



Proposed 54No Bed Low Secure Unit,
Land off Mold Road, Gwersyllt,
Wrexham LL11 4AF

DESIGN & ACCESS STATEMENT

PREPARED FOR A HYBRID PLANNING APPLICATION
(INCLUDES FULL & OUTLINE APPLICATIONS)

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1.0 INTRODUCTION

1.1 Generally

This Design & Access Statement has been compiled to accompany a Full Planning Application on behalf of ASC Realestate Investments Ltd (the applicant & site owner) for a 54 Bed Low Secure Unit on land off Mold Road, Gwersyllt, Wrexham.

1.2 The Site

The development application site of 2.58 Hectares (Red line plot, including access road) is located to the west of Mold Road on disused industrial land.

The site was a mine working prior to more recent uses, and is now unoccupied with the exception of a residential bungalow. Access to the site is via an existing access road which leads to the Westminster Industrial Estate and then on to the site. An additional portion of site is under the ownership of the applicant (edged blue) and is subject to a separate outline application for housing.



KEY

- Site boundary
(Site Area Approx 2.580 Hectares)
- Extent of Full Planning Application
(Approx 1.675 Hectares)
- Extent of Outline Planning Application
(Approx 0.905 Hectares)

Fig 1: Site Location Plan [NTS] indicating Full & Outline Planning application extents

1.3 Site Context

The site relatively well concealed from its surroundings, due to the following factors:

- | | |
|--------------|--|
| To the South | The site is at the end of a short and relatively narrow road off Mold Road, with largely commercial units sharing the access. Other uses include a social club and 4No dwellings. |
| To the West | A school and leisure centre occupy the land to the west, separated from the site by a public footpath and boundary fencing which is located on top of a continuous bund with heavy shrub and tree planting. In addition, the levels of the site to the west and north west elevations are substantially lower, further concealing the buildings on the site. |

To the North Open amenity playing fields are located to the north, again with a raised bund along the site boundary, with heavy shrub planting acting as a screen. The levels within the site are considerably lower at the north west end, and even out as the northern boundary progresses eastward.

To the East The front part of the site, near the entrance point, is bounded by the social club and small dwelling to the rear. The main body of the site is bounded by the long back garden of the bungalow called Hillcrest, which extends along the entire length of the boundary. The railway to the east cuts off this small collection of buildings from the main Mold Road artery into Wrexham.

The short cul-de-sac nature of the site access point, with a relatively small collection of largely commercial buildings, combined with the visually screening afforded by the banked and landscaped boundaries, as well as the railway cutting, create a very secluded site.



Fig 2: View towards site access road off Mold Road [Mold Road runs left to right]



Fig 3: View towards site access road off Mold Road [viewed from south east]



Fig 4: View of site access road [viewed from Mold Road junction]

1.4 Site Use and Condition

The site is now disused, and in a poor condition, in addition to which the previous uses of the land have introduced some level of contamination, which will be addressed with a comprehensive remediation package, as part of the new development. See Site Photograph sheets submitted as part of the application submission for information.

1.5 General Description of Proposals

The site development proposals are split into 2 No Planning Applications, forming a hybrid application as follows:

Low Secure Hospital	Full Planning application, incorporating access road improvements
Housing	Outline Planning application, with access via completed Low Secure Hospital site access road

1.6 Low Secure Unit Development Description – Full Planning Application

The Unit is intended to meet a need identified by the Commissioners for Wales, and this site is considered to be in a good location, with good access links to the town, and other routes.

The Unit would provide a home for 40 No residents, accommodated in a modern purpose built environment, in a landscaped setting, conducive to wellbeing and recovery. In addition, the unit will have a 14 bed assessment unit, to cater for those in crisis, who can be brought in for assessment and recovery.

The proposed accommodation comprises:

a. ATU – Assessment Treatment Unit

Exclusively for adults aged 18 and over who have experienced a crisis/complex needs. The service will provide a combined programme of enhanced therapeutic and clinical support which incorporates flexible and creative care pathway solutions for individuals who have likely experienced varying degrees of difficulty or crisis in previous care and support settings or for those who may have suffered a crisis at home. The ATU comprises 14 individual private resident bedrooms arranged as 2No 7 bed units, with each wing containing:

- 7No en-suite bedrooms with private lounges
- 1No communal lounge
- 1No assisted bathroom
- 1No nurse station & clinic
- Private gardens for the ground floor bedrooms & communal garden for first floor

b. Low Secure Unit

Provided for adults aged 18 and over. This service will provide care and treatment for people with mental health problems. Patients admitted to this service will be detained under one of the sections of The Mental Health Act 1983, as amended in 2007. The unit comprises 40No individual resident bedrooms with en-suites, arranged as 4No separate 10 bed units, each accessed via a secure control lobby, and comprising:

- 10No en-suite bedrooms
- 4No communal lounges
- 1No assisted bathroom
- 1No nurse station & clinic
- Private gardens for the ground floor bedrooms & communal garden for first floor

In addition, each unit is broken down into 3No sub-areas, allowing residents to be accommodated in smaller separated groups, each with a dedicated day space.

c. Amenity Accommodation

Shared hospital amenity and activity accommodation is provided outside the residential units, but still within the secure hospital site, as follows:

- Central landscaped courtyard garden
- Café and computer area
- Sports Hall
- Gym
- Activity Rooms with dedicated external gardens (some with access to either a green house or horticulture space)

d. Staff/Service Accommodation

Located off the main entrance and outside of the individual resident and assessment unit wings, all staff and service accommodation is located.

1.7 Housing Development Description – Outline Planning Application

The outline residential development site includes details of access, with all other matters access reserved, and comprises:

- a. 9No detached & semi-detached 3 - 4 bed houses
- b. 27No 1 - 2 bed apartments

The housing is intended for open market sale, with a 25% provision of key worker housing, totalling 9 No units.

2.0 PLANNING

2.1 Planning History

An application for Outline Planning Permission for a residential development on the site was granted on 10.03.2016 (Ref: P/2014/0931). The application was for up to 65No dwellings with all detailed matters reserved expect access.

2.2 Pre-Application Advice (Ref: ENQ/2017/0076)

An application for pre-application advice was made in April 2017 for a mixed use development comprising a Low Secure Unit and Housing. A formal written response was received on 18.05.2017 confirming no objection in principle to the development of the site for the proposed uses.

2.3 Relevant Planning Policy

The written pre-application response included the following relevant planning policy:

- a. Specifically in Relation to the Proposed Uses:
 - The low secure residential accommodation/unit proposals accord with applicable policy H11
 - General housing on the site is “acceptable in principle and generally accord with policy H2 of the Wrexham Unitary Development Plan”

b. Planning Policies that Apply:

- Planning Policy Wales
- Technical Advice Note 5: Nature Conservation and Planning
- Technical Advice Note 11: Noise
- Technical Advice Note 12: Design
- Technical Advice Note 18: Transport

c. Wrexham Unitary Development Plan Policies:

- GDP1: Development Objectives
- GDP2: Capacity of Infrastructure and Community Facilities
- EC4: Hedgerows, Trees and Woodland
- EC6: Biodiversity Conservation
- H2: Residential Development (of Unannotated Land) within Settlements
- H7: Affordable Housing
- H11 Residential and Nursing Homes
- CLF5: Open Space Requirements from new Residential Developments
- T8: Parking

d. Local Planning Guidance Notes that Apply:

- Local Planning Guidance Note 10: Public Open Space on New Housing Developments
- Local Planning Guidance Note 16: Parking
- Local Planning Guidance Note 27: Developer Contributions to Schools
- Local Planning Guidance Note 28: Affordable Housing

e. Highways:

Reference was made to a previous Planning Application (Ref: P/2014/0931), for housing, confirming that the Highways advice provided at that time would also be applicable in this case, the main requirements being:

- Improvement of the road to adoption standards
- Improvement of the footways for safe pedestrian access
- Improved lighting
- Some yellow lining to prevent parking in bend in road
- No concerns regarding the actual capacity of the junction onto Mold Road

The Planning application will generate a new application specific consultation process with Highways.

2.4 Pre-Application Consultations

In accordance with Part 1A of the Town and Country Planning (Development Management Procedure) (Wales) (Amendment) Order 2016, the development proposals have been publicised and consultation has also taken place with community and specialist consultees.

A separate Pre-Application Consultation Report, confirming the consultation process and responses received, has also been submitted as part of the Planning Application.

3.0 DESIGN STATEMENT – LOW SECURE UNIT

3.1 The Brief and Scheme Design Development

Whilst the general accommodation requirements were established from the outset, various feasibility studies were undertaken to establish:

- The optimum land take for the Secure Unit
- The creation of an adequately sized and proportioned adjacent development site
- The best use of the existing site topography to benefit the scheme
- The optimal orientation of the building to achieve the above, as well as maximum benefit of the sun path and views
- Create the right balance between brief, layout and development cost



Fig 5: Early feasibility layout exploring single storey secure unit on eastern portion of site



Fig 6: Subsequent feasibility adopting 2 storey design to reduce land take, with LSU on left hand side of site, with central spine circulation.

This approach discounted due to:

- Excessive land take resulting in unviable residual development plot
- Lack of central landscaped amenity areas
- North facing accommodation would lack daylight and sunlight, which would not promote wellbeing



Fig 8: Layout feasibility introducing a central amenity garden, but still excessive in land take, and circulation distances

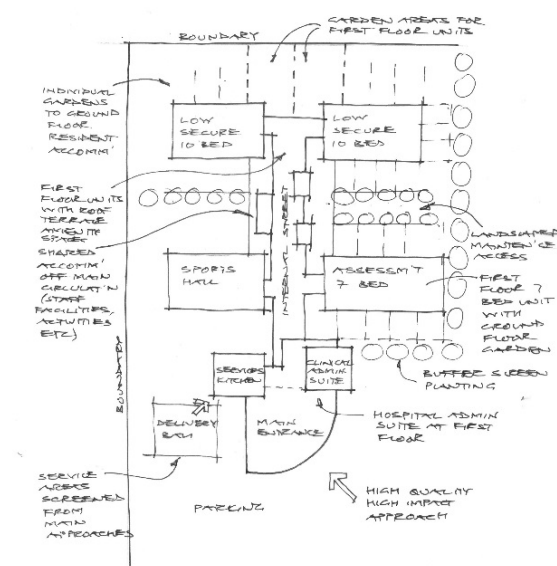


Fig 7: Block diagram study of accommodation relationships

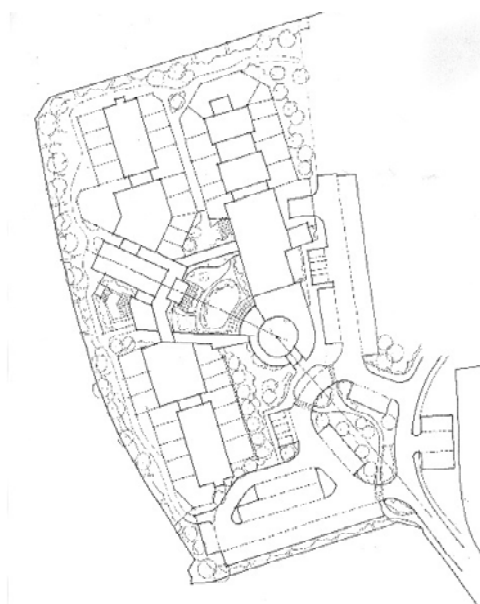


Fig 9: Development sketch plan establishing principles of final design

3.2 Site Strategy

- a. Design development led to the location of The Low Secure Unit Hospital in the north west corner of the site, to achieve the following objectives:
- The resident accommodation, which is screened with 3m high security fencing, is well screened from view when entering the site. Screening is achieved by natural visual screening from high perimeter banking, depressed ground levels and heavy shrub and tree planting along the boundary
 - The main entrance is immediately in view on entering the site, and acts as a visual screen to residential accommodation behind
 - The extent of low secure resident fencing looking onto the adjacent housing plot is minimised, and controlled by extensive buffer planting screening
 - The main Low Secure Unit parking is located in front of the main entrance, on approach into the site, keeping it away from the residential development



Fig 10: Block plan study illustrating key features of final design, including:

- North south axis of accommodation wings
 - Central courtyard
 - Main entrance located to address approach into the site, also acting as a screen to accommodation behind
- b. The Main resident accommodation blocks are orientated on a north-south axis, to allow all resident accommodation have either east or west aspects, with the benefit of good daylighting and some direct sunshine.
- c. The housing site is located in the eastern portion of the site, so that it backs onto existing residential properties, providing those dwellings with additional screening from the Low Secure Unit.

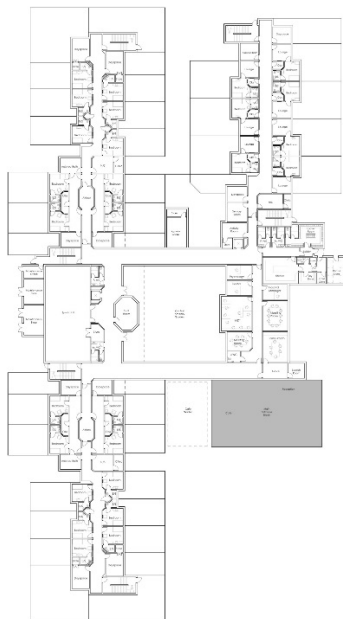


Fig 11: Near final ground floor plan establishing principles of the final design



Fig 12: Final proposed site layout

3.3 Design Principals – Layout and Orientation

The Low Secure Unit layout is designed to provide the following:

- a. An uplifting environment, which is light and airy, with a high standard of accommodation, conducive to recovery
- b. A positive and inviting view of the building when entering the site
- c. A soft landscaped setting, comprising:
 - A soft landscaped central amenity garden, linked to other amenity spaces
 - A variety of external resident amenity areas, including exercise areas, horticultural garden and a green house
 - High quality perimeter planting, including trees, to provide a pleasant green context, which additionally screens the facility from views into the site
- d. Ground floor resident accommodation benefit from individual fenced amenity gardens
- e. All ground floor resident day space areas open out onto dedicated fenced gardens
- f. Accommodation arranged generally on two floors, with single storey elements & links
- g. Security is to meet the national standards for Low Secure Hospitals, which involves:
 - All resident areas being protected by a 3m high security fence, including separating fences between adjacent garden areas
 - A secure air lock system for access into the hospital ensures residents are not able to leave the facility unless formally discharged, or taken out in accordance with an approved process

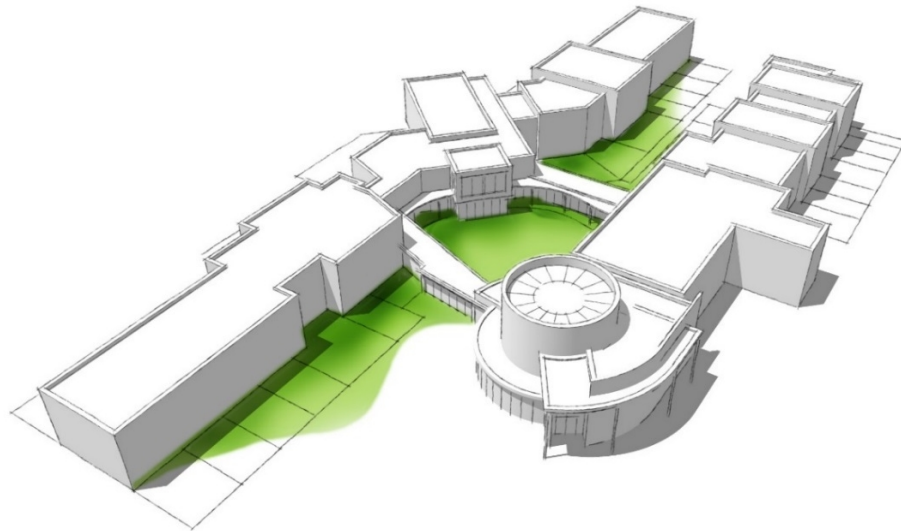


Fig 13: Illustrative 3D massing study at development stage, to demonstrate general arrangement of Low Secure Unit, with green corridor (viewed towards main entrance)



Fig 14: Development study plan of soft landscaped central amenity garden

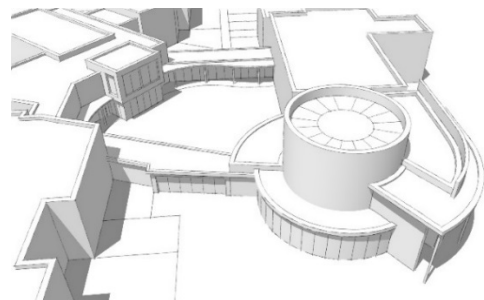


Fig 15: Massing study, looking into the central amenity garden. Two storey accommodation blocks on both sides linked with single storey glazed corridors

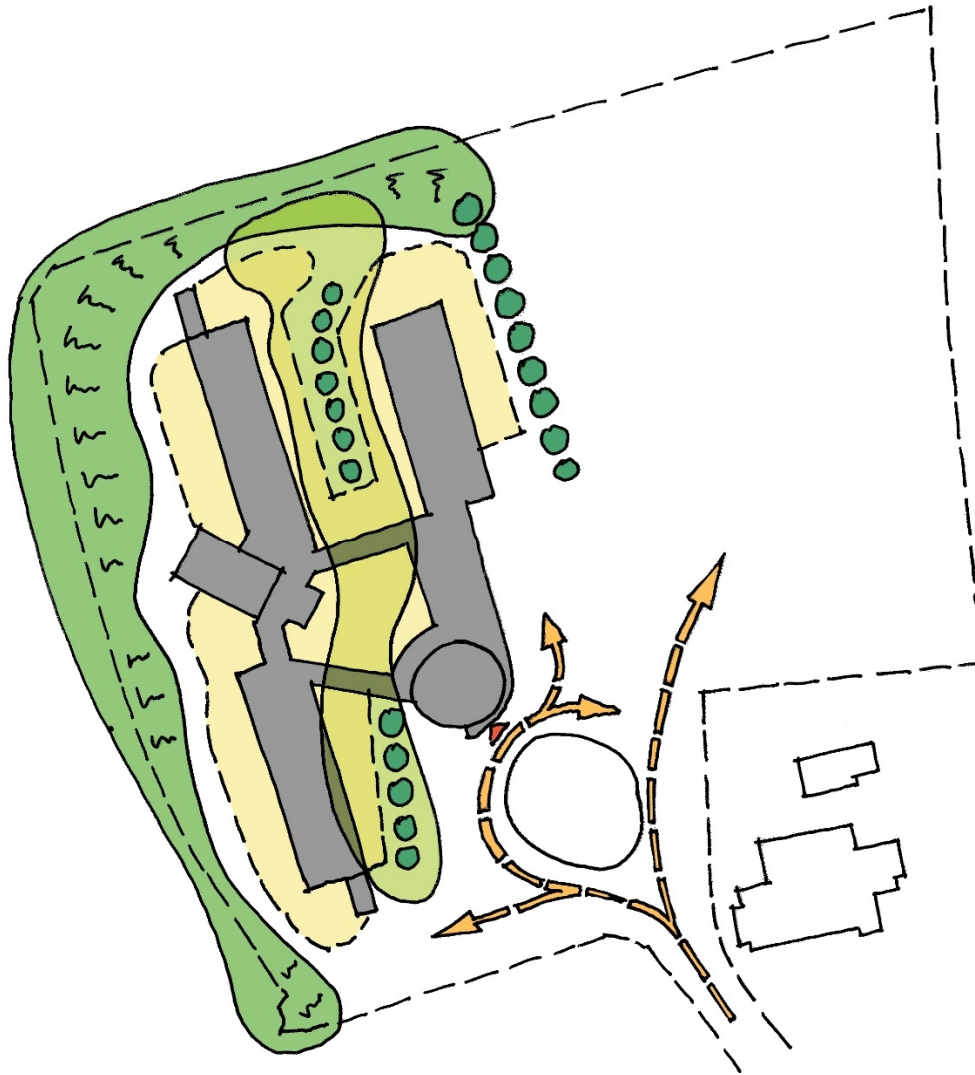
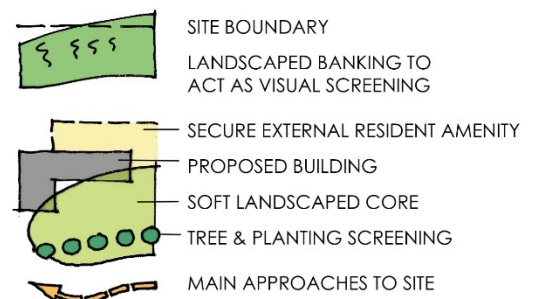


Fig 16: Site landscaping strategy

The building design is intended to provide:

KEY

- A visibly strong protective outer shell, when approaching the building
- A central soft landscaped spine, the focus of which is the amenity courtyard garden, with south facing solar shading canopy
- The courtyard garden introduces an inviting 'surprise' soft centre to the scheme
- The soft landscaped centre acts as a focal feature to the whole hospital, assisting orientation and reinforcing links with nature, sky, light and sunshine, thereby promoting wellbeing and recovery
- Link corridors are largely glazed, to maximise space, light and views, and limit the sense of enclosure and light
- Accommodation facing west benefits from existing landscaped banking, with further planting reinforcement



3.4 Design Principals – Massing

The Low Secure Unit layout is designed as 2 No two storey accommodation blocks, providing efficiencies in stacked accommodation, linked with 2 No single storey glazed corridors to form a central courtyard, which benefits from maximised sky and daylight, as well as a southern aspect and associated solar gain.

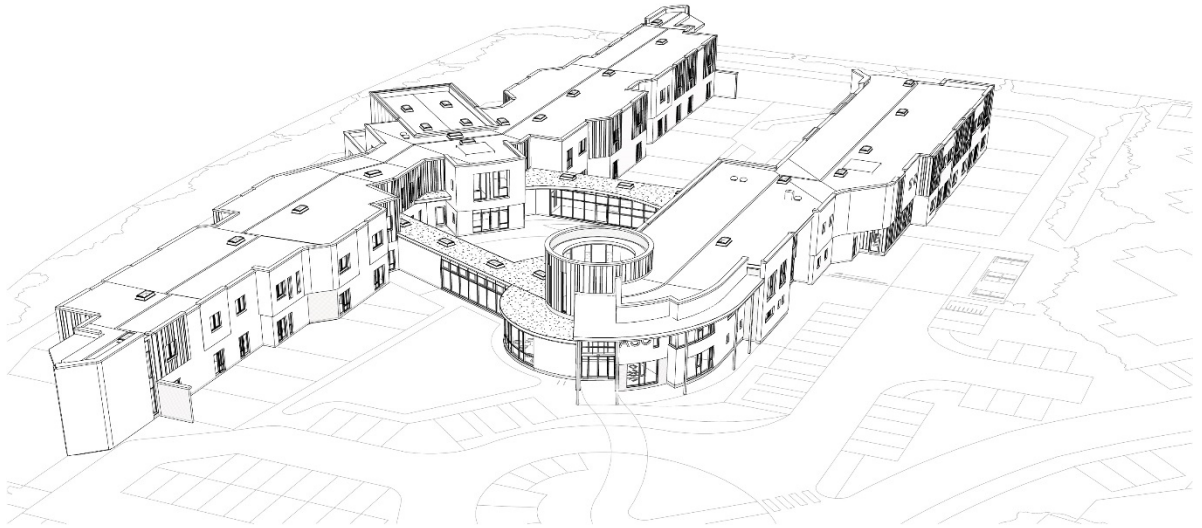


Fig 17: Building massing – Looking north at main entrance



Fig 18: Early perspective sketch of main entrance

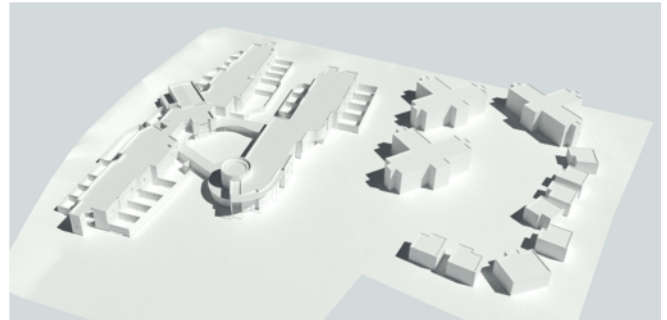


Fig 19: Massing study of whole site, used for analysing solar path and daylighting to accommodation and resident amenity gardens



Fig 20: Building massing – Looking north east from boundary

The arrangement of internal accommodation, and therefore the sizes and proportions of blocks, was very much dictated by complex internal accommodation requirements and interlinking relationships, such as:

- Specified room sizes
- Room arrangements, including door positions, designed to minimise risk of ligature and self harm, as well as maximised visual observation
- Corridors with minimal recesses where resident could hide, and not be observed
- Nurse's station positioned to maximise observation from central location
- Ability to split units into smaller bedroom groupings, to allow staff to better manage risks, and optimise accommodation for resident needs
- Locate the main access control lobby so as to provide direct access into all separate parts, and avoiding residents having to pass through other accommodation to access facilities

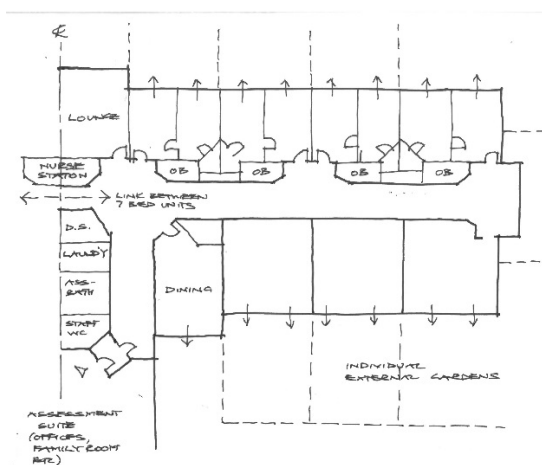


Fig 21: Layout study for 7 bed Assessment Unit, with individual resident suites, comprising lounge, bedroom and en-suite
Observation rooms looking into all resident rooms allow for maximum staff support

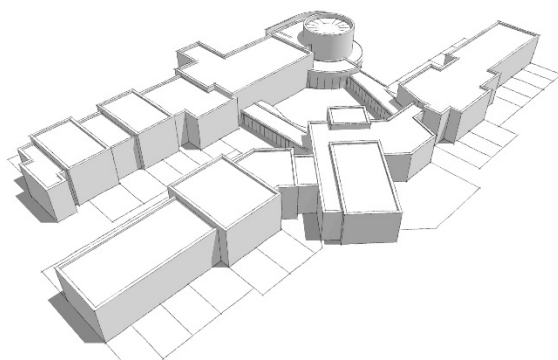


Fig 22: Massing study looking at how complex accommodation blocks could be rationalised and broken down in scale

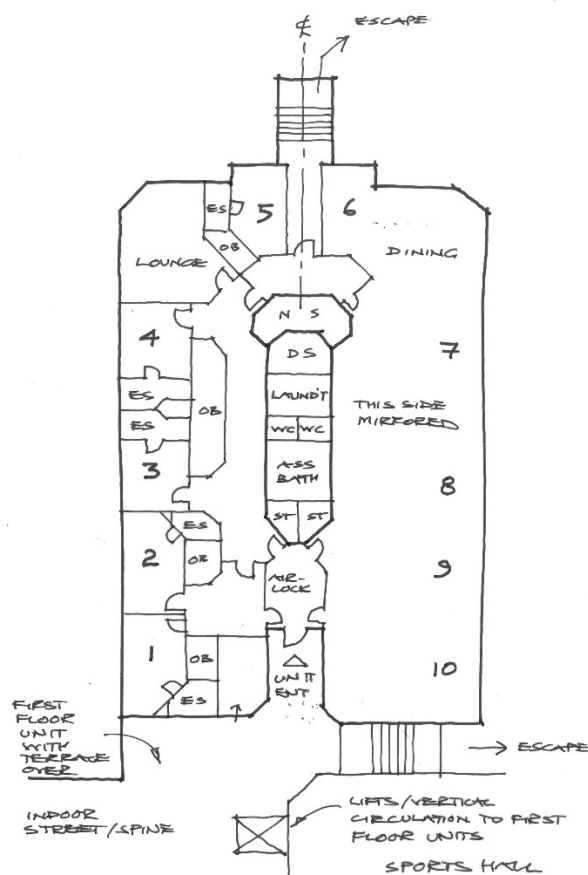


Fig 23: Layout study for 10 bed Low secure Unit, including provision for:

- Separation of residents into smaller groupings of 2 or 4 beds
- Centrally located nurse's station with visual control of corridors
- Observation rooms to facilitate staff support for most vulnerable residents
- Possible resident access to first floor terrace accommodation, later ruled out due to safety concerns

3.5 Design Principals – Elevational Treatment and Materials

The elevational treatment is strongly resident needs led, in that the amount of external amenity space is maximised, resulting in a need to make ground floor materials robust, and safe in terms of limiting risk of self harm (such as sharp corners) and climb ability.

The security fencing required wherever residents have access to external areas, is a minimum of 3m high. This creates a natural break between low level robust materials, and introduces a strong horizontal emphasis in the building's elevational treatment. The upper floor elevations have therefore been used to introduce more decorative and potentially vulnerable materials, to break up the mass, and add interest.

The practical design approach has therefore been as follows:

In resident areas:

- Lower levels all fair faced brick, with no external right angled corners
- Upper levels in brick with relief in rendered and variegated cladding panels, to break down scale
- Cladding in various colours of green, possibly with relief etching or design, to represent abstract trees
- All windows accessible to residents from either inside or outside, to be secure sliding anti ligature design



Fig 24: Materials study, viewed across central landscaped courtyard, illustrating:

- 3m ground zone treatment in brick and glass
- First floor broken up with various contrasting materials
- Central block, addressing the courtyard, defined as strongly articulated object in space, with rendered finish
- Back drop cladding in variated green cladding panels, to emphasise green heart of the scheme, adding references to natural landscaping where resident safety precludes significant planting

In non-resident areas:

- Render finish can extend down to ground level, to allow some verticality to be introduced into the scheme (counteract strong horizontal split defined by 3m high security zone from ground level)
-



Fig 25: Materials study, looking at the main entrance, illustrating:

- Render used for full height, providing softer, natural organic forms which introduce a softness to the building
- Entrance canopy signals the main entrance, and a sense of shelter
- High main entrance foyer drum introduces green inner scheme lining
- Back drop cladding in variated green cladding panels beyond

3.6 Design Principals – Security

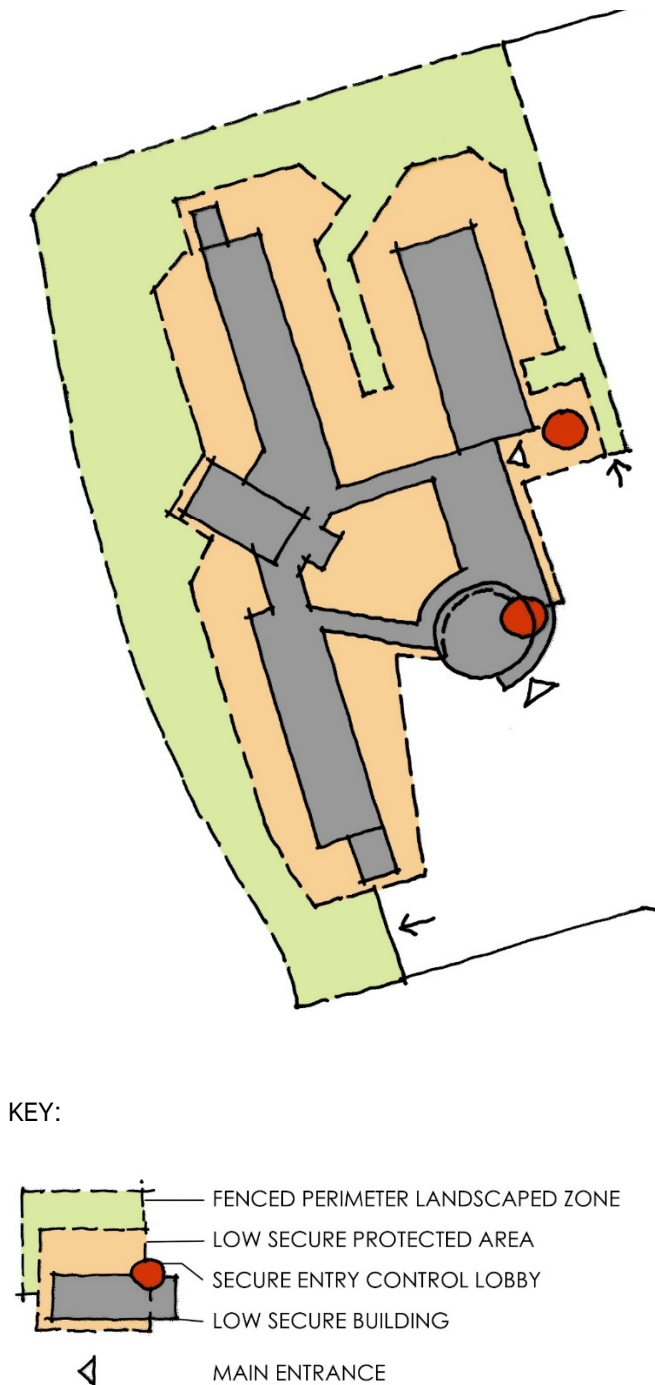


Fig 26: Security Strategy, illustrating dual air-lock entry points

The building is designed to meet comply with all of the security standards relating to Low Secure Hospitals, which includes security to prevent escape, as well as design features to keep residents secure in terms of health and wellbeing, which also involves managing and minimising the risk of self harm.

The security strategy of the building includes:

- 1 No main personnel entrance, with 'air-lock' security control lobby through which all residents, staff and visitors have to pass when entering and leaving the building
- A second external entrance for deliveries and services, comprising an external secure compound, which works on the 'air-lock' principal. This allows servicing vehicles to back into a secure service area, where the building doors can only be opened once the vehicular access gate is locked down
- The 6No individual residential accommodation units are accessed by further dedicated secure 'air-lock' lobby, ensuring that residents are contained within their units.
- Access to resident facilities outside accommodation units, still within the 'secure' hospital environment, is on a risk assessed basis
- The 4 No Low Secure accommodation units have further internal subdivisions, to allow residents to be segregated into smaller groups, to best assist harmony and recovery.
- External amenity areas are protected by 3m high anti-climb security fencing
- A further enclosed maintenance and landscaping perimeter zone wraps round the secure unit from the south west to the east, providing a visual screen to the development.

4.0 DESIGN STATEMENT – HOUSING (See separate Outline Application)

4.1 Generally

The housing development site has been designed in conjunction with the Low Secure Unit, with the following design aims:

- a. To locate it adjacent to the existing houses, thereby making it part of a larger residential community
- b. To create a generous soft landscaped buffer between the new dwellings and Low Secure unit, particularly the secure fenced areas
- c. To maintain a visually appealing route into the site, achieved by passing the main entrance of the Low secure Unit

4.2 Layout and Scale

2 storey houses are arranged around the perimeter of the site, respecting the scale of adjacent dwellings. In addition generous perimeter shrub and tree planting will create a green perimeter which will also provide visual interface screening.

The three storey apartment blocks are located in the centre and northern end of the site, where larger scale sits more readily adjacent to the Low Secure Unit, with large interface distances to smaller scale houses.

5.0 ACCESS STATEMENT

5.1 General Design Principles: Entire Scheme (Full & Outline Planning Applications)

- a. The existing levels across the site are relatively flat with a fall of approx. 1:70 from north to south and 1:34 east to west. Therefore, level access will be provided within all buildings and to the external approaches to entrances.
- b. The entire scheme will provide access for disabled people in consideration of specific legislation, most specifically The Disability Discrimination Act, requiring general access to the built environment.
- c. Access from the site boundary and access into the building has been designed to comply with BS.8300 (Code of Practice for the Design of Buildings and their Approaches to meet the needs of Disabled People) and Part M of the Building Regulations Approved Documents, and as such is designed to be accessible throughout for residents and visitors.

5.2 Access Road Improvements

The existing access road is to be improved, to provide additional footpaths, to facilitate safe pedestrian access into the site. The site itself incorporates separated pedestrian footpaths, together with pedestrian priority shared surfaces closer to buildings.

5.3 Access & Servicing: Low Secure Unit [Full Planning Application]

- a. **Vehicular Access:** The existing site access from Mold Road has been utilised although the access road to the site has been improved with the road width adjusted slightly to incorporate appropriate footpath access.
- b. **Car Parking:**
 - 66 No car parking spaces for staff and visitors
 - Approximately 5 No disabled spaces (included in overall number)

- c. Deliveries & Refuse: Deliveries can be made from within the Low Secure Unit site, where a vehicle turning head is provided clear of general parking areas. The refuse store is located within a secure service compound accessed directly from the car park.
- d. Pedestrian Route: Improvements made to the access from Mold Road with 2m wide footpaths provided to at least one side of the carriageway.
- e. Cycle Provision: Covered cycle parking is provided for both visitors and staff, with additional spaces provided immediately at the main entrance, with natural supervision from the building. 4No motor cycle spaces are also provided within the main car park.

5.4 Access & Servicing: Housing [Outline Planning Application]

- a. Vehicular Access: Access into the housing site is provided off the main access road from Mold Road which is subject to improvement under the full planning application.
- b. Car Parking:
 - 2 spaces for houses
 - 1.5 spaces for apartments
- c. Refuse: Turning for refuse trucks is accommodated within the housing site. Apartment blocks benefit from communal refuse stores accessed from the road and in close proximity to apartment main entrance doors.
- d. Pedestrian Route: A 2m wide footpath continues alongside the access road into the housing site providing a safe pedestrian route from Mold Road.

6.0 CONCLUSIONS & SUMMARY

- 6.1 The level of care required for the needs of the residents has been addressed in the design of the Low Secure Unit, which will also require a relatively high level of staffing, providing valuable employment opportunities for the local area. The Low Secure Unit will address the shortage of this type of accommodation, while the housing will offer residential opportunities for the local community, together with key worker accommodation.
- 6.2 The level of traffic generated by the scheme is relatively modest with peak arrival & departure times to the Low Secure site occurring outside of rush hour, with peak times being at shift change over at 8am and 8 pm. Parking, turning and servicing of the scheme been designed within the curtilage of the site to ensure that the roadways are unaffected. There are relatively few service deliveries to the site, with laundry services in the Low Secure Unit handled on-site in what is a closed loop system.
- 6.3 The entire site strategy has been designed to address all of the site opportunities and constraints whilst maximising the development potential of the. The Low Secure Unit has been carefully positioned to in the north west corner of the site, with the main entrance addressing the entry point into the site. In turn, the housing has been positioned to the back on to existing residential properties to the east.
- 6.4 The buildings have been designed to sit well within landscaped gardens and to maximise the existing levels and generous green buffers the site has to offer, creating a peaceful environment for residents and reducing the overall impact on neighbouring sites.

REVISION NOTES

02	22.11.2017	-	Fig 1 updated to show red line around whole site, including extents of Full and Outline applications
		-	Adjacent text revised to state correct overall application area
03	12.12.2017	-	Appendix A added

APPENDIX A

Low Secure Unit Operation & Security Measures

1.0 OPERATION

- 1.1 The Unit will be operated and funded by a private company with ongoing service fees paid by the NHS.
- 1.2 Local NHS health boards will refer residents to the unit from across North Wales and areas covered by the Health Inspectorate Wales (HIW).
- 1.3 Individuals admitted to the low secure unit will be assessed on a highly intensive and personalised basis by a dedicated team of clinical professionals. The low secure unit is an intensively staffed environment which provides services that work to ensure that individual's needs are assessed and treated effectively with the aim to manage risks posed to reduce further offending/challenging behaviour and support recovery throughout the person's stay.

The multi-disciplinary clinical team includes clinical psychologists and assistants, forensic psychologists, consultant psychiatrists, nurses and support workers that can provide inputs and treatment around the following elements:

- Individually tailored recovery and rehabilitation pathways keeping length of stay to a minimum.
- Robust risk assessment and management
- Treatment delivered following My Shared Pathway
- Positive risk taking
- Strengths based approach
- Positive behaviour management strategies
- Care planned psychological therapies
- Access to at least 30 hours of meaningful activity 7 days a week
- Developing independent living skills and community engagement
- A strong emphasis on safeguarding
- Robust clinical governance
- Access to independent advocacy
- Strong multiagency and family partnerships to ensure a holistic package of care and pathway

Ultimately, the low secure services aim to deliver the following outcomes:

- Improvements in mental health and patient symptoms
- Effective management of behaviour
- Reduction of risk
- Preparation for successful step down
- Good physical health
- Improved self-esteem and self-worth
- Social inclusion

2.0 SECURITY

- 2.1 The physical building has been carefully designed to ensure the external envelope is secure (i.e. robust walls and fencing etc) as described in the design statement above. The management of the low secure unit will ensure safety of residents is a priority.
- 2.2 The unit will be managed by staff 24/7 and video surveillance provided throughout, with all external doors/unit doors and air locks accessed by staff override measures only (i.e. digital keypad/fob access). These measures are in place to ensure that residents cannot freely leave the building.

- 2.3 At the start of their employment at the unit, all staff will undergo a full induction programme covering the security systems in place. Regular daily (morning, afternoon & night-time) perimeter checks will be made by security staff to check that the physical environment hasn't been tampered with.
- 2.4 The unit nurse in charge at any time will check all patients on general observation every hour to confirm each individual's whereabouts. Further to this, any patient deemed at risk of absconding will have an enhanced level of observation i.e. staff monitoring 24/7.
- 2.5 Any 'at risk' patient will also be accompanied to all external hospital appointments and will be transported in a secure van with adequate staff numbers (dependent on individual risk assessments) to manage any attempts to abscond.