



**GREENWICH HOSPITAL
KEY STAKEHOLDER CONSULTATIVE GROUP**

**Minutes of the First Meeting of the Key Stakeholder Consultative Group
held at Devonport House, Greenwich at 10.00 on Monday 22 January 2007**

PRESENT:	Rt Hon Nick Raynsford MP	Chairman
	Cllr Maureen O'Mara (MOM)	London Borough of Greenwich
	John Chadwick	Greenwich Hospital
	Duncan Wilson	Greenwich Foundation
	Pieter van der Merwe	National Maritime Museum
	Eric Reynolds	Urban Space Management
	Rob Toogood	Greenwich Town Centre Traders Association
	Michael Gebbett	Greenwich Town Centre Traders Association
	Steve Nelson	Chamber of Commerce
	Sir Bob Scott	Greenwich Peninsula Partnership
	Joe Szarowicz	Town Centre Residents
	Ray Smith	The Greenwich Society
	Jane Rowson (Sec)	Secretary
IN ATTENDANCE:	John Gamp	Greenwich Hospital
	Edward Dolby	Greenwich Hospital
	Martin Sands	Greenwich Hospital
	Andrew Sell (AS)	Nelson Bakewell
	David Gardiner	Nelson Bakewell
	Alex Kabalin	Nelson Bakewell
	David Selby (DS)	Hopkins Architects Limited .
	Ken Hood	Hopkins Architects Limited .
	Richard Sutcliffe-Smith	Communiqué
	David McFarlane	Communiqué

1. Apologies

Apologies for absence were received from Mr Tim Barnes of The Greenwich Society, Mr Ray Smith attended in his place; and from Mr Roy Clare of The National Maritime Museum, Mr Pieter van der Merwe attended in his place.

ITEM 1 – INTRODUCTION AND OPENING REMARKS

2. Chairman's Welcome

The Chairman welcomed the delegates of the Key Stakeholder Consultative Group (KSCG) and other attendees observing the meeting.

The Chairman addressed the purpose of the Group and the key objectives, namely to support the interests of Greenwich Town Centre (GTC), provide a framework for discussion between all interested parties and agree a way forward for Greenwich Hospital's (GH) core properties in Greenwich that met both the immediate priorities of GH and the interests of GTC.

The Chairman emphasised that GH, as a charity whose sole trustee was the Secretary of State for Defence, had obtained Minister's agreement to proceed with this phase of Project Definition for the Greenwich Estate. The terms of reference and remit for discussion had been approved by the Minister. The Chairman accepted full responsibility for the choice of delegates in the KSCG and felt that it was a sensible sized group with a range of views, although it may be necessary in due course to invite the views of others.

The Chairman set the context within which the KSCG meetings would be held, that was within a framework of trust and openness. The Chairman asked that this context be honoured outside of group meetings and that, if spoken about, meetings should be discussed in a constructive manner.

The Chairman stressed that if the KSCG decided that the meetings were not constructive in providing a suitable way forward then he would recommend to the Minister that the Group be disbanded.

The Chairman informed the Group that he intended to avoid an excessive number of meetings and an unduly long process. Meetings were likely to extend for a number of months rather than years.

ITEM 2 – GREENWICH HOSPITAL IN GREENWICH

3. John Chadwick, Director of Greenwich Hospital gave his presentation. The following key topics were covered:

- a. Greenwich Hospital as a charity and its charitable objectives and beneficiaries
- b. Strategic change within the Hospital
- c. The core estate in Greenwich and the Hospital's stewardship
- d. The history of Greenwich Market and the Market today

- e. Greenwich Hospital's commitments

ITEM 3 – QUESTIONS AND INITIAL DISCUSSION

- 4. The following points were discussed following the presentation:
 - a. It was commented that Greenwich Planning Department was not represented at the meeting. The Group was informed that it was felt this would not be appropriate as its role as a Planning Authority could be compromised by being involved in the discussions that might influence the choice scheme that would in due course require consent.
 - b. It was stressed that GH did not at present have any plans for the future of GTC. It merely recognised the fact that it needed to invest in its core properties in Greenwich and hoped that a plan might emerge from these meetings. Hopkins Architects Limited (HAL) had been appointed to provide a better understanding of the Hospital's properties and what was going on in and around Greenwich.
 - c. It was commented that in order for the Group to be helpful in discussions the members would need to know what GH's income targets were, what GH was prepared to spend on any regeneration project and what brief had been given to HAL. The Group was informed that GH wished at the least to maintain the current level of income, but in the brief to HAL there was no requirement to generate any given amount of additional income. It would consider the matter of funding following a full investment appraisal and would not necessarily fund the whole scheme on its own.
 - d. It has been noticed that there was currently a high number of vacant units in the Island site. The Group was informed that GH had recently appointed new property agents Nelson Bakewell and that they were working on re-letting these properties.
 - e. The relevance of the Olympics to project definition was questioned. It was commented that it would be preferable to have some plans for improvement in place as it was likely that the Council and the Olympic Delivery Authority would want to see something. Furthermore, it would not be desirable if GTC was part way through a project when the Olympics took place.

ITEM 4 – GREENWICH – THE CURRENT ISSUES

- 5. Andrew Sell, Director of Investment Consulting at Nelson Bakewell gave his presentation. The following key points were made and topics covered:
 - a. Current developments, competitors, socio-demographic patterns and spending power both within Greenwich and the wider setting of Canary Wharf and the Peninsula.
 - b. The current trading patterns of the retail units and the market stalls, the character and quality of the environment in Greenwich Market.
 - c. Changes already put in place by Nelson Bakewell, including a greater

presence in Greenwich and short term improvements.

- d. It was the right time to do something that identified changes for the next 50 years, before opportunities were lost to competitors
- e. In any regeneration project it was essential to minimise disturbance to retailers during the implementation phase.

ITEM 5 – GREENWICH – THE ISSUES FOR THE FUTURE

6. David Selby, Director at Hopkins Architects Limited gave his presentation. The following key points were made:
 - a. Highlighted areas of future opportunity for improvement in Greenwich.
 - b. Identified the listed buildings in Greenwich and the 1950's rebuilds and roof structure in the market area, which were not listed. He identified that the latter, apart from some notable exceptions where individual retailers had invested in their units, were poor architecturally and an improvement to these could improve the overall environment of the market.
 - c. Improvements could be made to the currently inadequate stall storage system, the unsightly service areas and the current issues relating to traffic around the Island Site.
 - d. The Group was asked to consider what the market traditions were, what they would like to see preserved, how the area could be improved and how it compared to other World Heritage Sites. Was the current Island Site worthy of World Heritage Site status?

ITEM 6 – DISCUSSION

7. It was clarified that in relation to the market stall trading patterns, the lease to Urban Space Management (USM) limited the market operation to four days a week.
8. It was commented that the market stalls attracted a greater footfall to GTC. On weekends spending power in the area was improved by virtue of the market, however, on mid-week market days the spending power was spread too thinly between the market stalls and the market retailers. Therefore the nature of the market would need to change if it were to operate on additional mid-week days. In addition the market needed to be better advertised. At present it was only USM that spent money on marketing the market.
9. The Group was informed that the issue of traffic in GTC had been considered in the past. A scheme had been devised in 1995-96 that aimed to improve connectivity for pedestrians between the Island Site, the Old Royal Naval College, the National Maritime Museum and the Royal Observatory by putting pedestrian crossings at specific points.
10. It was agreed that traffic was still an issue, particularly upon arrival in Greenwich from the Pier, the DLR or Mainline Rail as people face a wall of traffic along Greenwich Church Street, College Approach, King William Walk and Nelson Road. It was pointed out that the suggestion of any road closures

in the area would attract opposition from neighbouring boroughs. It was suggested that a traffic engineer from the Council be invited to the next KSCG meeting to present on the issues and proposals currently being considered for the area. Councillor Maureen O'Mara agreed to organise a presentation.

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11. It was agreed that to do nothing was not an option and that Greenwich needed to be enhanced as an attraction, particularly given the surrounding competitors. It was agreed that in order to better understand the unique selling points of Greenwich and the nature of its competitors a scoping exercise should be conducted. This should identify surrounding areas of development including the Peninsula, Canary Wharf and East Greenwich, and assess what impact they might have on GTC. Andrew Sell agreed to prepare a report for discussion at the next KSCG meeting.
12. It was agreed that it would be positive to make some improvements to the area but in a way that minimised disruption to existing retailers and the public. This could be done through phasing the implementation of a scheme and possibly temporarily relocating retailers, however these were issues that required further professional advice from the Hospital's property agents. Andrew Sell would prepare a report on the options/solutions for discussion at the next KSCG meeting.
13. It was proposed that retailers start meeting regularly with members of the Nelson Bakewell team and USM to begin implementing short term improvements such as the tidying up of the service areas. Andrew Sell to organise the first meeting.
14. It was suggested that in order to narrow down the agenda for discussion it would be helpful if HAL could prepare a report that considered three to four options for the Island Site, ranging from the minor to the more radical options. David Selby to prepare for presentation at the next KSCG meeting.

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ITEM 7 – THE WAY FORWARD

15. The Chairman summarised the action points and asked that they be addressed for discussion at the next KSCG meeting.
16. The Chairman informed the group that John Chadwick would be retiring as Director of Greenwich Hospital on 31 January 2007. He thanked Mr Chadwick for his hard work and said how grateful he was for the progress that Mr Chadwick had made in establishing a way forward for GTC. He wished Mr Chadwick a long and happy retirement.
17. The Chairman introduced Martin Sands as John Chadwick's successor. Mr Sands thanked the Chairman and commented that he was looking forward to working with the Group in the coming months.

ITEM 8 – DATE OF NEXT MEETING

The Secretary would establish when the action points could be completed and then contact the delegates with two or three suitable meeting dates. The meeting would be held on the day that the most delegates were able to attend.

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