Deloitte.



Wythenshawe Hospital Campus Strategic Regeneration Framework

Consultation Report DRAFT

March 2021

1. Introduction

Wythenshawe Hospital and adjacent land is established within planning and regeneration policy as an opportunity for transformational change.

1.1. Wythenshawe Hospital Campus Strategic Regeneration Framework

Manchester University NHS Foundation Trust (MFT) and Bruntwood, in consultation with Manchester City Council (MCC) and other key stakeholders has developed a masterplan and Strategic Regeneration Framework (SRF) for the transformation of the Wythenshawe Hospital Campus in accordance with Core Strategy Policy EC12 University Hospital South Manchester Strategic Employment Location.

The SRF is not a planning policy document, but it has been drafted in the context of supporting future development proposals that will deliver Manchester's strategic priorities – economic, social and environmental - as well as complementing the City's other regeneration initiatives.

The SRF will not form part of MCC's Local Plan; however, on endorsement it will become a material consideration in the determination of any planning application for the Wythenshawe Hospital Campus area.

1.2. MCC Executive – March 2020

The draft SRF was initially reported to MCC's Executive Committee for endorsement as a basis for consultation on 11 March 2020.

1.3. Public Consultation

The public consultation period ran for 8 weeks, beginning on 30 November 2020 and closing on 29 January 2021.

During this period, hospital staff, the local community, neighbouring landowners, interested parties and the general public were provided the opportunity to find out more about the proposals and give their feedback, to ensure that the final version of the SRF is informed by their views.

MFT, Bruntwood and MCC worked together to plan and deliver the public consultation exercise, which had to be tailored to fit with Government guidance in respect of the Covid-19 pandemic and requirements for social distancing.

Residents and businesses within an agreed consultation boundary were notified of the consultation; in addition, it was widely publicised through a range of traditional and social media platforms, MFT and MCC websites, and community venues and networks.

Responses to the consultation could be submitted via an online feedback form, email or freepost to MFT, or via telephone.

Comments were noted at the digital briefing meetings held for staff and the public; these have been captured in the feedback reported in this report. Responses to comments were also provided at the meetings and posted on the Frequently Asked Questions section of the MFT webpage.

1.4. Purpose of this Report

To report on the public consultation undertaken including consultation methodology, consultation comments and the team's response, and summary of proposed changes to the SRF. Copies of information used in the consultation are appended to the report.

The reporting process allows MFT and Bruntwood to fully understand the public consultation response to the draft SRF and make changes to the final document to ensure it is suitable to be endorsed as final by MCC Scrutiny and Executive Committees in March 2021.

1.5. Report Structure

This remainder of this Report is structured as follows:

- Section 2: Consultation Strategy and Methodology setting out the overall approach to the consultation;
- Section 3: Consultee Comments and Team Response comments have been collated by theme and, where required, a response drafted to these;
- Section 4: Summary of proposed amendments to the draft SRF; and,

- Appendices:
- Appendix 1 Stakeholder List
- Appendix 2 Consultation Zone

2. Consultation Strategy and Methodology

At the outset of planning for the consultation, a group was established with representatives from MFT, Bruntwood, MCC and Deloitte to ensure that the consultation was appropriately planned, that the relevant stakeholders were engaged and that key messages were communicated consistently.

2.1. Covid-19 Pandemic

In accordance with Government guidance in respect of the Covid-19 pandemic, and the requirement for social distancing and other safety precautions, it was decided at the outset that it would not be possible to hold a physical public exhibition, as the team would have liked to do.

The team carefully considered the guidance set out in the Manchester Statement of Community Involvement and designed a consultation that incorporated a range of alternative methods, including letters, leaflets and video briefing sessions, as well as use of traditional and social media. The approach to consultation was discussed with

local Ward Councillors and tailored in response to feedback before it commenced.

As set out within this report, there has been a good level of engagement from stakeholders through these different methods. Where contact details and consent were provided, those responding to the consultation will be kept informed by MFT as the masterplan moves forward.

Further public consultation will take place in advance of any detailed planning applications being submitted in respect of development plots within the masterplan area and stakeholders will have a further opportunity to provide feedback and shape proposals through this consultation.

2.2. Stakeholder Mapping

A key step in undertaking a consultation exercise is to determine who is to be consulted. To facilitate this, a stakeholder mapping exercise was carried out to identify the key stakeholders in connection with the draft SRF, based on the guidelines detailed in Section 2 of this report.

2.2.1. Political Engagement

It is important to engage effectively with local politicians to ensure that elected members are kept informed of the masterplan, and the consultation process itself.

It is also recognised that local politicians often possess a significant amount of knowledge about the communities and

localities they represent, which can be harnessed to inform the consultation and design development process.

The Wythenshawe Hospital Campus masterplan area lies within Manchester's Baguley ward, in the Wythenshawe and Sale East parliamentary constituency. Given the size of the masterplan area and the comprehensive scheme proposed, it was considered appropriate to consult elected members representing both the immediate ward area, and adjacent wards, as well as representatives from Trafford Metropolitan Borough Council (Trafford MBC).

2.2.2. Wythenshawe Hospital Staff

Existing Wythenshawe Hospital Staff were identified as a key stakeholder that will be directly affected by the masterplan and able to provide insight and feedback that will be key in developing the masterplan into detailed design proposals.

2.2.3. Tenants and Resident Associations

Wythenshawe Housing Group was identified as a key stakeholder in the local area.

2.2.4. Community Groups

Wythenshawe Good Neighbours and the BW3 business networking group were identified as active community groups in the local area.

2.2.5. Public Engagement

Achieving meaningful and sustained engagement with local residents and businesses lies at the heart of the stakeholder mapping process and subsequent consultation strategy.

2.2.6. Neighbouring Landowners

The masterplan area is located within a wider development context, as explained in the draft SRF. There has been ongoing engagement with key landowners in the local area, including Bluemantle (Roundthorn Industrial Estate), Manchester City Council, Wythenshawe Housing Group, Manchester Airport Group, Royal London and Trafford MBC throughout the preparation of the draft SRF and during the public consultation period. This has included individual briefing meetings and emails.

2.3. Stakeholder Communication

2.3.1. Promotion of the Consultation

A variety of methods were used to promote and advertise the consultation. Initial activity planned included:

- Leaflet drop, with letter from MFT, within the agreed consultation zone. Circa 7,000 leaflets were delivered.
- Pop-up banner and leaflets delivered to community venues in the local area that were still open and operational during the Covid-19 pandemic, including Wythenshawe Forum Health Centre and Woodhouse Park Lifestyle Centre.
- Pop-up banner and copies of leaflets were also available from the MCC community office, for Health and Social Care, District Nurses and other staff to take out on appointments.
- Posters and banners distributed at strategic locations within the Hospital buildings
- Traditional media engagement, including:
 - Manchester Evening News (Print and On-line, published 3 December 2020).

- BBC Breakfast North West News (featured on the 0630, 0657, 0728 and 0830 news bulletins on 4 December 2020).
- BBC Radio Manchester (pre-recorded interview with Director of Strategic Projects, played on news' bulletins on 4 December 2020).
- Wythenshawe FM (pre-recorded interview with Masterplan Director, which aired on drivetime show on 21 January 2021 and throughout the month until 29 January 2021).
- Place NorthWest (On-line, published 4 December 2020).
- Southside Media Community Magazine for Wythenshawe and Northenden (On-line)
- Building Better Healthcare (On-line article, posted 9 December 2020).
- MFT website.
- Social media engagement, including Twitter, Facebook and LinkedIn platforms of MFT.
- Distribution of leaflets through community networks, including Wythenshawe Housing Group – located on notice boards and Community Centres, where these were still open and operational.
- Internal staff communications for Hospital staff, including a staff bulletin on 30 November 2020, which launched the formal consultation period followed by two Microsoft Teams' Live Briefing Sessions specifically for staff held on 7 and 15 December.
- Email and digital briefing meeting invitation to identified stakeholders, including Ward Councillors and Member of Parliament.

Further promotion activity was undertaken by the team in early January 2021 to encourage the local community and wider public to participate in the consultation prior to the close date of 29 January 2021.

This included the following:

- Additional posters and leaflets delivered to the Covid-19 vaccination clinic at Woodhouse Park Lifestyle Centre.
- On-going social media engagement, including Twitter,
 Facebook and LinkedIn platforms of MFT.
- Two Twitter polls in January 2021.
- Distribution of leaflets and promotion through social media platforms of community networks, Wythenshawe Good Neighbours.

2.3.2. Consultation Zone

Appendix 2 shows the final consultation zone for the direct leaflet drop to local residents and businesses as agreed with MCC. This captures the extent of the local community that is likely to be directly affected by the delivery of the masterplan.

Early in the consultation period, it was flagged that a small group of residential properties located in the Trafford local authority area, outside of the consultation zone but on Dobbinetts Lane (shown in purple at Appendix 2), had not been directly notified. A copy of the letter and leaflet was posted to these properties on 21 December 2020.

The consultation was promoted to the wider public through the means outlined at 3.3.1 and was open to all.

2.4. Methods of Consultation

The consultation sought to gauge the opinion and input of key stakeholders and the public on the contents of the draft SRF, particularly key themes, rather than the indicative images of what the development could be; albeit these were useful tools in engaging the audience.

Following review of a variety of consultation methods and considering the restrictions in place regarding social distancing, it was determined that the most effective method of consultation would be a series of digital briefing events. In addition, a summary of the masterplan and key images, and full copy of the draft SRF, was available on a dedicated page of MFT's website.

2.4.1. Digital Briefing Sessions

Five digital briefing events were held during the period of consultation, scheduled on different days of the week and at different times to give everyone an opportunity to attend.

The digital briefing events were as follows:

- Monday 7 December 2020, 1230-1330 Staff only
- Thursday 10 December 2020, 1800-1900
- Monday 14 December 2020, 1200-1300
- Tuesday 15 December 2020, 1230-1330 Staff only
- Thursday 14 January 2021, 1800-1900

The digital briefing format enabled key members of the team to explain the site context and the proposals by reference to a PowerPoint presentation with bullets, diagrams and sketches.

Microsoft Teams' Live was used to host the briefings, which meant that attendees could see the team members and post questions to be answered throughout the briefing. All questions and answers were published during the briefing for attendees to view.

Team representatives at each digital briefing included the following people, who have been directly involved in preparing the masterplan and draft SRF, and were able to respond to a wider range of questions:

- Michelle Humphreys, MFT Director of Strategic Projects
- Rob Elsom, Bruntwood Development Director
- Laura Feekins, Deloitte Real Estate (Planning Consultant)

Attendees at the digital briefings were encouraged to complete a consultation form, either on-line or via freepost. Notes of questions raised were taken at the meeting, and a Frequently Asked Questions section was added to the webpage with responses. The option to provide feedback via email, post or telephone was highlighted.

2.4.2. MFT Website

A dedicated page was established on the MFT website at the following link: https://mft.nhs.uk/future-wythenshawe-hospital/strategic-regeneration-framework/.

The webpage included the following information:

- Introduction to the proposals.
- Summary of the masterplan and key diagrams and sketches.
- Link to download the full draft SRF document.
- Details of the digital briefing events and how to access.
- Link to the on-line questionnaire, and other options available for providing feedback.
- Frequently Asked Questions, responding to questions raised at the digital briefings.

2.4.3. Questionnaire

The questionnaire was designed to capture feedback on key themes within the draft SRF, as well as providing open text space for people to record any further comments or concerns. Respondents could select the themes that they wished to comment upon; if it was their preference, they could also simply select a "Yes" or "No" response to questions about support for the draft masterplan and whether it would generate positive outcomes for the area.

The form collected data to allow analysis on the coverage of the audience and how they find out about the event, including the capacity in which they were responding (e.g. staff, resident, patient, etc).

2.4.4. Email and Telephone

A dedicated email address and telephone number was established for respondents to provide their feedback if they did not want to use the questionnaire, as follows:

• Email: <u>futurewyth@mft.nhs.uk</u>

• Telephone: 0161 276 1234

2.4.5. Twitter Polls

In January 2021, MFT ran two Twitter polls in respect of the masterplan proposals, in order to seek additional prompt feedback alongside the questionnaire, as follows:

- Twitter Poll 1: launched 15 January 2021, reminder sent 20 January 2021.
- Twitter Poll 2: launched 25 January 2021, reminder sent 28 January 2021.

2.4.6. BW3 Business Meeting

MFT Director of Strategic Projects attended the BW3 (Business Working with Wythenshawe) Business Network Meeting on 21 January 2021 and presented an overview of the SRF to members and responded to questions.

2.5. Reporting

All consultation and engagement have been fully recorded and shared with MFT, Bruntwood and MCC. Feedback received throughout the consultation process has been monitored in order to identify issues and concerns.

Microsoft Excel was used as a database for collating and analysing the consultation responses received through completed questionnaires and emails. The results are presented in Section 3 of this report. Qualitative feedback received during the digital briefing sessions is also included.

The feedback received during consultation has resulted in some proposed changes to the draft SRF, which are set out in Section 4 of this report.

In terms of formal reporting, MCC prepare a Committee Report, which will be submitted alongside the final SRF to MCC's Scrutiny and Executive Committees. The Committee Report will summarise the outcome of the consultation; this consultation report will be appended to it for information.

Data collected during the consultation may also be used to feed into the preparation of the Statement of Consultation for any subsequent planning applications in respect of the Wythenshawe Hospital Campus SRF area.

Councillors will be offered a final briefing to explain the outcome of the consultation and the proposed amendments to the draft SRF in advance of the Committee meetings.

3. Consultation Comments and Team Responses

3.1. Overall Approach

A range of organisations and individuals were identified for engagement within the consultation process; these are listed in Appendix 1.

In addition to the distribution of more than 7,000 leaflets in the local area, other key stakeholders were invited to digital briefings and the consultation was promoted via a range of methods, as outlined in Section 2 of this report.

3.2. Manchester City Council

3.2.1. Elected Members

16 elected members were directly contacted in advance of the public consultation events. They were invited to attend one of two Councillor briefing sessions held virtually on 24 November 2020

A summary of the key comments received during the digital briefing sessions are provided below.

The later parts of this section set out a summary of the key themes raised during consultation and the team's response, which comments raised by Councillors.

Section 4 of this report sets out the proposed amendments to the draft SRF following the comments received.

3.2.1.1. Session 1 – Key Comments

Councillors noted overall support for the draft SRF and welcomed the investment to create the best hospital for Wythenshawe residents.

The following topics were raised for consideration:

- The importance of meaningful consultation and ensuring that the consultation material is suitable for the intended audience.
- Transport and highways' matters, including issues related to on-street car parking, public transport improvements and incentivising people to use any future multi-storey car park.
- Confirmation as to the nature of the residential offer and how it would fit with MCC priorities.
- Clarity in messaging to local residents around timing and management of construction, and how that affects access to hospital services at the appropriate time.

Section 2 of this report sets out the steps taken to ensure meaningful engagement with the local community.

3.2.1.2. Session 2 – Key Comments

Councillors noted overall support for the masterplan and draft SRF and praised the Hospital staff for the work that they do for the community.

The following topics were raised for consideration:

- Nature of the commercial occupiers that might be attracted to the masterplan area and their role in operation of the Hospital.
- Transport and highways' matters, including issues related to on-street car parking, public transport improvements and scope for increased shuttle bus provision or bus re-routeing during the Covid-19 pandemic.
- The number of jobs expected to be created and the importance of prioritising local people for new employment opportunities.
- Confirmation as to the nature of the residential offer.
- Engagement undertaken with Hospital staff.

Section 2 of this report sets out the steps taken to ensure meaningful engagement with Hospital staff.

3.3. Landowners

3.3.1. Manchester City Council

Senior officers at MCC have been engaged throughout the preparation of the draft SRF, including through briefing meetings and emails.

3.3.2. Trafford MBC

Senior officers at Trafford MBC have been engaged during preparation of the draft SRF, including through briefing meetings and emails.

Trafford MBC provided written feedback during the consultation period, which welcomed the proposals and opportunities for planned expansion in terms of economic benefits to the wider area, including Trafford. It was noted

that the proposals offer connectivity opportunities with the proposed strategic development at Timperley Wedge.

Trafford MBC requested that draft SRF be updated to reflect the latest proposals in respect of Timperley Wedge and the draft Greater Manchester Spatial Framework (GMSF), which were published in autumn 2020.

This includes consideration of active travel improvements and linkages between the Wythenshawe Hospital Campus and the proposed MediPark allocation in the draft GMSF.

Detailed comments relating to draft SRF text and diagrams were provided on that basis, which will be addressed in the final version of the SRF (see Section 4).

Trafford MBC noted that two small areas of existing Green Belt within the Wythenshawe Hospital Campus SRF area had been retained as Green Belt, as shown on Figure 3.11.

This plan aligned with the proposed Green Belt boundary in the draft 2019 GMSF and will be reviewed to be consistent with the latest proposals, which shows these areas removed from the Green Belt.

Following the decision of Stockport MBC in December 2020, the draft 2020 GMSF is no longer being progressed. However, Bolton, Bury, Manchester, Oldham, Rochdale, Salford, Tameside, Trafford, and Wigan councils have agreed to form a joint committee to develop a long-term plan for jobs, new homes, and sustainable growth across their boroughs. The new document will be known as 'Places for Everyone' and will be based on the 2020 draft GMSF.

For the purposes of this document, it is assumed that all relevant policy in the Places for Everyone Plan will be as published in the draft 2020 GMSF.

3.3.3. Royal London Asset Management

Representatives of Royal London Asset Management (RLAM) have been engaged during preparation of the draft SRF, including through briefing meetings and emails.

RLAM provided written feedback during the consultation period, which welcomed the vision of the draft SRF to provide excellent health care and clinical facilities in an environment that is welcoming to everyone.

RLAM supports the identification of key infrastructure to serve the Wythenshawe Hospital Campus and proposed allocations at MediPark and Timperley Wedge.

RLAM notes that for the delivery of this infrastructure to be successful, it is imperative that there is an agreed strategy and joined-up thinking between relevant parties, including landowners within the Timperley Wedge and MFT.

Support was particularly noted in the following areas:

- Safeguarded route of the Metrolink Western Loop extension. Request for wider stakeholder engagement in respect of any amendments to the safeguarded route.
- On-going consideration of strategic highway network in the context of the wider sphere of influence.
- Enhanced public transport modes, including bus and rail.
- Proposals to improve green infrastructure and enhanced pedestrian and cycle facilities.
- Commitment to planning obligations where required.
- Collaboration with landowners for integration of future planning applications in the wider sphere of influence.

Detailed comments relating to draft SRF text and diagrams were provided, primarily in relation to consistency with the latest version of the draft GMSF (now to be taken forward as

Places for Everyone), which will be addressed in the final version of the SRF (see Section 4).

MFT and Bruntwood note the comments of RLAM and have committed to on-going collaboration as the masterplan moves forward to the next stage.

3.3.4. Bluemantle (Roundthorn Industrial Estate)

Representatives of Bluemantle have been engaged during preparation of the draft SRF, including through briefing meetings and emails.

Bluemantle have not provided any written feedback during the consultation period.

3.3.5. Manchester Airport Group

Representatives of Manchester Airport Group have been engaged during preparation of the masterplan and draft SRF, including through briefing meetings and emails.

Manchester Airport Group have not provided any written feedback during the consultation period.

3.4. Staff and Community Engagement

Five digital briefing events were programmed in support of the consultation, alongside the opportunity to provide feedback via a questionnaire, email or telephone.

This section presents an analysis of participation in the consultation and comments raised.

3.4.1. Summary of Consultation in Numbers

3.4.1.1. Respondent Numbers

Table 3.1 sets out the overall response rate to the different consultation methods.

Table 3.1: Respondents to Consultation Activity

Consultation Activity	No. of Respondents
Staff Briefing, 7 December 2020	51 attendees
Public Briefing, 10 December 2020	2 attendees
Public Briefing, 14 December 2020	2 attendees
Staff Briefing, 15 December 2020	17 attendees
Public Briefing, 14 January 2021	13 attendees
Twitter Poll, 15 January 2021	15,806 impressions; 425 engagements
Twitter Poll, 25 January 2021	8,679 impressions; 135 engagements
Feedback Form, On-going	30 responses
Email Response, On-going	3 responses
Telephone Response, On-going	0

3.4.1.2. Geographical Range

Respondents completing the questionnaire were asked to provide their postcode area (if they were happy to do so) to enable analysis of the geographical range of comments.

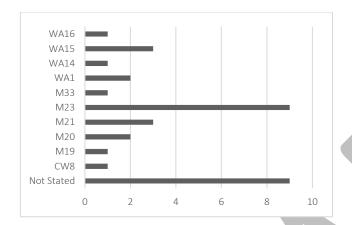
Figure 3.1 illustrates the geographical range of postcode areas and the number of respondents from each area.

Comments were received from respondents located within both Manchester and Trafford postcode areas, generally within the immediate vicinity of Wythenshawe Hospital or surroundings areas including those on key road routes. There were also some comments from slightly further afield, including Cheshire West and Chester authority area.

Comments were received from areas including Baguley, Brooklands and Roundthorn, Sale, Warrington, Levenshulme and Burnage, Chorlton, Didsbury and Withington, Altrincham, Timperley, Knutsford and Northwich.

The most comments (nine) were received from respondents in postcode area M23 (Baguley, Brooklands, Roundthorn). Nine respondents did not state their postcode area.

Figure 3.1: Which Postcode Areas were Responses Received From?



3.4.1.3. Respondent Categories

Respondents completing the questionnaire were asked to confirm how they identified themselves and their interest in the masterplan, for example if they were a member of staff, patient or local resident, to enable the team to understand whether the consultation had been effective in engaging the stakeholders it was targeting.

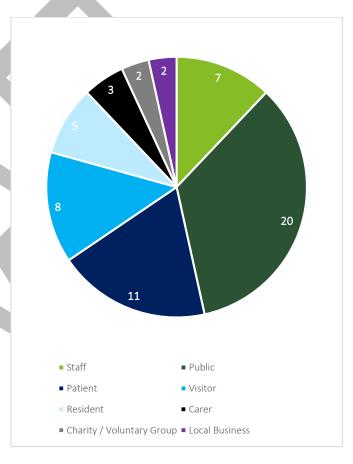
Respondents who commented by email also identified themselves within these categories.

Figure 3.2 illustrates the breakdown of how respondents identified themselves; the form enabled multiple selection if respondents identified with more than one category, so the total does not equal the same total as the number of questionnaires completed.

The majority (20 out of 33) of respondents identified themselves as members of the public.

Many respondents identified that they have at least one connection with Wythenshawe Hospital, e.g. staff member, patient, visitor, carer or member of a charity group. In total, these responses were selected 36 times.

Figure 3.2: How did Respondents Identify Themselves?

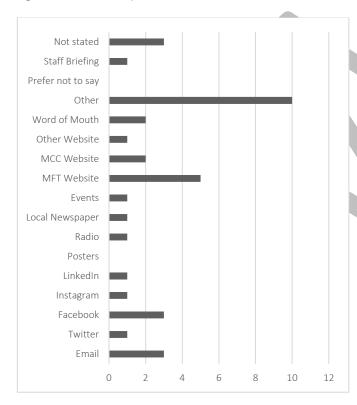


3.4.1.4. Awareness of Consultation

Respondents completing the questionnaire were asked to confirm how they became aware of the consultation, to enable the team to understand which promotion methods were most effective.

Figure 3.3 illustrates the breakdown of how respondents became aware of the consultation; the form enabled multiple selection, so the total does not equal the same total as the number of questionnaires completed.

Figure 3.3: How did Respondents hear about the Consultation?



Some respondents did not state how they had become aware of the consultation, whilst a number selected "Other".

Respondents were fairly evenly spread in terms of the promotion methods identified, with the majority of methods being selected by at least one respondent. The MFT website and social media platforms were effective in raising awareness, these methods were selected a total of 11 times.

3.4.1.5. Comments and Feedback

The questionnaire included two "Yes" or "No" questions to identify whether respondents supported the proposals and if they would make a positive contribution to the area.

Some respondents noted that they felt a sliding scale, or third option should be provided, for those that were not fully supportive or against the proposals. In this instance, the response has been classified as "Not Stated" and the qualitative comments provided have been analysed at 3.4.3.

Figure 3.4 illustrates that most respondents support the proposals set out within the draft SRF (20 out of 33).

Figure 3.4: Do you support the proposals of the draft Wythenshawe Hospital Campus SRF?

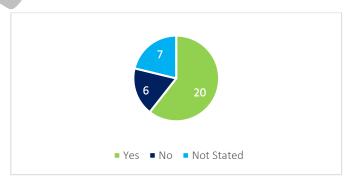
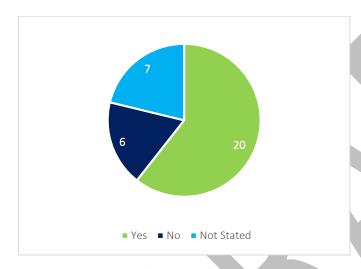


Figure 3.5 illustrates that most respondents do believe that the proposals set out within the draft SRF will make a positive contribution to the local area (20 out of 33).

Figure 3.5: Do you believe that the proposals set out in the draft Wythenshawe Hospital Campus SRF will make a positive contribution to the local area?



Respondents completing the questionnaire were invited to comment in open text boxes on key themes of importance.

Table 3.2 provides a quantitative breakdown of responses received and categorises responses from overall tone as a) supportive, b) not supportive, and c) neutral (they include some supportive and some not supportive elements or comprised suggestions about areas of focus), to give a general overview of the feedback received.

Not all respondents commented on every theme; numbers presented therefore do not total completed questionnaires.

Table 3.2: Quantitative Analysis – Comments on Key Themes

Theme	Supportive (No. / %)	Not Supportive (No. / %)	Neutral (No. / %)
Enhancing quality of health care	12 / 60%	4 / 20%	4 / 20%
Creating a welcoming environment	10 / 62.5%	4 / 25%	2 / 12.5%
Improving accessibility	9 / 47%	2 / 11%	8 / 42%
Expanding land use	10 / 62%	3 / 19%	3 / 19%
Net Zero Carbon	9 / 60%	3 / 20%	3/ 20%
Maximising local benefits	5 / 36%	1 / 7%	8 / 57%

Aside from the theme relating to maximising local benefits, the majority of comments received in respect of each theme were supportive in nature.

Most comments relating to the maximising local benefits theme were neutral, they included some supportive and some not supportive elements or comprised suggestions such as creation of local jobs and delivery of social value.

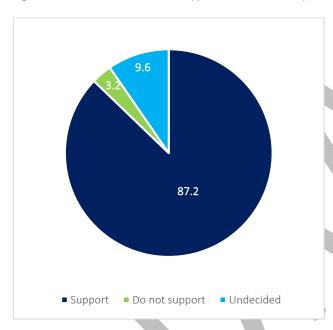
A qualitative analysis of the comments received in relation to the key themes is provided later in this section.

3.4.1.6. Twitter Polls

Figure 3.6 presents the results of the Twitter Poll conducted on MFT's Twitter platform launched on 15 January 2021, reminder tweeted on 20 January 2021.

The majority of respondents (87.2% of 425 votes) were in support of the draft SRF proposals.

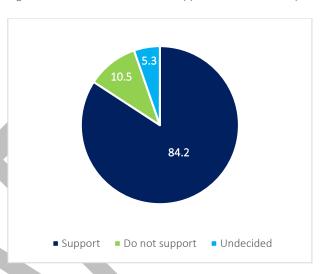
Figure 3.6: Twitter Poll 1 – Do You Support the draft SRF Proposals?



A second Twitter Poll was launched on 25 January 2021, with a reminder posted on 28 January 2021. Figure 3.7 presents the outcome of this Twitter Poll.

The majority of respondents (84.2% of 135 votes) were in support of the draft SRF proposals.

Figure 3.7: Twitter Poll 2 - Do You Support the draft SRF Proposals?



3.4.2. Digital Briefings

Attendees at digital briefings were provided an opportunity to ask questions and give feedback during the meetings.

Topics raised during the meetings are summarised below; all questions asked were responded to directly at the meetings.

3.4.2.1. Staff Only Briefings

- Masterplan funding
- Maintaining services during construction
- Quantum and design of car parking
- Provision of electric vehicle charging
- Timescales / plans for individual departments and buildings, including fit-out design
- Reliance of delivery of HS2 rail link and station
- Planned changes to education facilities

3.4.2.2. Public Briefings

- Retention of bed numbers and hospital services throughout construction and on completion
- Mix of land uses, including level of demand for commercial space, types of occupier, and provision of social housing – staff housing
- Design quality and building materials, carbon impact and inclusive access for all
- Environment and ecology, including loss of Green Belt, development in the flood plain
- Maximising green transport options, including closer Metrolink connection, regular buses
- Car parking, including staff car parking (safe access), disabled bays, potential for free or affordable spaces
- Highways' matters, including management of construction traffic
- PFI contract and masterplan funding
- Consultation activity, including distribution area of leaflets and recording of digital briefing sessions

3.4.2.3. Team Response

The questions and answers raised during the digital briefings were captured and published as a Frequently Asked Questions section on the MFT webpage.

Many of the questions raised were also reflected in comments received against the key themes; a fuller response is provided to these at 3.4.3.

With regard to the PFI contract, retention of the Acute Block is integral to the masterplan that has been developed and it is not considered to be a constraint on the masterplanning.

On funding, following endorsement of the SRF by MCC, the team will take the proposals to various Government

departments to request investment support. The advantage of the masterplan incorporating a mix of land uses is that will potentially unlock a range of potential investment sources. The masterplan may need to be developed in phases to reflect available funding.

The draft SRF sets out the approach to phasing and funding in Section 5, to the extent that it is known and relevant to do so in a spatial planning document. It is not proposed to make any amendments to the draft SRF in this respect.

The masterplan and draft SRF are strategic documents, which seek to establish appropriate development principles for future development at the Wythenshawe Hospital Campus. As such, there are no detailed plans for individual departments or buildings.

As set out in the draft SRF, where new development is proposed, it will be subject to future planning applications that will be determined through the statutory planning process. The SRF would be a material consideration in the determination of planning applications, in addition to relevant local and national planning policy, and other material considerations.

These would include considerations in respect of design quality, sustainability and flood risk; Section 5 of the draft SRF sets out a series of Overarching Development Principles for the masterplan area that further emphasise the commitment of the team in respect of these matters.

The team would undertake further consultation in advance of submitting future planning applications, providing the opportunity to shape and comment on detailed proposals.

The approach to consultation is explained in Section 2 of this report, which confirms that consultation was open to all to

comment. This report also presents the outcome of the consultation and amendments proposed to the draft SRF.

3.4.3. On-line Questionnaire: Thematic Analysis

Respondents were asked to provide comments in respect of the key themes of importance to the Wythenshawe Hospital Campus. The themes, a summary of the key comments received, and the team's response are set out below.

3.4.3.1. Enhancing the quality of health care facilities

Many respondents were supportive of the proposals in this respect, noting that some of facilities are ageing and outdated, and that the proposals would help to create a modern hospital and workplace with cutting edge facilities, which would benefit local people and create new jobs. Support for the Hospital staff and their role in the delivering services for the community was also expressed.

Some respondents requested clarification that the proposals would not result in loss of existing hospital beds or services, and that the masterplan would enable enough provision of new beds considering the lessons learnt from the Covid-19 pandemic.

Paragraph 5.2 of the draft SRF confirms that the primary land use will be retention of the existing hospital function. This will be further clarified, to confirm that *the masterplan* proposal is based on maintenance of existing service and the existing number of bed spaces, with more flexible space enabling MFT to better respond to situations like the current Covid-19 pandemic, in the future.

One respondent considered that the draft SRF did not present enough detail about the proposals. This comment is addressed at 3.4.2.3 above.

One respondent commented that the existing "MediPark" comprising the institutions of the Oxford Road Corridor and the Christie Hospital, Withington Hospital and Siemens Complex amongst others, would potentially be damaged by the introduction of commercial land use at Wythenshawe Hospital Campus.

Many of these institutions are located within the Oxford Road Corridor, which is identified at Paragraph 1.31 of the draft SRF as an example of the success of the MFT and Bruntwood strategic partnership.

The proposal for Wythenshawe Hospital Campus has been developed in response to the existing assets and strengths of the Hospital and identified demand for commercial research and development space, as described throughout the draft SRF. It will be complementary to the Oxford Road Corridor.

Some respondents raised concerns about introduction of retail and leisure use; this will be addressed at 3.4.3.4 below.

Some respondents felt that it would not be sustainable to demolish existing buildings to make way for new development, and generally were concerned about the environmental and residential amenity impact of development; this will be addressed at 3.4.3.5 below.

One respondent noted that based on the draft SRF, the MediPark allocation in the draft GMSF should be removed. Paragraph 1.14 of the draft SRF notes that the masterplan is complementary to the wider sphere of influence, including proposed allocations within the draft GMSF (now to be taken

forward as Places for Everyone), which are subject to a separate statutory approval process.

Paragraph 5.121 of the draft SRF notes that the site allocated under the "MediPark" expansion could form a future expansion plot for Wythenshawe Hospital Campus, subject to the separate statutory processes that would be required to confirm the allocation in the draft GMSF and remove the land from the Green Belt (now to be taken forward as Places for Everyone).

3.4.3.2. Creating a welcoming environment for all users, including accessible green space

Many respondents agreed that the Wythenshawe Hospital Campus would benefit from planned redesign to enable improved, and more functional public and green space, which could be used by the wider community. This would contribute towards creating an environment that supports better health outcomes.

One suggestion was for inclusion of green space that encouraged activity, such as a trim trail. Paragraph 5.113 of the draft SRF includes recognition that opportunities for outdoor sport and recreation to enable positive health outcomes will be considered in design of new development.

A number of respondents noted that improvement to the legibility of the site and buildings would be beneficial. This is recognised in the development principles outlined at Paragraphs 5.61 to 5.71 of the draft SRF and is a fundamental tenet of the masterplan.

Some respondents felt that not enough new green space is proposed within the masterplan, and that the existing Green Belt boundary should be retained. One comment noted that

green space should extend to living green views from hospital beds, which would be beneficial to recovery.

Figure 5.4 of the draft SRF identifies scope for new and improved green space and infrastructure within the masterplan; this is supported by the development principles set out at Paragraphs 5.72 to 5.74 and 5.75 to 5.78, relating to public space, ecology and biodiversity.

Paragraph 5.73 will be clarified to include reference to consideration of patient access to green space in the form of views out from buildings.

As noted above, the removal of land from the Green Belt is subject to separate statutory processes.

Two respondents provided suggestions about detailed design of spaces, for example the inclusion of sensory gardens, use of art and other measures to create an improved external and internal environment.

One respondent highlighted the need to consider access for all in detailed design, for example provision of Changing Places facilities, safe spaces, sign language displays and material finishes.

The team has noted these comments, which will be considered as the detailed design of new development is taken forward. Paragraph 5.119 includes a commitment that new development will be designed to be accessible to all.

3.4.3.3. Improving accessibility by foot, cycle and public transport

Many respondents noted that improved accessibility by sustainable modes was important; these would need to be

safe and convenient in order to encourage use by staff, patients, and visitors.

The creation of new and enhanced local connections, including pedestrian and cycle routes, is supported through the principles set out at Paragraphs 5.55 to 5.60 of the draft SRF. The team agrees that these routes need to be safe; additional wording will be inserted at Paragraph 5.55 to confirm that any new connections delivered through development in the masterplan would be designed to be safe and accessible.

A number of respondents commented that they considered existing public transport provision was reasonable but could be improved, for example through a closer Metrolink stop or more strategically scheduled bus services. One respondent suggested that the existing shuttle bus provision could be expanded. One respondent felt that public transport should be affordable and reliable.

The draft SRF supports these aspirations and there is a commitment to encourage use of sustainable transport through travel planning. Each individual future planning application in relation to the SRF area would be supported by a detailed Travel Plan, which aligns with the campus-wide Travel Plan and outlines ways in which staff and visitors would be encouraged to use sustainable transport choices. The wording of Paragraph 5.46 will be clarified to include reference to subsequent *monitoring of Travel Plans through an appropriately worded planning condition*. MFT will also review the potential for expanded shuttle bus services.

One respondent did not support expansion of the Metrolink and delivery of HS2 rail, or expansion of the Wythenshawe Hospital Campus to accommodate commercial uses, which the felt would be enabled by new transport infrastructure.

Proposals for Metrolink and HS2 are being brought forward by others and are subject to separate processes; the masterplan has been developed to leverage benefits that these improvements would deliver for connectivity, if they do come forward.

In general, respondents who commented on car parking recognised the need to retain car parking provision for both patients and staff, who might not be able to use public transport for example if they were travelling late at night or were infirm. One respondent raised issues regarding onstreet parking on local residential streets.

An outline car parking strategy to support the masterplan is set out at Paragraphs 5.44 to 5.54 of the draft SRF. This includes a commitment to provide appropriately designed car parking that is accessible by staff and patients, and to audit existing on-street parking arrangements in the vicinity of the site and identify requirements for new or amended resident parking zones as detailed planning applications are brought forward.

Some respondents noted that more investment is required to the highway network; a comment was provided that Dobbinett's Lane is too congested to accommodate further traffic associated with new development.

Paragraphs 5.37 to 5.38 summarise the outcome of initial transport work completed to support the draft SRF, which concludes that the existing highway to the north is functioning well but confirms that future planning applications would be supported by transport assessments considering the impact on existing junctions and roads and presenting any mitigation required.

Development coming forward in the wider sphere of influence, for example at Manchester Airport and Timperley

Wedge, may generate alternative access options to the south, which the masterplan is designed to accommodate.

3.4.3.4. Expanding the type of land use, including complementary development that creates employment, aimed at companies that support the work of the Hospital Trust, key worker housing and step-down care facilities

Many respondents commented that this was a positive element of the draft SRF, which would have benefits for local areas. Support was noted for the potential for step-down care and housing for staff, as well as complementary employment uses and companies that support the work of Wythenshawe Hospital. In other instances, there were differing views as to the expansion of land uses.

One respondent raised concern about the impact of expanded land uses on existing residents. Some respondents felt that the extent of potential residential use was too wide.

A number of respondents welcomed the potential for social housing and requested that this be focused on homes for Hospital staff, with appropriate measures to avoid a scenario where homes were lost if someone changed jobs.

The draft SRF makes clear that the Wythenshawe Hospital Campus is not a location for general residential use, but could accommodate some forms of residential use where these are linked to the Hospital function and it can be demonstrated that the investment benefit would flow back to the wider health and care system (Paragraphs 5.7 to 5.9).

The draft SRF presents some initial ideas about the nature of this residential offer, for example step-down care or homes for Hospital workers; Paragraph 5.7 will be clarified to confirm that further research and engagement would be carried out to refine these in advance of any planning application, including consideration of demand and need for particular forms of residential use.

The impacts arising from an increased residential population would be considered as part of the preparation of any future planning application and, where required, appropriate mitigation would be put in place, e.g. new or enhanced social infrastructure. The masterplan make provision for some of these uses.

Three respondents questioned the demand for additional commercial floorspace in this location; it was suggested that existing space, e.g. Roundthorn, Wythenshawe Forum, Oxford Road Corridor or Manchester Science Park would be better suited to accommodate these requirements.

As explained throughout the draft SRF, the Wythenshawe Hospital Campus and adjacent land is long established within planning and regeneration policy as an opportunity for transformational change. This is recognised in Core Strategy Policy EC12 University Hospital South Manchester Strategic Employment Location.

The strategy builds on the opportunities presented by the existing strengths of the Hospital and devolution of health and social care to improve health outcomes and deliver economic, social and environmental benefits for residents and the City Region.

Wythenshawe Hospital has a strong culture of clinical research in specialist areas, as well as centres of excellence (see Paragraphs 3.177 to 3.179), which provide a foundation

to support further growth in research innovation and implementation of new technologies with co-location of commercial research and development, training and education facilities.

Initial research carried out in support of the draft SRF identifies a market for life sciences space at Wythenshawe Hospital Campus (see Paragraph 3.188).

The Hospital would continue to be operated by MFT.

Some respondents disagreed with the proposal to include amenity uses, such as retail, within the mix and stated that the improvements should be contained to hospital function.

Others welcomed the introduction of amenity uses but requested that they have a focus on independent and community focused offerings.

The vision for Wythenshawe Hospital Campus is to create a sustainable health village, through a prevention-focused approach to health and social care and wider public service community-based model. Bringing facilities together and making connections between social and medical support will encourage better health outcomes.

This is explained at Paragraphs 3.172 to 3.176 of the draft SRF; the provision of ancillary amenity uses are intended to contribute towards these aims and not to create a retail or leisure destination.

Paragraph 5.4 of the draft SRF will be clarified to include reference to consider *the potential for independent and local companies as part of the mix of amenity facilities*.

3.4.3.5. Creating a sustainable health campus, which delivers on the Hospital Trust's commitment to be Net Zero Carbon by 2038

Respondents were on the whole supportive of this commitment, but in some instances queried whether it would be achievable and raised specific concerns about environmental matters.

Two respondents requested provision of electric vehicle charging points. A number of respondents referenced the need for improved sustainable transport modes to encourage people to minimise use of the car.

Paragraphs 5.51 to 5.52 of the draft SRF confirm a commitment to incorporating sustainable design elements, including electric vehicle charge points, into any car parking proposals. Sustainable travel is addressed at 3.4.3.3.

A number of respondents noted consideration has to be given to the climate impacts of new development, including building fabric and transport emissions.

Some respondents provided detailed suggestions regarding the use of BREEAM, renewables and energy efficiency measures for new buildings.

One respondent stated that no calculations were included within the draft SRF to demonstrate how the net zero carbon target would be achieved. It was suggested that 2038 may be too late to address the climate emergency.

These suggestions are noted by the team and will be used to inform the development of detailed designs as planning applications come forward.

Net Zero Carbon and Sustainability is a key development principle included within Section 5 of the draft SRF. As confirmed at Paragraph 5.84, MFT has also declared a climate change emergency, and it currently makes contribution in a range of areas through its Sustainable Development Management Plan. 2038 is the date identified by MCC for Manchester to become a Net Zero Carbon city.

Paragraphs 5.95 to 5.99 of the draft SRF set out the commitment to Net Zero Carbon, which will be supported by the preparation of Net Zero Carbon Framework and Action Plan providing a route-map for Net Zero Carbon that will be used to test development in future planning applications.

The approach will be holistic, considering construction, building design, operation and delivery of clinical services.

Some respondents queried the proposed allocation of land currently forming part of the Green Belt for development and raised concerns about building on the flood plain.

Paragraph 1.42 of the draft SRF confirms that where new development is proposed, it will be subject to future planning applications that will be determined through the statutory planning process including assessment against local and national planning policy, and other material considerations.

These would include considerations in respect of sustainability and flood risk, as relevant to the site. The masterplan also offers potential to incorporate blue and green infrastructure, and sustainable drainage systems, which could help to reduce flood risk (see Paragraph 5.77).

In terms of changes to the existing Green Belt boundaries, as stated at Paragraph 1.12, until such time (and only if) Places for Everyone (as the replacement to the draft 2020 GMSF)

has been adopted it is not envisaged that any proposals will come forward for this area of land. If they did, there would be a requirement to consider them in line with adopted Development Plan and national policy.

The main focus of the masterplan is on making better use of brownfield, previously developed land including existing surface car parks.

3.4.3.6. Are there any other considerations that should be taken into account in relation to maximising benefits to local communities?

Respondents made suggestions about how benefits for the local communities could be further maximised.

One respondent requested provision of new trees; this will form part of the future development.

One respondent suggested the provision of workshops and seminars for local residents on key topics to make them feel active participants in their own healthcare. This comment has been shared with relevant contacts at MFT.

A number of respondents noted the importance of social value and creation of local jobs; one local business highlighted that it would like to be involved in the delivery of new buildings. The masterplan has been designed to support the creation of a range of job opportunities, including within the foundational economy.

It is estimated that the new commercial floorspace could create between 1,500 and 3,000 jobs and a commitment has been made to exploring potential for better linkages

regarding apprenticeships; this will be referenced at Paragraph 5.12 of the draft SRF.

Paragraph 5.130 will be clarified to include confirmation that commitments to local labour will be *captured through planning obligations as detailed planning applications are brought forward*.

Paragraphs 5.14 to 5.15 highlight the opportunities to create wider social value, including through review of supply chain management and procurement.

Some respondents reiterated concerns about congestion and safety on roads, which have been addressed at 3.4.3.3.

This extended in one comment to concern about the impact of construction traffic on residents.

Paragraph 5.116 confirms that careful consideration will be given to management of potential impacts during the construction phase, including through Construction Management Plans submitted with each future planning application, to set out measures to manage noise, air quality, transport and other impacts.

The wording will be updated to include confirmation that this will include consideration of the appropriate routeing of construction vehicles. Routes will be kept under review with key stakeholders during masterplan delivery, reflecting any changes in the wider strategic highway network that might result in new or improved construction traffic routes becoming available. This will be captured through appropriately worded planning conditions.

In addition, it will include reference to the need for *clear and* consistent messaging for the local community and users of

Wythenshawe Hospital to explain continuity of services and revised access arrangements during construction activity.

One respondent flagged a desire to see the return of hospital links to the local community broadcaster, Wythenshawe FM, including for recruitment and advertisement of events and activities. This comment has been shared with relevant contacts at MFT.

Some respondents raised issues regarding environmental impacts and removal of land from the Green Belt. These comments are addressed at 3.4.3.5.

One respondent questioned when consultation would take place with Trafford residents. The approach to consultation has been fully described at Section 2 of this report.

3.4.4. Other Comments

The Long Form Questionnaire also included two free text boxes for respondents to explain a) any concerns and b) any other comments about the draft SRF.

The following new areas were raised, in addition to the comments that have already been addressed earlier in this Section:

- Number of multi-storey car parks / spaces for staff it is likely that the first phase of development will include a new multi-storey car park located close to the Acute block. Demand for additional multi-storey car parking will be kept under review as the masterplan is implemented; with the implementation of sustainable travel planning, it is anticipated that travel patterns may change in the future.
- Ensure that key teams are accounted for in the design and space allocation; expand meeting facilities and

retention of education facilities to support teaching – this is noted, and the team is committed to on-going consultation with individual departments as the detailed design of buildings is developed.

- Fly-tipping and pollution to back lanes around
 Manchester Airport the team is not aware of any
 incidents of fly-tipping generated by Wythenshawe
 Hospital. Transport and air quality assessment would be
 submitted with future planning application to consider
 the impact of any additional traffic and propose
 mitigation as relevant.
- The need for further research about the impact of 5G the draft SRF includes development principles that support the inclusion of new technologies in future buildings. New technologies would only be used if they are safe and appropriate.
- Tenure / future ownership of the land and buildings the comments are noted but are not considered relevant to the draft SRF, a spatial planning document.
- Unevidenced assertions regarding the benefits of health care devolution – the draft SRF reflects the fact that Greater Manchester has devolved authority for health and social care spending decisions in the City Region.
- Promotion of Wythenshawe Hospital Campus as being connected to Manchester Airport and opportunities for world class research facilities without the corresponding road infrastructure the draft SRF sets out development principles for the delivery of a sustainable health village, with Wythenshawe Hospital at its heart; development will be phased to take account of the evolving state of transport infrastructure.
- Request for research into chronic utis and bladder conditions and more trials for research – this comment has been shared with the relevant contacts at MFT.

3.5. Transport for Greater Manchester, MCC and Trafford Highways and Highways England

In preparing the draft SRF, early dialogue was undertaken with Transport for Greater Manchester, MCC and Trafford Highways and Highways England by Curtins, the transport consultant advising the team, including a series of scoping meetings in late 2019 and early 2020.

The outcome of these meetings informed the development of the masterplan and draft SRF, including through an understanding of the proposals and timing of improvements to the wider transport network.

Engagement with these consultees will be on-going throughout the development and delivery of future planning applications at Wythenshawe Hospital Campus.

4. Amendments to the draft SRF

Table 4.1 sets out the proposed amendments to the draft SRF text and diagrams.

Table 4.1: Proposed Amendments to the draft SRF

Document Section	Proposed Amendment	
Executive Summary	Paragraph 1 – References to the draft 2020 GMSF policy and preparation of the joint Development Plan Document, to be	
	known as "Places for Everyone".	
Introduction	Paragraphs 1.6, 1.11 and 1.12 – References to draft 2020 GMSF Policy and preparation of the joint Development Plan Document, to be known as "Places for Everyone".	
	Paragraph 1.14 – References to 2020 Timperley Wedge draft 2020 GMSF Policy and preparation of the joint Development Plan Document, to be known as "Places for Everyone"; clarification that only Davenport Green is allocated as part of the Timperley Wedge proposal in Trafford MBC's Core Strategy.	

Document Section	Proposed Amendment	
	Paragraphs 1.40 and 1.41 – References to	
	Consultation updated to reflect	
	completed activity.	
Planning Policy	Paragraph 2.47 - References to draft	
Context	2020 GMSF in the context of the Trafford	
	Core Strategy Davenport Green	
	allocation.	
	Paragraphs 2.49 to 2.57 –References to	
	the Masterplan for Timperley Wedge	
	Allocation (September 2020) inserted.	
Strategic Context	Paragraph 3.40 – References to the draft	
	2020 GMSF policy and preparation of the	
	joint Development Plan Document, to be	
	known as "Places for Everyone".	
	Paragraph 3.126 – References to SMART	
	Motorway upgrade updated.	
	Paragraph 3.130 – References to draft	
	GMSF removed.	
	Paragraphs 3.134 to 3.137 – New	
	reference inserted to the proposed new	

Document Section	Proposed Amendment	
	cycling and walking routes following confirmation of Active Travel Funding.	
	Page 3.143 and 3.144 – references to adoption of the Manchester Climate Change Framework in February 2020.	
	Paragraphs 3.158 to 3.175 – References to 2020 draft GMSF to be updated; acknowledged withdrawal of Stockport	
	MBC and decision to take forward joint Development Plan Document, which is expected to retain Trafford MBC's Timperley Wedge proposals.	
	Paragraphs 3.177 and 3.178 – References to GM Transport Strategy 2040 updated to reflect latest revision of the document published in January 2021.	
Vision for Wythenshawe	No changes	
Hospital Campus		
Overarching Development Principles	Paragraph 5.2 will be further clarified, to confirm that the masterplan proposal is based on maintenance of existing service and the existing number of bed spaces, with more flexible space enabling MFT to better respond to situations like the current Covid-19 pandemic, in the future.	
	Paragraph 5.4 will include reference to consider the potential for independent	

Document Section	Proposed Amendment	
	and local companies as part of the mix of amenity facilities.	
	Paragraph 5.7 will note further research and engagement would be carried out to refine the residential offer in advance of any planning application, including consideration of demand and need. Paragraph 5.12 will confirm that new commercial floorspace could create between 1,500 and 3,000 jobs and a commitment has been made to exploring potential for better linkages regarding apprenticeships.	
	Paragraph 5.30 to acknowledge there would be a requirement for stakeholder consultation prior to any amendment to the routeing of the Metrolink Western Loop Extension being taken forward.	
	Paragraph 5.33 – Reference consideration of potential to expand the existing MFT shuttle bus service.	
	Paragraph 5.34 – Remove referenced to draft GMSF.	
	Paragraph 5.40 – Reference to SMART Motorway works updated.	
	Paragraph 5.41 to be updated to reflect that on-going collaborative work is likely to be required with a range of	

Document Section	Proposed Amendment		Document Section	Proposed Amendment
	stakeholders as part of any future			are granted. In addition, it will include
	changes to the strategic road network.			reference to the need for clear and
				consistent messaging for the local
	Paragraph 5.46 will be clarified to include			community and users of Wythenshawe
	reference to monitoring of Travel Plans			Hospital to explain continuity of services
	through an appropriately worded			and revised access arrangements during
	planning condition.	4		construction activity.
	Paragraph 5.73 will be clarified to include	Į		Paragraph 5.121 – References to joint
	reference to consideration of patient	4		DPD in place of draft GMSF.
	access to green space in the form of			
	views out from buildings.			Paragraph 5.128 – References to joint
				DPD in place of draft GMSF.
	Paragraph 5.58 – Reference to Active			
	Travel Fund commitment and			Paragraph 5.130 will note that
	opportunity to further improve local			commitments to local labour will be
	connections.			captured through planning obligations as
	Paragraph 5.92 – References to			part of future planning applications.
	Manchester's climate change policy			Paragraphs 5.145 to 5.147 – References
	updated.	7		to consultation on the draft SRF updated.
	apadica.			to consultation on the draft six aparted.
	Paragraph 5.116 will be updated to			Paragraphs 5.153 to 5.156 – References
	include confirmation that consideration			updated to reflect status of actions and
	will be given to the appropriate routeing			decision to progress joint DPD "Places for
	of construction vehicles. Routes will be			Everyone."
	kept under review with key stakeholders			
	during masterplan delivery, reflecting		Diagrams, Sketches	Figure 3.11 updated to reflect draft 2020
	any changes in the wider strategic		and Precedent	GMSF Green Belt revisions.
	highway network that might result in		Images	5' 2 12
	new or improved construction traffic			Figure 3.12 updated to reflect draft 2020
	routes becoming available. This will be			GMSF Policy Allocations for MediPark
	captured through appropriately worded			and Timperley Wedge.
	planning conditions as part of			
	permissions for future development that			

Document Section	Proposed Amendment
	Figure 3.16 updated to reflect draft 2020
	GMSF Policy for MediPark and Timperley
	Wedge, Davenport Green employment
	allocation and proposed Green Belt
	revisions as shown in the Timperley
	Wedge Masterplan September 2020.
	Correction to labelling of Davenport
	Green.
	Figure 5.7 updated to reflect draft 2020
	GMSF Policy for MediPark and Timperley
	Wedge, Davenport Green employment
	allocation and proposed Green Belt
	revisions as shown in the Timperley
	Wedge Masterplan September 2020.
	Correction to labelling of Davenport
	Green.

Appendix 1 Stakeholder List

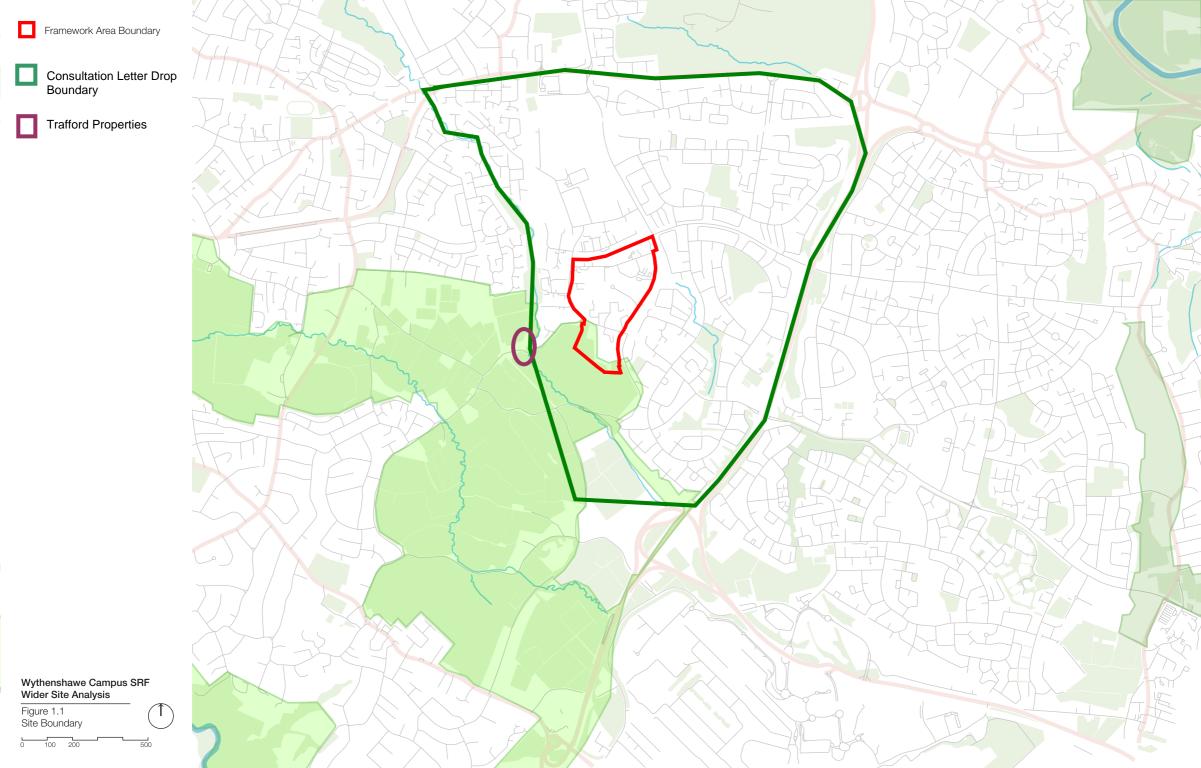


Stakeholder Name	Stakeholder Type	Method of Communication
Ward Councillors (Baguley, Brooklands, Northenden, Sharston and Woodhouse Park)	Wythenshawe Ward Councillor	Briefing Meetings
Mike Kane MP	Member of Parliament for Wythenshawe and Sale East	Briefing Meeting
Bluemantle (Roundthorn Industrial Estate)	Landowner	Briefing Meetings and Emails
Manchester Airport Group	Landowner	Briefing Meetings and Emails
Royal London Asset Management	Landowner	Briefing Meeting and Emails
Trafford Metropolitan Borough Council	Landowner / Neighbouring Local Authority	Briefing Meeting and Emails
Wythenshawe Housing Group	Landowner	Briefing Meetings and Emails
Wythenshawe Hospital Staff	Staff	Briefing Meetings, Internal Communications,

Stakeholder Name	Stakeholder Type	Method of Communication
		On-line Information
Local Residents and Businesses	Public	Leaflet Drop, On- line Information and Briefing Meetings
Transport for Greater Manchester	Statutory Consultee	Briefing Meeting
MCC Highways	Statutory Consultee	Briefing Meeting
Highways England	Strategic Highways	Briefing Meeting
HS2 Limited	Strategic Transport	Briefing Meeting

Appendix 2 Consultation Zone





Deloitte.

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