PARISH OF ST HELIER

AGENDA

ROADS COMMITTEE MEETING

Wednesday 13th May 2026 at 9.30 am

Meeting held in the **ASSEMBLY ROOM**

'A' AGENDA (OPEN TO THE PUBLIC)

Item	
A1.	Apologies.
A2.	Declarations of interest.
A3.	To approve the minutes of the meeting held on 15 April 2026 ('A' Agenda items).
A4.	Matters arising.
A5.	**For decision:** Westmount Road changes – NHF presentation
A6.	**For information:** 2025/26 Roads Programme update
A7.	**For decision:** To consider recent Planning applications.
A8.	Agreed decisions.
A9.	Lodging items for forthcoming Roads Committee meetings.

Dates of 2026 meetings:

~~Wednesday 14 January 2026~~
~~Wednesday 11 March 2026~~
~~Wednesday 13 May 2026~~
*Friday 10 July 2026: Visite du Branchage
Wednesday 12 August 2026
*Friday 18 September 2026: Visite du Branchage et Chemin
Wednesday 18 November 2026

~~Wednesday 11 February 2026~~
~~Wednesday 15 April 2026~~
Wednesday 17 June 2026
Wednesday 22 July 2026
Wednesday 16 September 2026
Wednesday 14 October 2026
Wednesday 16 December 2026

Roads Committee date: 13 May 2026	**Road reference & title of report:** Westmount Road proposals - NHFP
Address: Acute Hospital at Overdale Westmount Road	**Requested by:** NHF Programme Delivery Lead
Location map: 	**Photograph/street view:** 

Brief introduction/summary:

The Government of Jersey NHFP team are here today to present to the Roads Committee proposals for Westmount Road

- They will summarise the key highway and operational changes proposed for Westmount Road within the Westmount Road Mitigation Strategy and Implementation Plan, and the accompanying general arrangement drawing.

- This is to support the Roads Committee in considering whether to approve the proposals so that Planning Condition 26 (Westmount Road Mitigation) can be discharged.

Please note that these documents have been agreed with I&E Highways and now require POSH Roads Committee approval as soon as possible.

The long-term plan is that the Government of Jersey will take over the ownership and administration of Westmount Road.

Details of the request:

1. Background and Context
    - The report describes Westmount Road as a constrained corridor with narrow carriageway widths (typically 4.2 m to 5.6 m), steep gradients (1:7 to 1:18), and a hairpin bend with limited visibility, meaning larger vehicles cannot easily pass at several points.

    - The key forecast risk is not general car traffic but increased movements by larger vehicles (ambulances, buses, and servicing vehicles) linked to the Overdale Acute Hospital, which could cause conflicts, pinch points, and unreliable journey times without mitigation.

- The modelling position presented in the report is that overall car traffic is expected to remain broadly similar due to travel demand management and parking strategy measures; the critical issue is large-vehicle interaction on the constrained link.

2. Summary of what is being proposed (headline outcomes)
   - Remove unmanaged two-way conflicts at the most constrained sections (particularly the hairpin and the narrow retained-wall sections).
   - Improve predictability and reliability of journey times (including for emergency access), accepting that short, controlled delays may occur when controls are active.
   - Provide continuous pedestrian provision through a combination of physical and "virtual" footway solutions, supported by passing places.

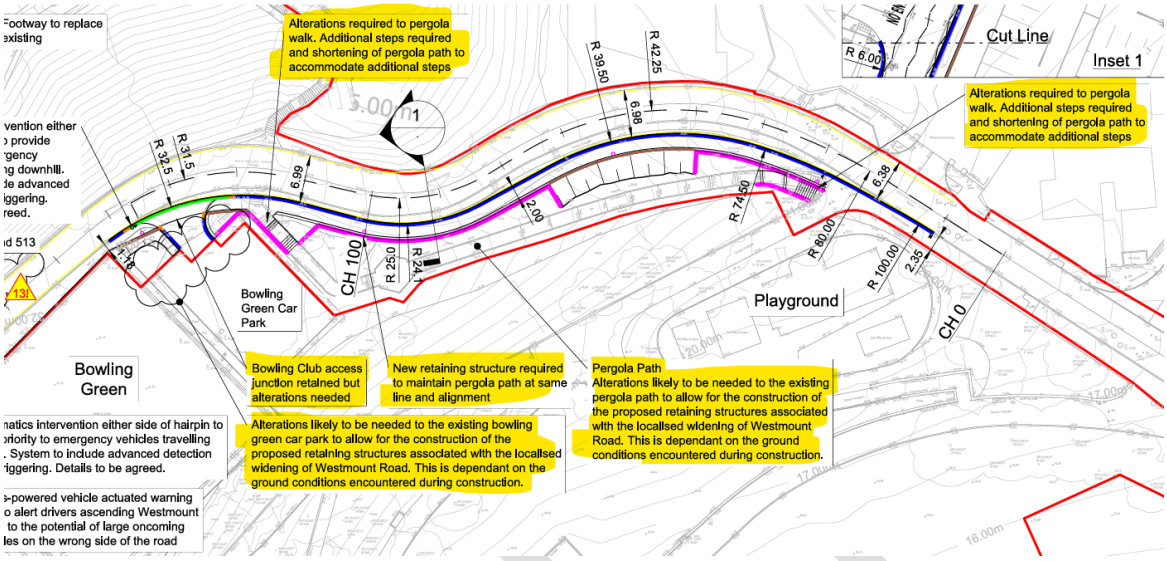
3. Proposed highway changes on Westmount Road (physical works)

   3.1 Hairpin bend upgrades
   - Localised widening of the hairpin bend, including provision of a passing bay to allow safer passing and reduce the likelihood of blockage.
   - Supporting safety features identified in the mitigation strategy include high-friction surfacing, enhanced edge protection (barrier/kerb upstand), chevron boards, and lane discipline markers.
   - Vegetation clearance is proposed to be maintained to maximise sight lines in the hairpin area.
   - The drawing notes a commemorative plaque at the hairpin (to be accommodated/managed as part of the works).

   3.2 Constrained section control: "virtual footway" with passing places (priority arrangement)
   - A 75-metre section of virtual footway with passing places is proposed to create continuous pedestrian provision and to remove unplanned two-way negotiation at a key pinch point.
   - The general arrangement describes a priority "give-take" arrangement where ascending vehicles have priority and vehicles descending Westmount Road give way / pull in if required.
   - Enhanced controls in the strategy include directional signing (with supplementary plates), upgraded lighting, delineators/flexible verge posts, and queue-length monitoring to identify abnormal build-ups.

   3.3 Footway and streetscape adjustments (where practicable)
   - The drawing indicates local footway widening to 1.8 m in at least one location, with an existing footway retained and integrated in places.
   - The strategy also references "2 m footway improvements where feasible" alongside lighting and edge protection at critical points.
   - The drawing references changes associated with the pergola path (additional steps, shortening/adjustments) and alterations likely required to the bowling club access, subject to

detailed design and ground conditionsproposals. These changes will be subject to PSB and Parish Assembly approval – see highlighted areas that impact Parish Land.



- The drawing states that changes to highway design/interventions are to be mutually agreed with GoJ Infrastructure & Environment during detailed design.

4. Proposed operational and technological measures (non-civil interventions)

4.1 Vehicle-Activated Warning System (VAWS)

- Installation of a vehicle-activated warning system to manage driver behaviour and prevent conflicts at the hairpin, described as being triggered by ambulances and buses to advise oncoming drivers to wait / slow in advance.

- The enhanced specification described includes dual-mode detection (GNSS on-board units where required plus radar verification), automatic failover to a "caution" message if connectivity is disrupted, adaptive dwell times, and automatic logging of activations for reporting.

- The drawing refers to mains-powered vehicle actuated warning signage to alert drivers to the potential of large oncoming vehicles (with notes referencing detection/triggering and telematics intervention either side of the hairpin).

4.2 Bus management

- Bus headway management is proposed to avoid two buses meeting on the route, including a protocol preventing dispatch within a 5-minute window of another service entering Westmount Road and use of telematics to confirm spacing.

4.3 Servicing and deliveries management

- Servicing controls are proposed to avoid peak conflicts, including consolidation of deliveries (stated as 10:00–14:30 unless essential) and restricting servicing vehicle size to 7.5t box vans where feasible.

- A "Safe Access and Routing Protocol" (SARP) is referenced for servicing contractors and a digital booking system for larger vehicles to avoid unscheduled arrivals.

4.4 Parking and travel demand measures

- The report relies on a parking strategy and travel planning measures designed to manage staff and visitor car use so that car flows on Westmount Road remain relatively stable compared with existing conditions.

4.5 Ambulance routing coordination

- Coordinated ambulance routing is proposed, including primary outbound routing via Elizabeth Place Ambulance Station to reduce two-way emergency flows on Westmount Road and enable routing decisions based on shortest journey time.

5. Anticipated effects (as described in the report)
    - Residual impacts: short dwell periods at the 75 m virtual footway section when traffic is held; occasional delays when VAWS is triggered; some general traffic slowing during peak ambulance or bus movements.
    - Benefits: elimination/reduction of conflict at constrained points; improved predictability of journey times (notably for blue-light access); reduced risk of corridor blockage through the passing bay and managed flow at the priority section.
    - Overall conclusion in the report: Westmount Road can safely and reliably accommodate the hospital's forecast traffic only with the proposed physical and operational mitigation, supported by monitoring and governance.
6. Governance, monitoring and reporting (what the Committee should expect)
    - A Westmount Road Steering Group is proposed, with representation including GoJ Infrastructure & Environment, the Parish of St Helier Roads Committee (where applicable), emergency services, bus operator, hospital FM, NHFP, contractors, and the design team as reporting advisor.
    - Proposed meeting cadence: monthly pre-opening, quarterly post-opening (years 1–3).
    - Monitoring and reporting: monitoring at 3, 6, and 12 months post-opening is stated, with defined KPIs (including VAWS activations/dwell time, bus headway variance target < ±2 minutes, queue length targets, servicing compliance) and escalation thresholds (for example, VAWS availability < 98% in any rolling quarter; queue length > 75 m on two or more days/month; servicing breaches > 2%).
7. Risk considerations (summary for members)
    - The report's risk assessment identifies key risks and principal controls, including:
        - Large-vehicle conflict at the hairpin (controls: widening, VAWS, bus spacing).
        - VAWS reliability and driver compliance (controls: dual detection, UPS, testing/soak testing, human factors checks, training).
        - Queue growth at the priority/virtual footway section (controls: priority arrangement, visibility checks, lighting, queue monitoring, contingency measures if thresholds exceeded).
        - Data/privacy compliance where CCTV or logging is used (controls: DPIA-aligned retention/access and privacy-compliant use).

8. Decision points for Roads Committee (
    - Note that the attached documents have been presented as required to discharge Planning Condition 26 and are stated to have been agreed with GoJ Infrastructure & Environment Highways, now requiring the Parish Roads Committee's approval.

    - Approve the proposed Westmount Road mitigation strategy and the proposed highway general arrangement in principle, subject to:
        - Final detailed design being mutually agreed with GoJ Infrastructure & Environment and the Parish as Highway Authority for the relevant sections.
        - Completion of the appropriate Road Safety Audit stages and close-out prior to go-live, as referenced in the implementation and assurance approach.
        - A clear maintenance and operational responsibility position for VAWS/road markings/signage and the monitoring regime, aligned with the governance framework set out in the report.

    - Alterations to Parish land will require approval from the Parish Strategy and Policy Board and may require Parish Assembly approval. Further details are to be provided by NHFP

9. Programme / next steps
    - Gary McGuire has indicated a request to present the proposals to Roads Committee on 13 May, with an intention to secure formal approval at that meeting or shortly thereafter.

Appendix 1: **Mitigation Strategy and Implementation Plan**

ARUP

Reference: N/A

| 28April 2026

Westmount Road
Mitigation Strategy and Implementation Plan

Job number

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1. Summary of the Report

This report outlines the developed and developing mitigation strategy and a proposed implementation plan to be taken forward for Westmount Road. The interventions remove unmanaged two-way conflicts, stabilise journey times, and significantly reduce the risk of vehicle pinch points. While minor residual delays are expected when controls are active, the benefits, predictable emergency access, reduced conflicts, and resilient operation, outweigh them. Subject to the delivery of the proposed highway mitigations, with monitoring and governance in place, Westmount Road can safely and reliably accommodate the hospital's forecast.

Although an existing route used by islanders, Westmount Road is a typical Jersey constrained corridor, characterised by some narrow carriageway width, steep gradients, and a hairpin bend with limited visibility. These geometric limitations mean that two larger vehicles are unable to pass without difficulty at several points, particularly at the hairpin and along retained-wall sections. As a result, even small increases in large-vehicle movements, rather than general car traffic, can lead to disproportionate delays, conflicts, or blockages. Gradients further exacerbate delays by reducing acceleration, increasing braking distances, and causing delay propagation, while sub-standard footways raise additional pedestrian safety considerations as footfall increases.

Traffic modelling shows that overall car traffic will remain broadly similar to current conditions due to travel demand management, meaning junction capacity is not the primary issue. Instead, the key risk arises from increased movements by ambulances, buses, and servicing vehicles associated with the Overdale Acute Hospital. Without intervention, encounters between large vehicles at the hairpin and narrow sections could cause intermittent delays. This could affect journey time reliability including for emergency vehicles, and – at certain times – restrict movement along the corridor for other vehicles.

The proposed package of physical, operational, and technological mitigations directly addresses these risks. Measures include:

- Slight widening of the hairpin bend, including a passing bay to allow for safer passing of vehicles
- A 75 metre virtual footway with passing places to ensure that there is continuous provision for pedestrians along Westmount Road
- A Vehicle-Activated Warning System (VAWS) which will inform oncoming drivers to slow in advance of the hairpin bend
- Bus headway management to avoid two buses meeting each other on the route
  Control and planning of servicing to the hospital
- A parking strategy that is designed to manage staff and visitor car use
- Coordinated ambulance routing which will allow the ambulance to make routing decisions based on the shortest journey time

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2. Context

Why Westmount Road Is Highly Sensitive to Traffic Change

Not untypical for Jersey, Westmount Road – as currently configured - is a narrow, steep, bend-dominated corridor with several geometric constraints:

- The carriageway width varies between 4.2 m and 5.6 m, which means it is not possible for two large vehicles (ambulances, buses, 7.5t vans) to pass at multiple locations.
- The vertical gradient ranges from 1:7 to 1:18, increasing approach speed variability and braking distance requirements.
- The hairpin bend has limited intervisibility and requires large-vehicle overhang.

Because of these constraints, even small increases in large-vehicle movements can result in disproportionate delays or vehicle pinch points.

Development-Driven Traffic Pressures

Increased Ambulance and Clinical Logistics Movement

- The Overdale Acute Hospital will support a growing inpatient and limited outpatient (Renal services) population. Inpatient appointments are projected to grow 21.9% by 2036, adding to blue-light and non-blue-light ambulance movements.
- This does not mean large traffic volumes, but a small increase in additional ambulance trips per hour on a constrained corridor raises conflict potential unless interventions are made.

Bus Service Uplift

The Acute Hospital is supported by enhanced public transport. To achieve this:

- The corridor must reliably accommodate frequent buses, each of which currently risks meeting oncoming traffic at bends or the hairpin.
- Without intervention, modelling shows conflicts between buses and other larger vehicles because of the current geometry.

Servicing and Deliveries

Analysis in the mitigation strategy and Transport Assessment identifies:

- Clinical and FM operations require regular deliveries and waste collection.
- Without controls, arrival of >7.5t vehicles or deliveries during peak periods can cause road blockages at known pinch-points.

Staff and Visitor Trips

The Transport Assessment demonstrates:

- The hospital's parking strategy is designed to manage staff and visitor car use. In accordance with Planning policy, the Acute Hospital design incorporates sustainable transport measures, including a dedicated active travel route through La Val Andre and West Park, providing staff and visitors with a safe and viable alternative to private vehicle use.
- .
- Thes measures will help to keep car flows on Westmount Road relatively stable when compared to existing conditions.
- Overall car traffic remains manageable, but large-vehicle reliability is the real challenge.

Impacts Along the Corridor

Hairpin Bend – Highest-Risk Conflict Point

- The bend requires wheel-tracking across the centre line for buses, ambulances, and delivery vehicles.
- As currently configured, two large vehicles cannot pass simultaneously on this geometry.
- Without mitigation, modelling and vehicle tracking show conflicts even with widening

Traffic Impact Summary

- High probability of delay when two large vehicles arrive within 10–15 seconds of each other.
- Potential for corridor blockage if a vehicle stalls on the incline at the apex.

Narrow Constrained Section (Hillcrest/Castle View to Ocean Apartments)

- Carriageway width is constrained by retaining walls.
- Two-way operation creates regular opposing vehicle conflicts, especially with increased ambulance or bus flows.

Traffic Impact Summary

- Without intervention, peak-hour queues are likely to form due to negotiation delays at this pinch-point.
- As currently configured, the constrained section is not suitable for unmanaged two-way operation with the forecast hospital trip profile.

Gradient-Driven Delay Effects

- Gradients reduce vehicle acceleration and increase braking distance.
- Slow-moving vehicles climbing the hill create speed differential shocks, amplifying delay propagation.

Traffic Impact Summary

- Even small delays at bends propagate downhill or uphill depending on direction.
- Vehicle recovery is slower, especially for ambulances carrying patients.

Pedestrian Interaction Risks

- While not primarily a traffic flow issue, the corridor also contains:
- Narrow footways typical to Jersey that are currently less than 2 m in parts.
- Increased hospital footfall to the Acute Hospital will see higher pedestrian movement, raising friction with vehicle movements. (This risk is mitigated with the Active Travel Route).

3. Traffic Impact – What the Forecasts Show

Summary of Impact

The Transport Assessment and Environmental Impact Statement identify and assess the impact of the development proposals on the following vehicular user groups:

Car Traffic

- Car flows remain broadly similar to the existing hospital baseline due to parking strategy and redistribution.
- Therefore, car-borne traffic does not trigger junction capacity issues; the link constraint dominates.

Large Vehicles (The Critical Determinant)

Without the proposed mitigations, the largest impacts would be associated with:

Ambulances

- Blue-light trips require uninterrupted flow.
- Without measures, conflict risk increases at the hairpin and constricted section.

Buses

- Bus frequency uplift means encounters are more likely unless movements are spaced.

7.5t Servicing Vehicles

- Worst case and without restrictions, a single large servicing vehicle could block the corridor.

Overall Network Effects

Without any mitigation, the modelling indicates:

- Journey times increase when large vehicles meet at the hairpin or priority section.
- Unpredictable delays may occur, with implications for emergency access.

With mitigation (priority control + VAWS + spacing):

- Journey times become predictable and stable.
- This predictability is a core Key Performance Indicator (KPI) of the mitigation strategy.

How the Proposed Scheme Mitigates Identified Traffic Impacts

Physical Engineering Measures Reduce Large-Vehicle Conflict

- Hairpin widening, passing bay, and improved delineation reduce geometric conflict.

Priority Give-Way/Section of Virtual Footway with Passing Places Removing Two-Way Negotiation

- 75 m section forces single-direction flow, removing unplanned give-and-take conflict.

VAWS Manages Large-Vehicle Interactions

- Ambulance and bus-triggered VAWS instruct drivers to wait, avoiding direct conflict.

Bus Headway Management

- Timetable spacing prevents two buses arriving at the bend at once.

Servicing Controls Flatten Peaks

- Delivery consolidation and vehicle size limits avoid corridor blockages.

Staff Parking Demand Reduction

- Substantial reduction and relocation of staff parking decreases car flow.

Final Assessment: Net Traffic Impact with Scheme in Place

Negative Effects (Residual)

- Short dwell periods at the 75m section of virtual footway with passing places when traffic is held.
- Occasional delays when VAWS is triggered.
- Some slowing of general traffic during peak ambulance or bus movements.

Positive Effects (Outweighing Residuals)

- Conflict elimination at bends and hairpin.
- Predictable journey times, essential for blue-light vehicles.
- Reduced risk of corridor blockage with the addition of a passing bay.
- Controlled and moderated flow through the constrained 75 m section.
- Lower staff and visitor car demand, protecting overall flow.

Overall Conclusion

- Westmount Road can safely and reliably accommodate Overdale Acute Hospital's forecast traffic—*only with the proposed physical and operational mitigation in place.*
- The key risks (large-vehicle conflict, queue propagation, and emergency access delay) are fully addressed by the combined package of engineering works, VAWS technology, operational controls and Travel Plan demand reduction. The residual impact is considered acceptable, predictable, and manageable, as evidenced in the Transport Assessment. The corridor would operate with:
    - High reliability for blue-light access
    - Significantly fewer conflict points
    - Predictable journey times
    - Low residual risk of blockage
- Without mitigation, the road becomes unreliable and delay-prone. With mitigation, the system functions with safe, controlled, and resilient operation.

The proposed scheme enables Westmount Road to accommodate Overdale Acute Hospital's traffic safely and reliably.

The traffic impact is therefore considered **acceptable and effectively mitigated**, subject to the monitoring programme at 3, 6 and 12 months post-opening.

4. Mitigation Strategy

Summary

The Mitigation Strategy will be made up of several mitigations as outlined below.

Vehicle-Activated Warning System (VAWS)

Installation of ambulance and bus-triggered warning signs at the hairpin bend to prevent conflicts. Signs advise drivers to wait, ensuring large vehicles traverse the bend unopposed.

Localised Road Improvements

Hairpin widening, a 75m section of virtual footway with passing places, and minor alignment adjustments reduce conflict areas and improve visibility.

Travel Planning & Staff Parking Management

Reduced staff parking supply and redistribution of staff trips to public car parks to reduce private car demand on Westmount Road.

Servicing Management (FM Strategy)

Consolidated deliveries, avoidance of peak-period servicing, and restriction of servicing vehicle size to 7.5t box vans where feasible.

Bus Management

Timetabling to achieve 15-minute frequencies with spacing to prevent bus–bus encounters; bus drivers instructed to follow VAWS.

Ambulance Service Coordination

Primary outbound blue-light routing via Elizabeth Place Ambulance Station to reduce two-way emergency flows on Westmount Road.

Monitoring & Review

Post-opening monitoring at 3, 6, and 12 months including reviewing VAWS activations, traffic counts, and incident data.

Strategy Detail

This Mitigation Strategy sets out a comprehensive suite of infrastructure, operational, and governance measures to ensure Westmount Road safely accommodates forecast movements associated with Overdale Acute Hospital. It adopts a risk-based, as low as reasonably possible (ALARP) aligned, and data-led approach consistent with best practice and emergency access guidance.

Overarching Principles

All mitigation measures will be delivered in accordance with the following principles:

Safety First (Vision Zero-aligned)

- Prioritise elimination of high-risk conflicts at constrained points (hairpin, give-way section).
- Apply ALARP methodology to identify residual risks and define mitigation triggers.

Predictability & Driver Comprehension

- Use clear, consistent messaging to avoid ambiguity for all road users.
- Ensure signage, line markings, and technology are compliant with the Traffic Signs Manual and industry best practice.

Operational Reliability

- Ensure emergency vehicles (ambulance blue-light movements) have consistent, unobstructed access.
- Ensure bus operations maintain headway reliability and avoid predictable pinch-point conflicts.

Evidence-Based Monitoring

- Define KPIs, data collection procedures, and transparent reporting cycles.
- Establish clear thresholds requiring further intervention.

Mitigation Measures

The following mitigation measures will be considered and introduced where practicable and appropriate.

Physical Measures

Hairpin Bend Upgrade & Conflict Avoidance - Additional Best-Practice Features:

- High-friction surfacing on approach and apex to reduce loss-of-control risk.
- Enhanced edge protection (roadside barrier / kerb upstand) to protect against vehicle overhang.
- Chevron boards with retroreflective high-visibility panels.
- Road geometry markers to reinforce lane discipline.

Vehicle-Activated Warning System (VAWS) – Enhanced Specification

The VAWS system will incorporate:

- Dual-mode detection: Global Navigation Satellite System (GNSS) On Board units (OBU) on ambulances/buses if deemed necessary and above-ground radar verification.
- Redundancy failover: Automatic default to "caution" message if connectivity is disrupted.
- Adaptive dwell times: Based on real-world measured clearance times.
- Continuous remote monitoring by the network operator.
- Automatic logging of activations for reporting.

Priority Give-Way Section (Virtual footway with passing places) – Enhanced Controls

- Install directional signs with supplementary plates.
- Upgrade ambient lighting to improve nighttime visibility.
- Install centreline delineators or flexible verge posts to guide drivers through narrow sections.
- Provide dynamic queue-length monitoring to identify abnormal build-ups.

Operational Measures

Bus Operations (Improved Reliability Mechanisms)

- Introduce a Bus Movement Protocol preventing dispatch within a 5-minute window of another service entering Westmount Road.
- Install telematics so operators can remotely confirm spacing in real time.
- Provide on-board driver briefings and e-learning modules regarding mitigation measures and road constraints.

Servicing Strategy

- Mandatory consolidation of deliveries during 10:00–14:30 window unless essential (clinical, refrigerated medical supplies).
- All Overdale-related servicing contractors must be enrolled in a "Safe Access and Routing Protocol" (SARP).
- Implement a digital booking system for larger vehicles to avoid unscheduled arrivals.

Ambulance Operations – Enhanced Coordination

- Real-time coordination between Ambulance Control and VAWS system.
- Dispatch interface that flags route conflicts when two vehicles approach from opposite ends.
- Blue-light familiarisation training for drivers on hairpin behaviour and signalling interpretation.

Travel Demand Management

Staff Behavioural Measures

- Mandatory inclusion of staff in a Mobility Management Package (MMP) with:
  - Potential parking permit prioritisation criteria (clinical need, shift pattern). To be established as part of the ongoing Parking Strategy.
  - Incentivised public transport and active travel offers.
  - Continuous staff engagement and compliance monitoring.

Visitor Travel Information

- Pre-trip communication to advise on routes to the Acute Hospital.
- Wayfinding updates in digital maps and navigation apps, via data-link to operators (Google, Apple Maps).

5. Governance, Monitoring & Reporting Framework

This section outlines the Governance, Monitoring and Reporting Framework that will be observed for the scheme. It meets strict reporting and governance standards, enabling transparent compliance demonstration to all stakeholders including the Parish of St Helier and I&E Highways and Planning.

Governance Structure

Westmount Road Steering Group (WRSG)

Stakeholders:

- GoJ Infrastructure & Environment
- Parish of St Helier Roads Committee (where applicable)
- Transport / Highway Authority
- Emergency Services (Ambulance, Fire and Police)
- Bus Operator
- Hospital FM Lead
- NHFP
- Contractor (and sub-contractors where applicable)
- Haulage representative (where applicable)
- Arup/Design Team (as reporting advisor)

Meetings: Monthly pre-opening, quarterly post-opening (years 1–3).

Monitoring Indicators (KPIs)

Safety KPIs

- Number of vehicle conflicts observed in the VAWS zone (from system logs).
- Number of reported near-misses from bus/ambulance operators.
- Skid or braking-related incidents at the hairpin (from police/insurance data).

Operational KPIs

- Bus service headway variance (target < ±2 minutes).
- VAWS activations per hour and average dwell time.
- Service vehicle arrivals outside permitted windows (target <2% breaches).
- Queue lengths at the Virtual Footway section (target <30m outside peaks).

Demand KPIs

- Staff car trips vs Travel Plan targets.
- Proportion of staff using remote parking (target ≥17% as per TA).
- Visitor mode share tracking.

Data Collection Framework

- Automated Traffic Counters (ATCs) at hairpin and Virtual Footway section.
- CCTV (privacy-compliant) for behavioural review.
- Telematics feeds from hospital fleet and bus operator.
- Annual staff and visitor travel surveys.
- Manual observational studies post-opening (week 1, week 6, month 6, year 1).

Reporting Requirements

- Opening + 3-month Monitoring Report
- 6-month Monitoring Report
- 12-month Full Evaluation Report including:
  - KPI performance
  - Conflict and incident records

  - System uptime & reliability
  - Recommendations for refinement
- Annual reports for years 2 and 3 (unless the authority discharges earlier).

Commissioning, Testing & Assurance (detail)

- Factory Acceptance Test (FAT) (lab environment): device firmware, comms protocols, message sets, watchdog/failsafe.
- Pre-Site Acceptance Test (SAT) checks: power/earthing, insulation resistance, IP ratings, cabinet ventilation, Uninterruptable Power Supply (UPS) run-time.
- SAT (site): end-to-end detection with ambulance OBU and bus OBU, radar cross-check, message latency, intergreen/dwell timing, clearance confirmation, queuing back-propagation checks.
- 30-day soak test: continuous data capture; verify availability ≥ 98%, spurious activations ≤ target.
- Human-factors review in-situ (day/night/wet), luminance/contrast checks; adjust lens/brightness and legends as needed.
- Stage 3 Road Safety Audit (RSA) close-out + mitigation sign-off (pre-opening).

Strict Reporting & Data Management

KPI set (minimum)

- Safety: VAWS-zone conflicts; near-misses (operator forms); any police-recorded incidents.
- Operations: VAWS activations/hour; mean dwell; availability; bus headway variance; queue length exceedances at give-way; servicing breaches (%).
- Demand: staff parking distribution vs target; visitor mode share (sampled).

Cadence and pack structure

- Weekly (hypercare): 1-page dashboard + exception log.
- Monthly (WRSG): KPI dashboard, narrative analysis, risk/issue/change logs, action tracker.
- Quarterly/POE: trend analysis; recommendations & decision log.

Thresholds → automatic escalation

- Bus–bus encounter on Westmount Road > 1/month.
- VAWS availability < 98% in any rolling quarter.
- Queue length > 75 m (or exceeds agreed crest sight distance) on two or more days in a month.
- Servicing breaches > 2% in a month.
- Staff parking/Travel Plan indicators materially off-track vs agreed trajectory.

Data sources and retention

- VAWS logs, ATCs, CCTV event clips (privacy-compliant), bus telematics, booking system exports (servicing), staff/visitor surveys (anonymised).
- Retention & access aligned to the DPIA and client policy; read-only snapshots stored per reporting period.

Change Control & Exception Handling

- Change triggers: geometry alterations, sign face/legend changes, VAWS logic changes, bus timetable material revisions, servicing rules.
- Process: change request → safety/ops impact assessment → WRSG decision → design update → comms → implementation → post-change review (2 weeks).
- Emergency changes (safety-critical): temporary measure (e.g., staff-operated stop/go), WRSG out-of-cycle approval, then formalise.

Communications & Training

- Pre-opening: public web pages and appointment info explaining advisory signs and potential short waits; staff Travel Plan messaging; contractor inductions.

- Operator training: bus and ambulance e-modules + route briefings; servicing SARP (Safe Access & Routing Protocol) induction with sign-off.

Acceptance Criteria

- Hairpin & alignment: as-built within tolerances; barrier/edge protection positioned per design; HF checks passed; RSA close-out.
- Virtual Footway Section: sight distance validated on site; passing place accommodates 7.5 t box van; night-time visibility proven; queue length within threshold.
- VAWS: availability, latency, detection accuracy, and fallback behaviours proven; logs integrated into reporting.
- Bus/servicing ops: SOPs issued, training completed, first-month compliance ≥ targets; no bus–bus meetings recorded.
- Travel Plan: staff redistribution/parking controls active; first-quarter survey shows trajectory consistent with targets.

Primary objectives

- Safety at constrained locations (hairpin + give-way): prevent large-vehicle conflicts; approach speeds and driver comprehension optimised.
- Reliable blue-light access: VAWS must consistently create a protected path for ambulances.
- Operational reliability: bus services spaced to avoid bus–bus encounters on Westmount Road; servicing consolidated and time-windowed; staff car trips managed via Travel Plan.

Measurable success criteria

- Zero preventable collisions attributable to hairpin priority/VAWS during hypercare period.
- VAWS availability ≥ 98% per quarter; false activations ≤ 1 per 1,000 vehicle detections.
- Bus headway variance ≤ ±2 min on Westmount Road; no bus–bus meetings at hairpin under normal ops.
- Servicing window compliance ≥ 98%; oversize vehicle breaches = 0 (unless pre-approved).
- Travel Plan: staff parking redistribution/targets achieved in line with planning commitments.

6. Implementation Plan

Phased Implementation Plan

Phase 0 — Mobilisation & Governance (Month −2 to 0)

Workstreams

- Establish Westmount Road Steering Group (WRSG) (I&E/Highway Authority, Ambulance, Bus Operator, Hospital FM, Arup), terms of reference, escalation routes.
- Approve Data & Reporting Protocol: what, how, and when to report (VAWS logs, ATC/CCTV extracts, bus telematics, servicing booking data, near-miss forms).
- Freeze scope baseline (hairpin widening, VAWS, 75 m give-way, passing places, footways) and condition wording for Mitigation Strategy.

Deliverables: WRSG charter; Responsible, Accountable, Consulted and Informed Framework (RACI); data dictionary & DPIA; baseline risk/issue/change registers; stakeholder comms plan.
Acceptance: WRSG inception minutes signed; registers live in project CDE; data pathways proven (test exports).

Phase 1 — Detailed Design & Approvals (Month 0–3)

Workstreams

- Finalise General Arrangementss, long/short sections, drainage, barriers/edge protection, road markings/signage, lighting, VAWS siting & sighting, power/comms. (Keep VAWS within the agreed operational concept for ambulances and buses.)
- Human-factors review of sign legends (driver comprehension), intervisibility at give-way crest, and speed environment.
- Stage 2 RSA planning (scope aligned to the updated flows, priority link and VAWS operation).
- Confirm bus timetable spacing logic and dispatch rules; draft Servicing Protocol (size cap ≦ 7.5 t, booking & off-peak windows).

Dependencies: Traffic Regulation Orders (if any), utility stats & surveys, land/BCA consents as needed.
Deliverables: IFC design pack; VAWS functional specification; sign schedules; electrical & comms schematics; pre-RSA Hazard Log.
Acceptance: IDC closed; independent design checker sign-off; WRSG design gate approval.

Phase 2 — Procurement & Enabling (Month 2–6)

Workstreams

- Civils contractor procurement; VAWS supplier selection (maintainer compatibility; Yunex ecosystem per GoJ incumbent).
- Factory Acceptance Test (FAT) procedures for VAWS hardware, OBUs/RSUs, and interfaces.
- Enabling works: trial holes, utility diversions, temporary traffic management (TTM) design with emergency access maintained.

Deliverables: Contracts awarded; FAT plans; TTM method statements; utility coordination minutes.
Acceptance: FAT witnessed or certified; pre-start meeting minutes; HAZCON updated.

Phase 3 — Civil Construction (Month 6–12)

Workstreams

- Hairpin widening (earthworks, retaining, pavement and drainage upgrades), alignment tweaks Bowls Club → Westmount Apartments.
- Construct a 75m section of virtual footway with passing places, enhanced lighting, and delineation.
- 2 m footway improvements where feasible; barrier/kerb protection at critical edges.
- Install ducts/power/comms for VAWS, masts/columns, cabinets and feeder pillars.

Deliverables: As-built red-lines; test certificates (pavement/lighting/electrical); QRAs updated for new geometry.
Acceptance: Sectional completion inspections; snag lists closed; temporary safety measures in place.

Phase 4 — Technology Installation & Integration (Month 10–14)

Workstreams

- Install RSUs, signs, VMS/VAWS, radar detectors, provisioning plan for ambulances and buses; configure comms, system health monitoring, and data logging.
- Site Acceptance Testing (SAT): end-to-end detection → activation → dwell/clearance; fallback behaviour under comms/power loss.
- Cyber & data checks: access control, audit trail, retention schedule.

Deliverables: SAT reports; asset register; spares & maintenance plan; monitoring dashboard.
Acceptance: SAT pass with deviations ≤ minor; WRSG approval.

Phase 5 — Integrated Testing & ORAT (Month 14–18)

Workstreams

- Operational Readiness and Transfer (ORAT): live proving with ambulance, bus, 7.5 t vans across multiple time-of-day scenarios; simulate two large vehicles and forced VAWS downtime.
- Validate queue lengths and clearance times at the give-way; refine sign positions/legends if required.
- Driver training: e-learning + toolbox talks for bus drivers and servicing contractors; ambulance blue-light briefings.
- Stage 3/3+ RSA (pre-opening) close-out.

Deliverables: ORAT plan & completion report; training records; updated risk controls; RSA response.
Acceptance: All action items closed; WRSG go-live decision.

Phase 6 — Go-Live & Hypercare (Month 18–21)

Workstreams

- Launch public/visitor comms (web, appointment letters), staff comms (Travel Plan rules), updates to digital mapping.
- Hypercare (first 90 days): daily VAWS health check; weekly performance huddles; rapid signage tweaks if indicated.

Deliverables: Hypercare dashboard; exception reports; Minor Works log.
Acceptance: KPIs stable for 4 consecutive weeks; no safety triggers breached.

Continuous Improvement (Month 3/6/12)

Workstreams

- 3-month and 6-month interim reports; 12-month full evaluation against success criteria, including trend analysis and recommendations for Year 2–3.
- Travel Plan compliance review (staff parking redistribution; mode share).

Deliverables: POE reports, data annexes, WRSG decisions on refinements.
Acceptance: Authority signs off monitoring milestones or closes condition.

7. Risk Assessment

8.1 Purpose and approach

This section identifies, evaluates and manages risks associated with the design, construction and operation of Westmount Road in support of the Overdale Acute Hospital access strategy. It follows a risk-based, ALARP approach consistent with standard transport safety management practice and integrates with the project's Road Safety Audit process and post-opening monitoring regime. The assessment reflects the specific scheme elements already defined in the project documentation—namely hairpin improvements with VAWS activated by ambulances and public buses, a 75m section of virtual footway with passing places, and operational measures (bus timetable spacing; servicing consolidation; Travel Plan demand reduction).

8.2 Risk methodology

Top Risks & Controls

1. Tech reliability (VAWS/OBU/RSU/comms) → dual-path detection (OBU + radar), UPS, watchdogs, soak tests, proactive maintenance SLAs.
2. Driver non-compliance with advisory signs → HF-optimised legends, luminance checks, targeted comms/enforcement with operators, dashboard monitoring and adaptive dwell tuning.
3. Bus spacing not maintained → dispatch rules in operator SOPs, real-time headway view, control-room prompts and post-event review.
4. Servicing spikes → booking system with caps, off-peak windows (clinical exceptions), FM audit and corrective action.
5. Construction interfaces/TTM impacts → WRSG traffic management reviews, emergency-access priority, staged works with comms plan.

#	Risk (concise)	RAG	Key causes	Principal controls (design/ops/tech)	Residual RAG	Owner	Triggers / monitoring	Contingency
1	Large-vehicle conflict at hairpin (bus/ambulance/ 7.5 t)	High	Constrained geometry; two large vehicles meet; wet grip	Hairpin widening + HF signage/chevrons/edge protection; VAWS activation by ambulances & buses; bus spacing rules	Med	I&E / Ops	VAWS logs show opposing large vehicles; near-miss reports; CCTV flags	Increase dwell/clearance timings; targetted enforcement; temp traffic control if trend persists
2	Driver non-compliance with advisory VAWS	Med	Misunderstanding; sign visibility	HF-tested legends, luminance checks; operator training; public comms; monitoring of stops at signs	Low	I&E	VAWS activation vs observed compliance variance	Sign face/position tweak; add supplementary plates; public campaign
3	VAWS technical failure / uptime <98%	High	Power/comms fault; OBU/RSU defect	Dual detection (OBU + radar where feasible); UPS; maintenance SLA; FAT/SAT + 30-day soak	Med	VAWS supplier	Uptime KPI; alarm logs; fault MTTR	Switch to conservative message; manual control protocol; rapid repair framework
4	False activations (nuisance holds)	Med	Erroneous detection	Calibration during soak; threshold tuning; periodic re-validation	Low	VAWS supplier	Elevation in activations with no large vehicles	Re-tune; firmware update; temporarily reduce dwell (safe bound)
5	Queue growth at 75 m give-way (crest visibility)	Med	Flow peaks; non-priority behaviour	Priority uphill with passing places; visibility tested; lighting; delineation; queue monitoring	Low–Med	I&E	Queue > 75 m (threshold)	Add repeater signage; adjust markings; short shuttle TM if persistent
6	Bus headway spacing not maintained	Med	Control room gaps; disruption	Dispatch window rules; telematics headway view; driver briefs	Low	Bus operator	Headway variance >±2 min; hairpin meetings	Temporary hold upstream; timetable fine-tune; driver coaching
7	Servicing breaches	Med	Third-party/non-compliant drivers	FM Servicing Protocol: ≤7.5 t, booking, 10:00–15:00 windows	Low	Hospital FM	Booking audit; gatehouse logs; incidents	Refuse entry or re-time; consolidate drop; formal warnings/escalation

	(oversize/peak-hour arrivals)			(clinical exceptions), inductions				
8	Staff parking demand higher than plan	Med	Behavioural lag; shift peaks	Travel Plan measures & public parking redistribution; staff comms; monitoring	Low–Med	Hospital FM	Car park occupancy; survey variance vs targets	Tighten permits; incentivise PT; stagger shifts; extra comms
9	Adverse weather (wet/low luminance)	Med	Skid risk; sign conspicuity	High-friction surfacing; lighting checks; reflective chevrons; seasonal comms	Low	I&E	Incident & braking reports; weather logs	Early warnings; grit/clean; temporary advisory speed
10	Construction-phase access disruption	Med	TTM conflicts; emergency access	Phased works; emergency access maintained; comms to operators; monitoring	Low	Civils contractor	Delays to blue-light/bus/servicing during works	Re-sequence; out-of-hours critical tasks; extra marshals
11	Data/privacy non-compliance (CCTV/VAWS logs)	Med	Insufficient DPIA/controls	DPIA; minimisation; access control; retention policy; audit	Low	Client/Authority	DPIA gaps; access violations	Suspend non-essential retention; remedy controls
12	TRO/consent delays affecting signage/priority	Med	Statutory process risk	Early legal review; programme float; fallback marking strategy	Low–Med	I&E	Programme slippage	Temporary traffic management until order sealed
13	Incident blocks link (stalled vehicle)	Med	Breakdown at hairpin/give-way	Passing bay at hairpin; recovery plan; comms	Low	I&E / Police	Unplanned closures; response time	Quick-clear contract; portable TM; diversion comms
14	OBU coverage gaps (ambulance/bus)	Med	Missing or faulty units	OBU asset register; spares; fitment checks	Low	Ambulance / Bus operator	Activation misses; device failures	Swap units; radar back-up reliance; maintenance rota
15	Residual RSA items not closed	Med	Late design tweaks	RSA Stage 2 & 3 schedule; action log; designer responses	Low	Arup / I&E	Open RSA items near go-live	Pre-opening hold point until closed or mitigated

PARISH OF ST HELIER

Town Hall, PO Box 50, York Street, St Helier, JE4 8PA | 01534 811811 | townhall@sthelier.je

8.5 Triggers, thresholds and escalation

The following automatic escalation thresholds align with the Implementation Plan's strict reporting regime:

- Bus–bus encounter on Westmount Road > 1/month → WRSG immediate review; dispatch rule tightening.
- VAWS availability < 98% in any rolling quarter → supplier corrective action plan and re-test.
- Queue length > 75 m or exceeding crest sight distance on two+ days/month → lining/sign tweaks or temporary shuttle control review.
- Servicing window/size breaches > 2% → FM enforcement escalation and booking system changes.
- Travel Plan off-trajectory vs agreed targets → strengthen parking permit criteria and incentives; update comms.

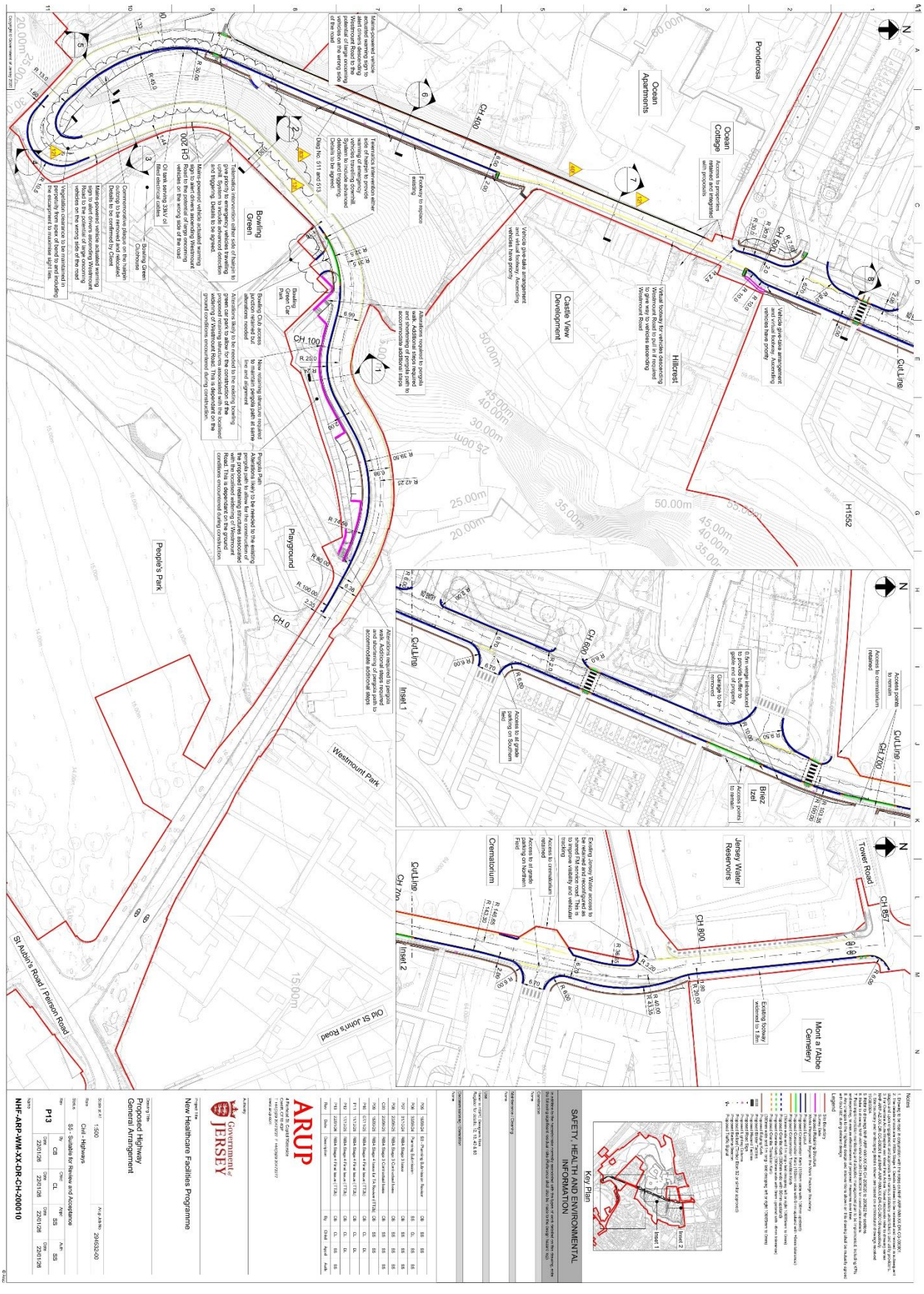
8.6 Testing, commissioning and assurance risks (summary)

- FAT/SAT failure (latency, false negative/positive): mitigate via bench testing, calibrated SAT, and a 30-day soak with performance dashboards before go-live.
- Message comprehension: night/wet trials with human-factors checks; adjust legends/brightness and intergreen/clearance times accordingly.
- Interface gaps (ambulance/bus OBUs, RSUs, comms): supplier witness tests; spares strategy; fail-safe advisory messaging during outages.

8.7 Residual risk acceptance and ALARP

With the geometry refinements, 75m of virtual footway with passing places, VAWS for ambulances/buses, bus spacing, and servicing restrictions, residual risks are reduced to ALARP for normal operations. Any residual risks are managed through active monitoring, defined triggers, and rapid remediation under WRSG governance, with RSA Stage 2 & 3 providing independent assurance prior to and after opening.

Appendix 2: **Plan**



APPROVED AT RATES ASSEMBLY (16.07.25)

Version: 4.0
Date: 13.05.26

2025/26 - PROPOSED ROADS MAINTENANCE

A. ROAD WORKS MAINTENANCE/RESURFACING WORK

Priority	Brief detail	Cost spent	Progress update
1	Aquila Rd - Canon Street junction to GUR	174,409	*Completed*
2	Saville Street (Clare Street to Rouge Bouillon)	12,451	*Completed - (Agreed to redirect original funding 17.12.25)*
3	Charles Street (Large patch)	12,584	*Completed - (Agreed to redirect original funding 17.12.25)*
4	Tower Road (High Large Patch)	18,080	*Completed*
5	Repairs and maintenance: • Minden Street footway panels • Museum Street footway panel • Journeaux Street footway panel • Don Street Footway panel • Rousell Street void • Palmyra Road void • Philips Street brick footway work • Fern Valley Patching • Hilgrove Street footway panel • Old Trinity Hill patching & RPZ • Cheavlier Road Void		

RESERVE LIST

1	*Charles Street (Large Patch to Providence Junction) 2002*	*15,000*		
2	*Aquila Rd. (Phase 2) (Carriageway and footways) 1989*	*50,000*	*440*	*75 l/m*
3	*Clare Street (large patch to Providence junction)*	*75,000*	*700*	*105 l/m*
4	*Tower Road Carriageway (School)*	*50,000*	*775*	*105 l/m*
5	*Museum Street Carriageway and Footways*	*30,000*	*300*	*55 l/m*
6	*Saville Street (Clare St to RB)*	*125,000*	*1,000*	*165 l/m*
7	*Bellozanne Road (One Way - south Section) + Speed humps scheme*	*143,000*	1,100	*157 l/m*
8	*Parade (Eastern Arm)*	*180,000*	1380	*115 l/m*
9	*Havre De Pas Gardens*	*165,000*	1,250	*250 l/m*
10	*Ruelle Vaucluse (Section)*	*50,000*		
11	*Palmyra Road*	*150,000*	1,110	*185 l/m*

A. Road works Maintenance; *the roads have been assessed on site and against the department's register.*

Aquila Road

APPROVED AT RATES ASSEMBLY (16.07.25)

2025/26 - PROPOSED ROADS PROJECT

Version: 4.0
Date: 13.05.26

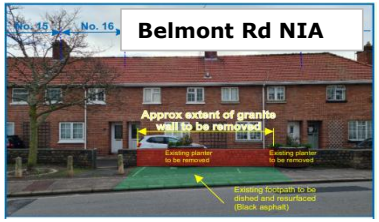
B. ROAD WORKS IMPROVEMENTS (PROJECTS)

Priority	Brief detail	Cost spent	Progress update
1	NIA - Poonah Rd.	545,409	*Completed*
2	Vallée des Vaux flooding - develop scheme during 2025/26	13,746	*Postponed to 2026/27 - as agreed 11.02.26*
3	NIA - Clearview street area - progress initial designs	75,000	*Phase 1 completed - design developed, out to tender*
4	Highview Lane - road width - 2025/26 develop scheme	0	*Postponed to 2026/27 - as agreed 11.02.26*
5	NIA - Belmont Rd - Belmont Gardens exit (mini-NIA)	27,986	*Completed*
6	Old St John's Road permanent speed humps (3x)	15,297	*Completed*
7	Installation of bike shelter	8,757	*Completed*
8	Old Street Mural	5,287	*Completed*

RESERVE LIST

1	*Les Chenes rebuild roadside wall (Requires Planning/bye-laws)*	*65,000*	24	*1,3,5,6,8,*	*Postponed - due to funding - will require Planning*
2	*Barbizon, La Pouquelaye - Road improvement line*	*75,000*	*22*	*1,4,5,6*	*Need land; likely to be Compulsory Purchase*
3	*La Pouquelaye footpath widening, prog (Phase 2)*	*50,000*	*22*	*1,3,5,6*	*Review Phase 1 for next 12/24 months first*
4	*Hope Street - alfresco area*	*15,000*	*21*	*3,4,5,7,8,9*	*No recent request or demands - Public Realm*
5	*Minden Street - regeneration*	*TBC*	*19*	*3,4,5,6,7*	*Continue from regen of Minden Plc; funding is an issue*
6	*Phillip Street - regeneration*	*TBC*	*19*	*3,4,5,6,7*	*Continue from regen of Minden Plc; funding is an issue*
7	*Halkett Street (North sections) - regeneration*	*750,000*	*19*	*3,4,5,6,7*	*Continue from South Sections - funding is an issue*
8	*Don Street Regeneration*	*100,000*	*14*	*3,5,6,7*	*Develop scheme - Delayed due to funding*
9	*Patriotic Place scheme*	*150,000*	*12*	*3,5,6*	*Review once plans for existing Hospital known*
10	*Twining Signs*	*10,000*	*10*	*3,4*	*Ex.to be replaced; Hold as further twinning planned*
12	*Seaton Place - regeneration - Phase 1; develop scheme plans*	*45,000*	*9*	*3,7,8*	*Postpone paving to alfresco to be part of regen*
13	*Dongola Road / Drury Lane - RPZ request*	*TBC*	*4*	*2,2*	*Request for additional RPZ area*

Poonah Road NIA



Belmont Rd NIA

Clearview St NIA

Appendix 1: Works undertaken during 2025/26

Aquila Road - 2/3rds of fooways and carrageway resurfaced

Belmont Gardens / Belmont Road - New vehicular exit from Belmont Gardens

Charles Street - Large patch replaced to carriageway

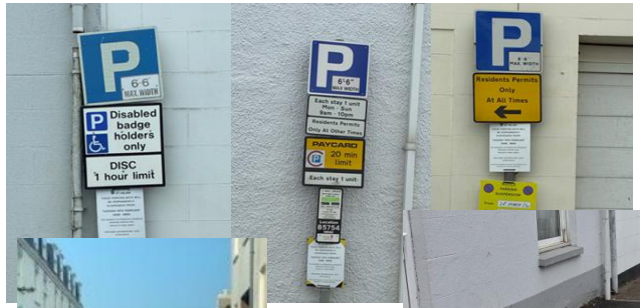
Don Street - Granite footway relaid due to uneven surface

Dorset Street - Cycle track change following an accident to a resident's property

Journeaux Street - footway resurfacing (Joint scheme with developer)

The department discussed with the developer to relay the footway as part of the redevelopment of the site - a lot of time spent by the department

Lewis Street - Car parking removed



Saville Street - Section of carrageway resurfacing & new crossings (Joint scheme with developer)

Resurfacing by PoSH - Crossings as POA for Randalls site

Minden Street - footway panel replacement (2 panels)

Rue du Funchal - Carriageway and footway refurbishment

After

Although the Parish did not fund the refurbishment of Rue du Funchal, a considerable amount of officer time was spent liaising with the developer to secure its renewal following the redevelopment of the Le Masurier site. As the Committee will recall, the refurbishment of Rue du Funchal was a welcome relief for residents who had effectively been living alongside a building site for approximately five years.

Tower Road - Panel of carriageway replaced

Old Street - Cycle cover & Mural

Poonah Road NIA

Poonah Road NIA (continued)

Old Trinity Hill - New RPZ Zone

1. 38, La Motte Street Centre, La Motte Street, St. Helier, JE2 4SZ P/2026/10917

Change of use of former school building to extend existing Adult Mental Health facilities. Demolish 1no. residential unit to the South-east of the site and construct two-storey mental health respite provision and offices. Demolish rear extensions to former school building and construct single and two storey extensions to South elevation. Demolish existing two-storey Mental Health facility and offices to North-west of the site. Refurbish Listed property including restoration of 3no. windows to north of property and replacement of 23no. timber windows to the north and south of the listed building. Construct bin store to South of site. Various internal and external alterations. Various hard and soft landscaping. 3D Model available.

The Roads Committee has reviewed the submitted plans and its position: **Advice Given**

Important Notice:
Applicants must review the ***Planning & Development Guide*** adopted by the Parish Roads Committee. This guide contains essential requirements for developments that adjoin or affect a Parish by-road. Access it here: Planning Guidance Standards | Parish of St Helier.

Please be aware that Planning approval does not grant permission to alter any Parish by-road or footway. Such works require **prior** written consent from the Parish of St Helier, and all specifications **must be agreed in advance**. Furthermore, only contractors approved by the Parish are permitted to carry out works on Parish by-roads or footways. Please contact us before you commence on site: infrastructure@sthelier.je

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Proposal:

The Roads Committee notes that the proposal is for a change of use of the former school buildings to extend Adult Mental Health facilities, together with demolition of rear extensions and construction of new single and two-storey extensions, plus refurbishment works to the Grade 3 listed buildings (including window works), a new bin store, and hard/soft landscaping.

- Overall intent: expand and modernise an Adult Mental Health day services "Diner", add a drop-in café and mental health hub/crisis support functions, provide office accommodation for charities, meeting/training spaces, and short-stay respite accommodation.

- Site and context: central St Helier site accessed for vehicles from New St James Place with frontage to La Motte Street; listed former school buildings retained and refurbished; non-listed rear structures removed and replaced with new wings around a rear courtyard.

- The supporting documents describe the scheme as an Adult Mental Health and recovery hub, including:
  - Relocated "Diner" facility (day services) and a drop-in café
  - Office accommodation and meeting/training spaces
  - Respite accommodation (noted as a 2-bedroom unit in the design statement and refuse strategy, but described as two respite studios in the transport statement)

- Operational overview stated in the transport statement:
  - Diner: Monday–Friday 09:00–16:00
  - Café: Monday–Sunday 09:00–16:00
  - Offices: Monday–Friday 08:00–18:00
  - Max staff on site (by function): diner 5, café 4, offices 15; max service users on site at any one time: 6

Walking (Pedestrian access)

What is proposed (as submitted)

- Pedestrian access into the site is primarily from New St James Place (southern access), with pedestrians also able to access the site from La Motte Street.
- The design statement describes a protected pedestrian footpath separated from vehicular parking bays, leading visitors to entrances serving the respite accommodation, offices, diner and MH hub.
- Two external ramps are proposed at the north-eastern and north-western edges to provide inclusive access to the La Motte Street entrances.

Roads Committee comment

- If any works are proposed within, or affecting, the public footways on La Motte Street or New St James Place (e.g., ramp tie-ins, kerb/footway alterations), these must be agreed in advance with the relevant highway authority (Parish for New St James Place; Government for La Motte Street).

Public transport (bus routes and any improvements)

What is stated (baseline)

- Nearest bus stops are on St James Street (approximately 50m away) and St Saviour's Road (approximately 130m away).
- Routes serving nearby stops include 13, 23 and 33 (Liberty Bus), with Liberation Bus Station approximately 800m away.

Roads Committee comment

- Given the clinical/community nature of the use, the applicant should confirm whether any accessibility improvements are proposed (or required) at the nearest bus stop(s), including shelter, seating, kerb heights and step-free access.

Cycling provision

- Cycle parking quantum: 12 cycle parking spaces provided as 6 Sheffield stands.
- Cycle parking type/shelter: covered bicycle shelter(s) are referenced in the design statement, including a "green roof" shelter with integrated seating.
- Connections: the site is not directly on the Jersey cycle network but is near cycle route 5 (about 300m, via La Motte Street and Hill Street).
- Cycle/e-bike charging: No explicit commitment to e-bike charging points is set out in the transport statement or design statement. (Cycle charging is not described; only cycle stands/shelter are confirmed.)

Roads Committee comments

- Cycle parking should be covered and suitable for cargo / inclusive cycles, with a clear layout drawing showing stand type, spacing, access routes and oversight/security.

- The applicant should confirm whether e-bike charging is being provided within the cycle shelter, and if so, how charging will be managed safely (battery fire risk controls).

Motor vehicle parking provision (number, type, EV charging, visitor parking)

What is proposed:

- 7 car parking spaces total, including 1 accessible space.

- Stated allocation:
  - 2 diner staff spaces
  - 2 café staff spaces
  - 2 rehabilitation staff spaces
  - 1 unallocated accessible space "for use as required"

- Existing parking reduction: existing site capacity noted as approximately 15 spaces, reducing to 7 spaces.

- Access control: the existing gates/access control barrier will be replaced to control vehicular access.

EV charging (cars)

- The design statement notes that provision has been made for electric vehicle charging points within the rear car park, but does not specify the number of active chargers or the passive future-proofing approach.

Visitor parking

- No dedicated visitor parking bay count is provided. The only "unallocated" space described is the accessible space.

Roads Committee comments

- The applicant should provide a parking management plan confirming:
  - Who may use each bay (staff categories, visitors, healthcare professionals, servicing)
  - How access control will operate (barrier control, permits, enforcement)
  - How overspill parking will be prevented within New St James Place and the surrounding streets

- The applicant should confirm EV charging provision for the car park:
  - Number of active charge points at completion (The Roads Committee would expect all parking spaces to have EV charging facilities)
  - Passive infrastructure to enable future charging expansion
  - Any fire safety / operational controls associated with EV charging

Servicing, unloading and deliveries

- Deliveries: the proposed parking area provides space for delivery vehicles to enter and exit the site in forward gear; swept-path evidence indicates a 10m rigid vehicle can enter/exit without conflict.

- Refuse vehicle movements (baseline/continuity): refuse vehicles are understood to reverse into New St James Place from St James Street; no changes to refuse collection arrangements are proposed.

Roads Committee comments

- The applicant should confirm:
  - Delivery booking/controls (timing, frequency, maximum vehicle size)
  - How deliveries will be managed without obstructing pedestrian routes within the site

Refuse and recycling strategy (including "improvements")

- A dedicated refuse and recycling strategy has been provided, prepared with reference to Parish of St Helier guidelines and BS 5906:2005, based on litres/week and assuming twice-weekly collection.

- The strategy assumes the development includes:
  - 1 respite 2-bedroom flat (short stay/infrequent usage)
  - Office accommodation for 21 persons
  - Diner with up to 50 covers per day
  - Café with approximately 50–60 customers per day (sandwiches prepared off-site)

- Bin storage: external enclosed bin store compound proposed in the south-west corner of the site, selected to minimise internal manoeuvring and provide access aligned with existing refuse vehicle operations.

- The strategy states that the Parish has confirmed the bin calculations and that the site will be entitled to two general refuse collections, weekly cardboard collection and recycling every fortnight.

Roads Committee comments:

Detailed arrangements for refuse storage, collection, separation, and recycling must be agreed with the Parish Refuse Manager.

- The Parish cannot collect refuse unless suitable access and on-site storage facilities are provided.

- There should be no step between the refuse store floor and the footway.

- The refuse store must be fitted with a standard Parish lock.

Road ownership / consultation routing (Parish vs Government)

- New St James Place is stated to be under Parish of St Helier ownership

- La Motte Street and St James Street are stated to be under Government of Jersey Infrastructure & Environment ownership.

Roads Committee comments:

- Notwithstanding the above Roads Committee comments, any works affecting La Motte Street (including ramps/footway interface) should be referred to Government of Jersey Infrastructure & Environment for highway comment/consent, as applicable.

https://www.gov.je/citizen/Planning/Pages/PlanningApplicationDetail.aspx?s=1&r=P/2026/10917

Head of Infrastructure | **Parish of St Helier**
On behalf of the **Parish of St Helier Roads Committee**

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2. No's 5 & 7, Byron Road, St. Helier, JE2 4LQ **P/2026/10997**

Refurbishment, reconfiguration and partial extension of the existing garage premises to provide a car servicing garage and first floor motorcycle storage. Installation of a raised roof structure to western block and replacement of existing roof coverings including removal of asbestos. Various external and internal alterations to include repositioning of garage entrance.

The Roads Committee has reviewed the submitted plans and its position**: Advice Given**

Important Notice:
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Please be aware that Planning approval does not grant permission to alter any Parish by-road or footway. Such works require **prior** written consent from the Parish of St Helier, and all specifications **must be agreed in advance**. Furthermore, only contractors approved by the Parish are permitted to carry out works on Parish by-roads or footways. Please contact us before you commence on site: infrastructure@sthelier.je

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Proposal:

The application relates to the refurbishment, alteration, reconfiguration and partial extension of the existing commercial premises at No's 5 & 7 Byron Road, which comprise two adjoining garage buildings currently in lawful light industrial use as a vehicle workshop.

The proposals seek to modernise and reorganise the premises to operate as a purpose-designed car servicing garage, retaining employment use.

Ground floor proposals include:

- A large open-plan workshop with four vehicle post lifts and a dedicated service bay
- Reception/office and a customer unisex WC
- Repositioning the principal garage entrance further within the building footprint to create a safer customer pull-in area and avoid obstructing the adjacent public footpath

First floor proposals include:

- Improved office/staff facilities (including staff social area, kitchenette and welfare provision)
- Inclusive access via a protected stair and platform lift
- A new motorcycle storage area created within a raised roof structure to the western block (including asbestos roof removal and replacement)

Location/streetscape context:

- The site is within the defined Town Area on a one-way circulation route, and the frontage includes a sloped concrete hardstanding between the building façade and the public footpath, separated by a chained barrier and used for vehicle access and short-term parking.

Walking / pedestrians

- The submitted statement identifies an existing public footpath along the eastern boundary and notes the garage entrance is being repositioned inward to avoid vehicles obstructing the footpath. This approach is supported in principle, subject to final details demonstrating that pedestrian routes remain clear at all times.

Roads Committee comments:

The applicant should provide a plan clearly showing:

- How customers pull-in will operate without any vehicle overhang onto the footway
- Any temporary queuing arrangements (if applicable) to ensure the footway remains unobstructed during peak times

NOTE: If any works are proposed to the public footway (levels, kerbs, surfacing, drainage tie-ins), these must be agreed in advance with the **Parish of St Helier Infrastructure department** and delivered by an approved Parish contractor.

Cycle parking provision (including cargo/inclusive cycles and e-bike charging)

- The submitted design statement does not identify any dedicated cycle parking provision.

Roads Committee comments:

- The Roads Committee requests that the applicant confirm whether any cycle parking (staff and visitor) will be provided and, if so, provide a layout drawing and specification, including whether provision is suitable for larger/cargo/inclusive cycles.

- If cycle parking is provided, the Roads Committee requests consideration of electric bicycle charging points and associated battery fire risk mitigation measures.

- Noting the scheme includes staff welfare provision (including a unisex shower/WC), this supports active travel in principle.

Motor vehicles parking provision (including EV charging)

- The scheme retains the existing hardstanding area at the front of the building for vehicle movements and short-term customer pull-in/parking, and does not propose formal long-stay parking.

Roads Committee comments:

- The applicant should provide a simple parking/forecourt management note confirming:
  - Maximum number of customer vehicles intended to wait within the forecourt at any one time
  - How vehicles will be managed to prevent queuing on the carriageway and to avoid footway obstruction

- How staff parking will be managed (given the absence of formal long-stay spaces on site)

- EV charging is not referenced within the submitted design statement. If any EV charging is proposed (for cars or motorcycles), the applicant should confirm:
  - Number and location of chargers
  - Whether passive future-proofing is being provided
  - Any fire risk controls and operational management measures

Servicing, unloading and operational vehicle movements

- The proposal is for a purpose-designed car servicing garage, including a dedicated service bay and multiple post lifts.

Roads Committee comments:

- The applicant should confirm operational servicing arrangements, including:
  - Expected delivery types and frequency (parts, consumables, waste oils, etc.)
  - Where delivery vehicles will stop/unload so that the public footway and carriageway are not obstructed.
  - How will any abnormal vehicles (recovery trucks/flatbeds) be handled if they attend the site?

- The construction process and site servicing arrangements must be agreed with the Parish Infrastructure Department prior to works commencing.

Vehicular access, delineation, encroachments and highway interface

Roads Committee comments:

- The applicant should confirm whether any kerb/footway crossover works are proposed as part of the revised entrance/pull-in arrangement. Any new or altered access surfacing near the highway must be hard-bound and drainage managed within the site, and any works to the public highway must be agreed in advance with the Parish and carried out by an approved contractor where applicable.

- Delineation between private land and the public footway must be clear (Parish standard approach is a 50mm split-block delineation line where relevant).

- The kerb and footway must be lowered by the Parish of St Helier or approved Parish contractor at the expense of the Applicant. This is a Parish of St Helier set condition which must be undertaken by the Applicant prior to the vehicle entrance being used. The Parish will not allow access across the footway by the Applicant/owner without this work being undertaken first; this is to avoid damage to the kerbstones from vehicle movement.

  Please note that footways **MUST** be continuous across all vehicular entrances, as priority is to be given to pedestrians. Therefore, there is no need to provide tactile paving on either side of a vehicular entrance.

  The Applicant must contact the Parish of St Helier's Infrastructure Department **prior** to undertaking any work to the public highway to agree the extent of work and specific details and specifications. The Applicant is to be aware that only Parish-approved contractors are permitted to work on the public road/footway. All necessary works are to be at the cost of the Applicant.

- The requirements of the Highway Encroachments (Jersey) Regulations 1957 must be strictly complied with (no doors opening out over the highway; no projections/encroachments over the footway; windows not opening beyond the building line where applicable).

Drainage (surface and foul)

- The submitted design statement notes that roof drainage will continue to discharge to the existing system and connections to mains drainage on Byron Road, with improvements to gutters and downpipes.

Roads Committee comments:

- Any connection or alterations to main drains must be agreed with the Government of Jersey's Drainage Team. If any trenching of a Parish by-road is required, the applicant must agree the scope and reinstatement standard with the Parish in advance.

Refuse and recycling

- A refuse and recycling strategy is not set out in the submitted design statement.

Roads Committee comments:

Detailed arrangements for refuse storage, collection, separation, and recycling must be agreed with the Parish Refuse Manager.

- The Parish cannot collect refuse unless suitable access and on-site storage facilities are provided.
- There should be no step between the refuse store floor and the footway.
- The refuse store must be fitted with a standard Parish lock.

https://www.gov.je/citizen/Planning/Pages/PlanningApplicationDetail.aspx?s=1&r=P/2026/10997

Head of Infrastructure | **Parish of St Helier**
On behalf of the **Parish of St Helier Roads Committee**

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3. La Colomberie, Eagle House 31, Eagle House 31, JE2 4QB **RP/2026/10998**

REVISED PLANS to RP/2025/0342 (REVISED PLANS to P/2023/0197. Convert existing offices to provide 17 no. 1-bed, 8 no. 2-bed, and 1 no. 3-bed apartments, associated cycle store, and the retention of the current ground floor retail units) and RP/2024/0395 (omit all roof extensions and associated external alterations to create 15 X 1-bed-, 6 X 2-bed-, and 1 X 3-bed apartments including a shared communal rooftop garden.) : Proposed minor amendments comprising bin store relocation, smoke shaft additions, minor fenestration adjustments and bike store reconfiguration.

The Roads Committee has reviewed the submitted plans and its position: Advice Given

Important Notice:

Applicants must review the ***Planning & Development Guide*** adopted by the Parish Roads Committee. This guide contains essential requirements for developments that adjoin or affect a Parish by-road. Access it here: Planning Guidance Standards | Parish of St Helier.

Please be aware that Planning approval does not grant permission to alter any Parish by-road or footway. Such works require **prior** written consent from the Parish of St Helier, and all specifications **must be agreed in advance**. Furthermore, only contractors approved by the Parish are permitted to carry out works on Parish by-roads or footways. Please contact us before you commence on site: infrastructure@sthelier.je

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Proposal:

The Parish Roads Committee notes that this is a minor change to the approved application for the redevelopment of the site to create 15 X 1-bed, 6 X 2-bed, and 1 X 3-bed apartments. This minor change is for the relocation of the refuse bin storage area.

Roads Committee Comments:

1. **Refuse facilities**: Detailed arrangements for refuse storage, collection, separation, and recycling must be agreed with the Parish Refuse Manager.
    - The Parish cannot collect refuse unless suitable access and on-site storage facilities are provided.
    - There should be no step between the refuse store floor and the footway.
    - The refuse store must be fitted with a standard Parish lock.
2. **Referral to the Government of Jersey Infrastructure and Environment**: Notwithstanding the above, this application should be referred to the Government of Jersey Infrastructure and Environment, as the road in front of the property is a Government Main Road.

https://www.gov.je/citizen/Planning/Pages/PlanningApplicationDetail.aspx?s=1&r=RP/2026/10998

Head of Infrastructure | **Parish of St Helier**
On behalf of the **Parish of St Helier Roads Committee**