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Planning Objection

SMD/2026/0250 Site Address: John Munroe Independent Hospital Reacliffe Road
Rudyard Staffordshire ST13 8RU

We wish to object to this application on the grounds that insufficient information has been provided to enable Staffordshire Moorlands District Council to properly assess the planning implications of changing the lawful use of the site from Use Class C2 (Residential Institution) to Use Class C2A (Secure Residential Institution).

Whilst we recognise the need for appropriate mental health facilities, the planning system requires applications to demonstrate that development will not result in unacceptable impacts on neighbouring residents, the rural environment or local infrastructure. In our view, this application does not currently provide sufficient evidence to reach that conclusion. Other than financial incentives for the operators, there appears to be no special or overriding reason that the site could not continue as a C2 mental health facility and operate benignly within the local community.

The application description simply states that the hospital will provide "more secure accommodation for patients". It does not explain the operational implications of this change or demonstrate why the impacts of a C2A use would be acceptable.

In particular, we are concerned that the application fails to adequately address:

1. The operational differences between C2 and C2A use:

A secure residential institution is a materially different planning use. The application does not clearly explain the proposed patient cohort, the level of security, staffing arrangements, operating procedures and how these differ from the existing lawful use.

The application states that the existing use is "...currently in the C2 use class and was used to provide accommodation for elderly patients in need of 24 hour care mainly suffering with dementia". This statement conflicts with the Heritage Statement which reads "Unfortunately, when the C2A planning use class was introduced in 2007 the owners at that time did not seek to re-register the hospital as C2a even though secure accommodation was being provided." The exact use at the time the hospital was closed has not been accurately described in order to properly assess what the previous and intended use are. At the planning meeting to discuss SMD/2014/0542, the senior doctor representing the hospital expressly stated that they did not carry out forensic psychiatry and the only reason for some patient restriction was that they were a danger to themselves

and not to the local community.

The Heritage Statement also states that the “The previous owners had not invested in the business, and the buildings are not fit for purpose. John Munroe Hospital is being brought up to date to provide the facilities that a modern psychiatric hospital should have.” If the buildings are not fit for purpose, the change in use cannot be permitted without specific reference to what changes will need to be made and there are only superficial changes described in the documents and these don’t align with the assertion that the buildings are not fit for purpose. It is also of concern that the hospital is “being” brought up to date, whereas on the planning application the applicant has stated that work or change of use has not already started. No detail has been provided regarding how the previously residential bungalows (not originally part of the hospital, but subsequently acquired) will actually be used – the documents uploaded are blank. These buildings were previously described as being semi-independent living accommodation for step-down patients prior to being discharged.

The application incorrectly states that there are currently only 2 parking spaces and these are for ambulance parking. It is not possible to evaluate from the application what impact on parking the proposed change of use would necessitate. Exactly how many spaces are already provided, and how are these allocated to staff, visitors or emergency vehicles? The proposed change of use would necessarily increase staff numbers overall and per-shift, as the staff to patient ratio has to increase with the additional demands of the patient type and security requirements.

2. Traffic generation and highway impacts:

A secure hospital is likely to require increased staffing, specialist contractors, emergency service attendance, secure transport vehicles and visiting professionals. No detailed assessment has been provided demonstrating that the local highway network can safely accommodate any increase in vehicle movements. Approaches to the hospital are via narrow country lanes and during school drop-offs and collections the road is reduced to a single lane for several hours. The rural nature of the area also generates regular farm vehicle traffic which needs to operate safely. The application incorrectly states the address as Reacliffe road, yet there is neither a boundary nor any access to Reacliffe road.

3. Impact on neighbouring amenity:

The site lies within the Rudyard conservation area and Green Belt, where protecting openness and rural character is a fundamental objective of national planning policy.

There is insufficient assessment of potential impacts arising from increased activity, external lighting, security measures, servicing arrangements, alarms, deliveries and 24-hour operational requirements. It is unclear whether additional fencing, surveillance equipment, lighting, access control measures or other physical security works are required either immediately or in the future to support C2A use. These could materially affect the character of the site but there is no design statement to enable a proper assessment to be made. The site boundary is shared with residential properties and the proposal will necessarily

dramatically affect their peaceful enjoyment of their homes. The need to maintain security up to the main entrance means that vehicles will need to wait at shift handover to be let in, often at unsociable hours and at a nuisance to neighbouring property. This already had become a problem at the site, as previously the gates were always open and visitors and staff would drive right in. The applicant states that there are no trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part of the local landscape character, yet the site is bounded by mature trees that may be threatened in the interests of security and further expose the visibility of the site.

4. Public Right of Way.

The application site affects a public right of way. The proposal does not give sufficient assurance that it will not adversely affect public access, safety or enjoyment of this route.

Due to the considerable inaccuracies, lack of detail nor any overwhelming supporting argument by the applicant that C2A classification is necessary in this particular location, there is no basis in the application or supporting documents as to whether the proposal complies with local and national planning policy. The use of the hospital as a secure unit does not meet any local need or demand for this type of provision, yet the previous use for dementia care did and there is insufficient provision for dementia care in this area. Furthermore, the granting of C2A classification does not limit the subsequent use of the site exclusively as a mental health unit and further changes of use within the spectrum of establishments classified as such could then be made without further planning applications being required. For these reasons, we respectfully request that Staffordshire Moorlands District Council refuses planning permission for the application.