a rethink. Some of the older buildings are not fit for purpose. The site covers a large area and could provide much more efficient buildings to house various departments more comfortably for both staff and patients. There needs to be a lot of investment for the future of the site. The old laundry site area is huge and could house a large or growing department into the next few decades. There are lots of leaking roofs and damp buildings which really should be replaced and redeveloped. Again it is a huge site and with careful planning it could be an efficient hospital site with modern facilities for staff and patients. It is a mistake to invest all the money in the RIE site.
<b>53</b>	As much green area as possible. If buildings aren't used they should be knocked down. Old Laundry and previous microbiology buildings are examples.
<b>54</b>	Direct bus routes to St John's Hospital. Enforced no smoking near doorways and on loading bay.
<b>55</b>	Clinical and Educational areas to be segregated with adequate coffee and refreshment areas.
<b>56</b>	Building up to 3 story for car park will ease off some of the parking issues.
<b>57</b>	Transport links need to be improved. Parking MUST be made available. This is a hospital which includes many specialties but not all adequately trained staff live within walking/bus distance.
<b>58</b>	Would like the old part i.e. clock tower and D block properly refurbished and made fit for purpose.
<b>59</b>	STAFF PARKING.
<b>60</b>	Keep the Victorian ones but upgrade sympathetically. Need to keep those parts that have been upgraded to ensure value - ADB - and keep fit for purpose buildings like RVB and AFB.
<b>61</b>	Clean, drop off points to all areas for frail.
<b>62</b>	BLANK.
<b>63</b>	The clock tower. Ensuring the greenery is kept.
<b>64</b>	It's stressful enough when you are going to the hospital but to be waiting to park with grumpy car park attendants.
<b>65</b>	Public transport and parking.
<b>66</b>	BLANK.
<b>67</b>	Original buildings and features.
<b>68</b>	A parking plan? Distant site with buses In is vital.
<b>69</b>	A new infectious Diseases unit as this area look out of place and dated. It very noticeable when you walk through other areas from Anne Ferguson Building. The need to upgrade the rest of the Hospital. With DCN Building and infectious disease unit look out of place with rest Hospital.
<b>70</b>	Ensure some green space is available and design in a way that allows for planned expansion.
<b>71</b>	Patient parking, green spaces, update buildings which are not fit for purpose for today's employees, out dated heating systems. A simplified layout of the western. Patients are constantly lost and confused on where they are required to be. Independent food outlets. The prices charges by a voluntary charity are

<b>Question 4: What aspects of the Western General site and surrounding area do you think are important and should be a considered in future plans?</b>	
	daylight robbery and disgusting for any worried family member having to spend time and money. Move competition in, don't be greedy.
72	Cancer centre.
73	Clock tower building and d block.
74	BLANK
75	Better signage.
76	BLANK.
77	Old laundry site converted into a multi-storey car park.
78	Not enough parking on site. Street parking a disgrace.
79	Calm outside space for staff, relatives and patients. Calm well decorated inside space.
80	Main entrance.
81	Clock tower building should be retained.
82	Pavement parking on Telford Road as mentioned above. Public transport while good needs to be improved with more buses calling at, rather than outside, the hospital. Traffic flow between Telford Road to and including the Hospital Main Drive is hazardous and inappropriate, despite traffic calming measures having been adopted. Some traffic moves too fast and there is also a degree of rat-running through the hospital grounds. The road should be closed to through traffic between Car Park 7 and the Clock Tower Building, with access limited to cycles and pedestrians. This would improve safety, reduce disturbance and improve air quality.
83	Showering facilities for active commuters are an absolute must.
84	The listed buildings e.g. clock tower needs urgent upgrade. To feel less like a maze of corridors.
85	The Western has a great community feel even though it is a good size hospital and it would be in its best interests to maintain this as far as possible but some areas do need modernisation and I do think it needs more facilities than it has at present.
86	Height of buildings. Shouldn't be higher than existing.
87	The history.
88	The staff at the WGH are fabulous - there welfare and wellbeing need to be considered. Access to Maggie's Centre needs to be easy. The Delivery area (underneath ward 8) needs to be moved away from patient sleeping areas - all of them. The noise from banging and clattering, loading and unloading, vehicles arriving and leaving, that often start at 4am is horrific and if you are a patient it not only disturbs your sleep the noise can wake you up with a shock and really startle you. It is horrible experience and totally uncondusive to treatment or recovery. Patient day rooms important. TVs at all patient beds. A drainage system that gets rid of the silverfish (!). A system that offers air con in the hot months and warmth in the cold months (irrespective of the Infection Control risks).
89	Parking.
90	Accessibility, minimising inconvenience to local residents whilst supporting access by patients and visitors; amenities- pleasant space for patients and families to spend time- not just cafes.

<b>Question 4: What aspects of the Western General site and surrounding area do you think are important and should be a considered in future plans?</b>	
<b>91</b>	Would be lovely to retain a community feel and encourage community use of the area e.g. many children walk across the site to go to school and this should be encouraged, bringing the community in close contact with the site, It should be easy to access on foot and by bicycle. I would very much like to see a connected off road bicycle access to the western, linking up with the cycle paths. It needs to be attractive! And appeal to our diverse community (not just middle class folk, as in Maggie's Centre). Consideration of the well-being of staff is paramount.
<b>92</b>	I think parking is important but also having clearer or even digital signage that can direct towards a clinic and can be changed for different days/departments /clinics. The front of the hospital is more modern and accessible so bringing similar seating/parking etc. to those departments at the back.
<b>93</b>	Cycle routes, bus links and parking. Creating a greater sense of a "main" entrance and foyer.
<b>94</b>	Another strange question. Clearly, ease of access for patients and visitors is the overriding requirement.
<b>95</b>	Neurology is vital and I really feel some of their Neuro wards and spaces are old and not so much fit for purpose. As a retired NHS staff member and a user of the facilities, it is the most confusing and awkward hospital to find your way around. One is left with the feeling it is simply tacked together with no particular plan in mind.
<b>96</b>	Extra free parking.
<b>97</b>	Spaces for people to get around easily, to be in and enjoy, make public transport easy and accessible.
<b>98</b>	Pedestrian access prioritised.
<b>99</b>	Signage!!! It's very poorly sign posted on approach to the hospital and inside.
<b>100</b>	Parking, I suppose.
<b>101</b>	The old buildings and the RVB building.
<b>102</b>	RVH land should be made into parking, to alleviate local congestion, esp. for local residents.
<b>103</b>	Where parked cars are they go.
<b>104</b>	I think the clock tower is nice important to maintain, I think extra parking would be so good for patients and their families.
<b>105</b>	BLANK.
<b>106</b>	Access Regional Cancer centre- open space good for staff and patient/family wellbeing. Easy access/signage for older people/ dementia. Good affordable café.
<b>107</b>	Good signage and site maps. Car parking/transport links.
<b>108</b>	Easy access, good signage, good bus root.
<b>109</b>	The oldest parts of the hospital.
<b>110</b>	Much more parking. Staff abandon their cars in neighbouring streets, even blocking people's drives, without a care. Often for 12 hours. Staff should have adequate parking to allow for their shift work. There are some beautiful parts of the building such as the training part, the exterior is lovely and more should be mad enough of this.
<b>111</b>	The cancer centre and Maggie's.
<b>112</b>	More parking the hospital is fine as it is.

<b>Question 4: What aspects of the Western General site and surrounding area do you think are important and should be a considered in future plans?</b>	
<b>113</b>	Design it with genuine input from your nurses. Look at Forth Valley hospital - brilliantly designed. Have scanning etc. units located for ease of access from whatever ward. Ensure privacy and dignity of patients so they're not being pushed on beds to a scan etc. mingling with visitors and staff. Ensure there is beauty somewhere - places of calm, tranquillity.
<b>114</b>	Edinburgh cancer centre upgrade and car parking.
<b>115</b>	Actual patient care.
<b>116</b>	Car parking, renovating derelict areas in the building to improve bed flow and stop folk sleeping at the front door.
<b>117</b>	Better signage especially for visually impaired people Wider pavements. Slower traffic speed.
<b>118</b>	Existing car parks are very important. Increase capacity again.
<b>119</b>	The accessibility between areas should be considered although it's difficult to contain services in one building the traffic system should be maintained. It would be nice to see well maintained hospital grounds similar to the Astley Ainslie. I understand this is expensive but it would have a therapeutic effect on patients and allow them to get involved. Easily accessible. Parking for staff and public should be accessible as should transport links.
<b>120</b>	No need for an A&E when you've got a big one at the royal. Too much variation.
<b>121</b>	Maintain existing open spaces and landscaped areas.
<b>122</b>	You should be consulting on how 'future development' is financed and who benefits financially at the expense of frontline health services.
<b>123</b>	I think the green spaces are important. The canteen is in desperate need of refurbishment. There is a lack of space for people to gather.
<b>124</b>	Free parking.
<b>125</b>	Car parking.
<b>126</b>	BLANK.
<b>127</b>	To blend in better with more modern buildings.
<b>128</b>	Parking, people with disabilities.
<b>129</b>	1000% Edinburgh Cancer Centre needs to have a whole new building. Ideally where DCN is after they leave. It is the head of this area and it's in poor condition.
<b>130</b>	Parking is a must. You badly need more. The cancer service facilities are appalling staff do a great job in terrible conditions.
<b>131</b>	Oncology services need a new up to date modern building.
<b>132</b>	Improved public transport links to town.
<b>133</b>	Most services are quite a distance from the buildings. The only options are quite a long walk or an uphill walk from the main road.
<b>134</b>	Ward 1; Maggie Centre, cancer centre.
<b>135</b>	Parking.

<b>Question 4: What aspects of the Western General site and surrounding area do you think are important and should be a considered in future plans?</b>	
<b>136</b>	Noise pollution. Limit this please to neighbouring houses. If building limit height.
<b>137</b>	Put patients first. Consider their needs and everything else will fall into place.
<b>138</b>	No smoking on site should be enforced. Security at night needs improved - too many people can just come in as they please with no questions asked - should have to report to ARU reception.
<b>139</b>	Minor injuries clinic valuable service.
<b>140</b>	Adequate parking for staff as well as patients and visitors. Clean looking building.
<b>141</b>	I don't think it's necessary to hold on to any of the original structure unless necessary. Focus should be on what is most practical for provision of care.
<b>142</b>	Create an environment that helps to support a happy and stable workforce where people want to come to work and it is seen as a desirable place to work...already much better cohesive team than you see on other hospital sites. Future plans must be fit for future needs, e.g. capacity to manage comorbid aging population.
<b>143</b>	The WGH is close to residential areas so it is important that the neighbours are happy with any developments.
<b>144</b>	Anne Ferguson Building and RVB not old and need to be kept. The rest could go.
<b>145</b>	Building and site not as important as retention of key services such as acute medicine. Development of a spacious, modern bespoke cancer centre seems a priority.
<b>146</b>	Maximising the great views towards the castle.
<b>147</b>	Parking.
<b>148</b>	More parking. Waiting area in clinic 3 in Anne Ferguson outpatients is far too small considering how busy the clinics there can be.
<b>149</b>	Gardens, restaurants, hairdressers, shop with essentials in it i.e. basic clothes, toiletries! Better car parking facilities for both visitors and staff.
<b>150</b>	Impact on local residents.
<b>151</b>	Some green areas with garden and outdoor seating to relax especially for those spending a lot of time visiting relatives who are in patients for extended lengths of time.
<b>152</b>	Parking.
<b>153</b>	More designated patient areas out with the ward area. I also think that some of the wards (not including the Royal Victoria building) need to be more patient friendly - there is a serious lack of community: patient space in the wards.
<b>154</b>	Maintain the parking facilities.
<b>155</b>	Car parking.
<b>156</b>	Less connecting buildings for easier patient access. No more corridors on hills etc.
<b>157</b>	Gardens, keep the grassy areas.
<b>158</b>	Ability to park.
<b>159</b>	Accessibility across site and nicer loos.

<b>Question 4: What aspects of the Western General site and surrounding area do you think are important and should be a considered in future plans?</b>	
<b>160</b>	I think the Ferry Road end is an eyesore and needs major redevelopment. Overall a more eco-friendly green needs to be considered.
<b>161</b>	BLANK.
<b>162</b>	Making the listed building areas and surroundings attractive. Care of surrounding residential areas with regard to noise / environmental impact.
<b>163</b>	Cancer Centre.
<b>164</b>	The lifts: should be completely updated, more modern.
<b>165</b>	BLANK.
<b>166</b>	Reduction in traffic movement and services designed to support people in their own home. Good luck with what is a very challenging project with historical and budgetary constraints.
<b>167</b>	BLANK.
<b>168</b>	BLANK.
<b>169</b>	It dominates the area as to traffic, parking and transport.
<b>170</b>	Connectivity to public transport and active travel.
<b>171</b>	Keep the historical shell. Demolish and rebuild anything else not built in the last 10-15 years. Keep natural lighting for all areas. RIE prioritised clinical areas but staff have struggled in offices with no ambient light as have theatre, ITU staff and patients.
<b>172</b>	Think that Renal Unit should be moved to new area and space used to develop ward 1 and Oncology Trials. Good for Oncology to remain together e.g. wards, admission facility, clinics, treatment areas, radiotherapy and admin offices. Could add levels to what is currently Renal Unit and multi storey car park, or use car parking space for building expansion. Renal Unit seems out of place in surrounding cancer centre area.
<b>173</b>	Parking. Go up - not out. Signage - improve this from main entrances - simplify!
<b>174</b>	Bus services - there is currently no bus service from Leith / Newhaven direct to WGH. It's too far for most patients / relatives to walk from Crewe Toll so they bring the car, can't park and arrive stressed and exhausted already. Parking - is the most common complaint I here from patients and relatives. For some it presents such an issues that they stop coming.
<b>175</b>	Clock tower should be the focus (north to south orientation rather than current west to east). Needs a welcoming central area where people can see info, maps, directions (could be the clock tower).
<b>176</b>	We need to ensure our ability to look after acutely sick patients on site by having good links between specialities and adequate acute medical services on site.
<b>177</b>	The character.
<b>178</b>	BLANK.
<b>179</b>	Parking is crucial. Get local residents to support rather than oppose multi-level parking. A cohesive building plan is necessary to ensure new buildings 'fit' rather than be squeezed into spaces.
<b>180</b>	Easy access to departments, easy to travel around in and outside. Able to find out info - central point in each area.

<b>Question 4: What aspects of the Western General site and surrounding area do you think are important and should be a considered in future plans?</b>	
<b>181</b>	A=E at WGH like we used to have. Too much activity for only in the city. Parking very difficult on site, need more. Poor perception at the RIE.
<b>182</b>	I work in labs so a new lab building would be great. Labs are essential and should be considered in any plans.
<b>183</b>	Speed of renewal! 5 years not 30! Pathetic lack of ambition.
<b>184</b>	Environment - trees, plants and flowers are a real cheer up and good for morale and wellbeing - staff and patients. Access by bus - from all of the Lothians for patients and staff should be easier and take less time. Parking for patients and staff needs to be addressed urgently. Signage, maps and apps: link signage, maps, apps about how to find departments and wards to standard outpatient and inpatient appointment letters department. Good examples are Clinical Radiology and Lymphedema Physiotherapy Clinic. Start planning now for the new Edinburgh Cancer Centre and make sure it will fit in with the current developments and be added on higgledy piggedly like most of the other developments. I read info about 'the set of high level principles' to inform future developments at the WGH and suggest the priority order should be: Welcoming, easy to move around - easily accessible, safe and pleasant, resource efficient, adaptable, and distinctive? User friendly and welcoming?

<b>Question 5: Please state your experience with the Western General Hospital site:</b>	
<b>20</b>	Family Member, Carer, Visitor.
<b>13</b>	Local Resident.
<b>2</b>	Local Resident / Patient.
<b>1</b>	Local Resident / Patient / Family Member / Patient Representative.
<b>104</b>	Staff member.
<b>1</b>	Staff Member / Family Member for Cancer Care Patient.
<b>1</b>	Staff Member / Patient.
<b>2</b>	Staff Member / Local Resident / Patient / Family Member. 11
<b>1</b>	Staff Member / Visitor. 1
<b>1</b>	Staff Member / Local Resident. 1
<b>30</b>	Patient / Former Patient.
<b>6</b>	Other.
<b>2</b>	BLANK.
<b>184</b>	<b>TOTAL</b>

## Appendix 2

Place Brief: Western General Hospital.

### Contents

1. Purpose
2. Location and Proposal
3. Vision and Aim 4. Placemaking Principles
5. Next steps.

Plan 1

### 1. Purpose

1.1 A Place Brief is a set of high level principles which shape the future development of a site. The brief has a place-based approach and incorporates the views and aspirations of the local community. The format of the brief is innovative in as much as it specifically addresses the six placemaking criteria underpinning the Scottish Government policy documents: Designing Places, Creating Places and Designing Streets. The six criteria are:

- Distinctive;
- Safe and pleasant;
- Welcoming;
- Adaptable;
- Resource efficient; and
- Easy to move around and beyond.

1.2 The process has involved two stages: firstly, the gathering of community views through a Place Standard exercise. Secondly, the brief has been written around the six placemaking criteria and incorporates the outputs from the first stage.

1.3 This brief has been prepared collaboratively by the Council with considerable input from the local community and other stakeholders. Comments submitted during and following community engagement events have been recorded and can be viewed in the report to Planning Committee on 15 May 2019.

1.4 This Place Brief constitutes non-statutory planning guidance. It will be used to develop future proposals for a redevelopment of the Western General Hospital site and as a material consideration in determining future planning applications. Applications will also be judged against the policies in the Local Development Plan (LDP) in the normal way. The brief will serve as a useful basis for undertaking stakeholder and public engagement allowing for individual projects to be delivered over the next 20 to 30 years.

### 2. Location and Proposal

2.1 The brief identifies design and placemaking criteria to guide development proposals on the main site. Consideration is also given to the wider development area to promote good placemaking beyond the site boundary and ensure good connectivity with the surrounding area particularly in terms of active travel. The site context is shown on Plan 1.

### **3. Vision and Aim**

- 3.1 The vision for the overall site is to improve the hospital's physical environment, enhance patient care and ensure that high quality and sustainable services continue to be provided on the Western General site over the coming years. The longer-term vision is for the hospital to accommodate a larger scale oncology unit in the south west area of the site. The vision is also to incorporate a range of land uses which would be available to residents who might not necessarily use the clinical services. The site should also provide much needed permeability for the community through cycle routes and footpaths and offer connections to the greenspaces and parks beyond. The aim of the place brief is to set high level development principles to help realise this vision.
- 3.2 A further aim of this place brief is to consider the relationship between the main development site and the wider area. The brief identifies opportunities to enhance the setting of the hospital and improve linkages between it and the wider area, particularly in terms of active travel.

### **4. Placemaking Principles**

- 4.1 Proposals should accord with relevant policies in the Edinburgh LDP and, where possible, meet the quality aspirations and standards set out in the Edinburgh Design Guidance. More specifically, the following principles should be used to guide future development within the site. Where possible, these principles have been illustrated on Plan 2 – Development Framework.

#### **4.2 Distinctive**

- 4.2.1. The Design Statement should provide a distinctive and coherent design for the site whilst creating a framework for new developments.
- 4.2.2. The design of new buildings within the site should be of high quality reflecting the best examples of hospital design.
- 4.2.3. Good quality useable greenspace should be included in the design for the benefit of future and existing users.
- 4.2.4. Strong frontages should be created along Crewe Road South and Telford Road. Frontages should comprise buildings or landscaping and not car parks. Existing frontages should be improved to make the roads more attractive for active travel.
- 4.2.5. The Clock Tower is B listed and is important to the heritage of the area. Consideration should be given to its future use as a landmark within the development of the site.
- 4.2.6. Key views from the site should be identified through a site analysis submitted as part of a supporting Design Statement.
- 4.2.7. New building heights should acknowledge adjoining development at the edge of the site (bungalows) and demonstrate more flexibility towards the centre of the site.
- 4.2.8. The footprint of the new buildings should incorporate elements of useable green space.
- 4.2.9. Ecological understanding of the site should inform the design.

#### **4.3 Easy to Move Around and Beyond**

- 4.3.1. Vehicular access can continue to be taken off Crewe Road South and Telford Road.

- 4.3.2 Opportunities for buses to penetrate the site with sufficient stops in key locations should be explored.
- 4.3.3. Clearly defined pedestrian links should be made east –west through the site, and beyond into neighbouring communities.
- 4.3.4. New cycle /footpath links should connect with existing / proposed links outwith the site wherever possible.
- 4.3.5. An appropriate car and cycle parking strategy should be agreed with the Council. All proposals will be accessed against the Council’s car parking standards incorporating the spirit of promoting accessibility by walking, cycling and use of public transport. Opportunities for car and cycle club provision should be explored.
- 4.3.6. Proposals should seek removal of existing barriers to permeability and sustainable travel.

#### **4.4 Safe and Pleasant**

- 4.4.1. Proposals should enhance the character of Crewe Road South and Telford Road by creating strong new frontages and improving existing frontages to be more attractive for active travel.
- 4.4.2. Natural surveillance of public routes should be incorporated.
- 4.4.3. All footpaths leading to the site and connecting through the site should be sufficient width, well-lit with frequent points of access.
- 4.4.4. Design of the site should adhere to Secured by Design principles;
- 4.4.5. All public spaces and green areas throughout the site should be designed with their purpose clearly articulated. A multi- disciplinary team of designers should be appointed.
- 4.4.6. A simple pallet of high-quality materials should be used for the buildings and external spaces.

#### **4.5 Welcoming**

- 4.5.1. An entrance statement on Crewe Road South should mark the main vehicular access to the site with appropriate landscaping and signage.
- 4.5.2. The buildings should be well designed and orientated to take advantage of views from the site.
- 4.5.3. Servicing arrangements, where appropriate, should be unobtrusive and not compromise the pedestrian/cycling experience.
- 4.5.4. Any planting should provide seasonal interest and maximise biodiversity. The design of the edges of the site should be carefully considered to create a positive experience.

#### **4.6 Adaptable**

- 4.6.1. The development should incorporate non-clinical/hospital space for use by the wider community.
- 4.6.2. Land uses and spaces for all ages and abilities should be accessible.

#### **4.7 Resource Efficient**

- 4.7.1. The design of the building and materials used in construction should be sustainable. Innovative creative Sustainable Urban Drainage systems (SUDs) solutions within the hard and soft landscaping should be designed.

- 4.7.2. Good quality hard and soft landscape materials and features should be specified throughout the public realm to minimise the need for replacement in the long term.
- 4.7.3. An energy strategy should be designed to deliver the most appropriate efficient, carbon saving, quality and cost-saving solution for building users.
- 4.7.4. Opportunities should be created for involving building users and the local community to manage green or growing spaces.

## **5. Conclusion**

- 5.1 The Western General Hospital Place Brief has been prepared following extensive community and stakeholder engagement. It represents a significant step towards redevelopment of the site with further opportunity for engagement and comment through the planning application stages. The principles in the brief will be used to guide future development proposals and will be a material consideration in the determination of relevant planning applications.

PLAN 1 SITE CONTEXT

**WESTERN GENERAL HOSPITAL  
PLACE BRIEF**



PLAN 2 DEVELOPMENT FRAMEWORK

**WESTERN GENERAL HOSPITAL  
PLACE BRIEF**

