National Secure Adolescent Inpatient Service : SCIM DESIGN STATEMENT The Business Objectives for the project are:-

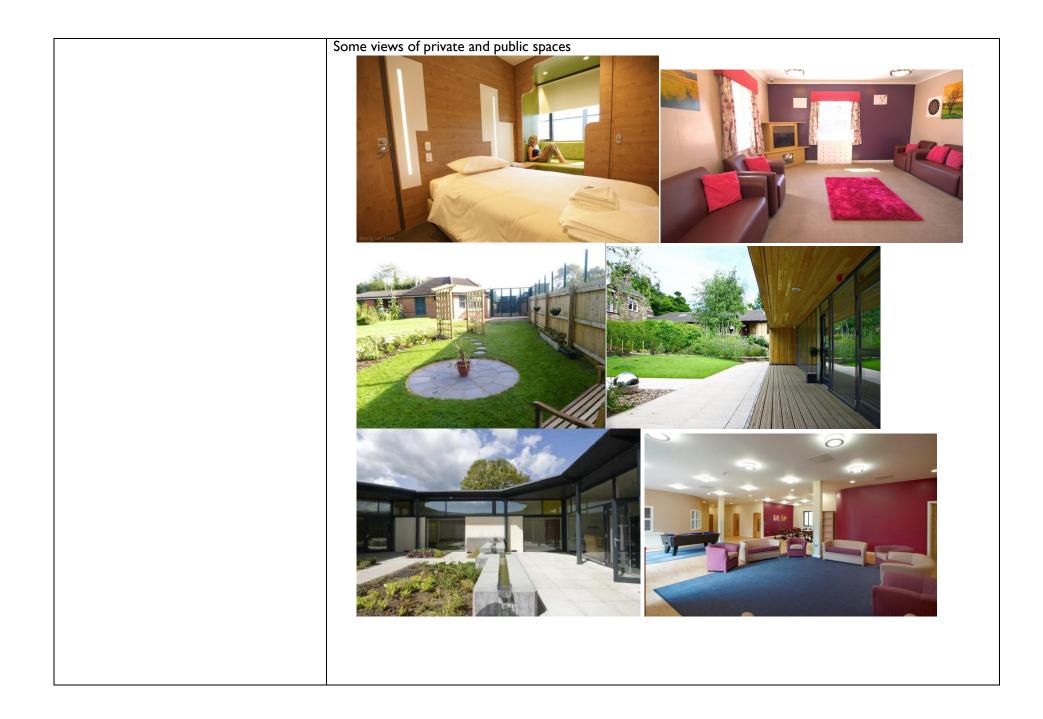
- Provide service capacity in Scotland;
- Improve service access by providing in Scotland;
- Improve service performance and outcomes by providing the service in Scotland for young persons';
- Service arrangements in Scotland would meet young persons' requirements for service; and
- Improve safety, risk and effectiveness by developing a specialist facility in Scotland.

Therefore, in order to achieve these objectives, the completed development must have the attributes described below.

### I AGREED NON-NEGOTIABLES FOR YOUNG PEOPLE

Non-Negotiable Performance	Benchmarks				
objectives What the design of the facility	The physical characteristics expected and/or some views of what success might look like for each				
must enable (what it needs to do)	(what you expect there to be)				
<ul> <li>Young person Admission Area</li> <li>1.1 The initial impression of the facility must be welcoming.</li> <li>The admission to the new facility must have a therapeutic feel from the outset. The spaces you arrive through and into must: <ul> <li>help the young person to stay calm through the admission process.</li> <li>enable immediate access to the right people.</li> <li>support privacy and dignity during the initial settling in period, and</li> <li>minimize the impact on other young people of new people arriving and settling in.</li> </ul> </li> </ul>	<ul> <li>The design of the facility must aid the transition of the young person to a secure environment; therefore, those first impressions must be of a safe, therapeutic environment.</li> <li>Security must be discretely managed, with no obvious barriers.</li> <li>A design challenge will be to create a vehicle reception space that is well lit with an open feel but must be secure.</li> <li>The admission area must be an open/welcoming environment (light and airy).</li> <li>The initial space that the young person steps into from the vehicle must not be dark and unwelcoming.</li> <li>The initial admission room should have an open outlook/feel, with good natural light and views to nature and should be comfortable and homely.</li> <li>The initial admission space must have sufficient room for escorts accompanying the young person.</li> <li>The initial admission spaces must feel light, airy and welcoming</li> <li>The design must compliment a trauma informed approach and be sympathetic to the young person's care (safety, stabilisation and integration).</li> <li>A toilet should be provided in this area.</li> <li>The Admission entrance must not be visible from other patient areas so that arrival can be managed in privacy and without impacting other young people in the facility.</li> <li>Scale and height of building should be considered should not be imposing.</li> </ul>				

	Some views of what success might look like for initial spaces and any things you really don't want to see
	Some views of what success might look like for initial spaces, and any things you really don't want to see
	<image/>
1.2 The layout of the facility must	• Each room and circulation space should have good natural light and a view to greenspace to avoid feeling
<ul> <li>provide a feeling of protection and safety.</li> </ul>	hemmed in by 4 walls.
<ul><li>safety.</li><li>enable normal life experiences and</li></ul>	<ul> <li>The young people should be able to see outdoor space from most areas of the facility .</li> <li>Day to day activities should be separate from bedroom (rest) space and Educational space. For example,</li> </ul>
choices to be maintained as far as possible for each person.	<ul> <li>Day to day activities should be separate from bedroom (rest) space and Educational space. For example, young people should be expected to be out of their bedrooms and participating in educational activities during daytime).</li> </ul>
• maximize therapeutic potential for	• There should be a separation between living spaces and the more formal functions of the facility, for
all young people through the use	example, living areas should be close to bedrooms but not to educational activities.
of evidence based design (e.g. morning sunlight improving mood/recovery)	• The design should provide for a range of activities and allow the young people to have choices over their environment, including the level of interaction, privacy, activity or calm that they need. See overleaf for natures of spaces.
• the facility must have a natural flow (public to private space)	<ul> <li>The layout is to be zoned to separate noisy/public and quite/private spaces, both internal and external where possible, to allow different uses to happen at the same time without interfering with each other or requiring windows/blinds to be shut.</li> </ul>
	• The design should provide a sensory environment, to include natural light , different lighting modes (ie.
	<ul> <li>Mood lighting), different textures, bean bags, and pleasant smells e.g. scented plants.</li> <li>Access to direct morning sunlight to be available to all young people as part of their normal use of the</li> </ul>
	facility.

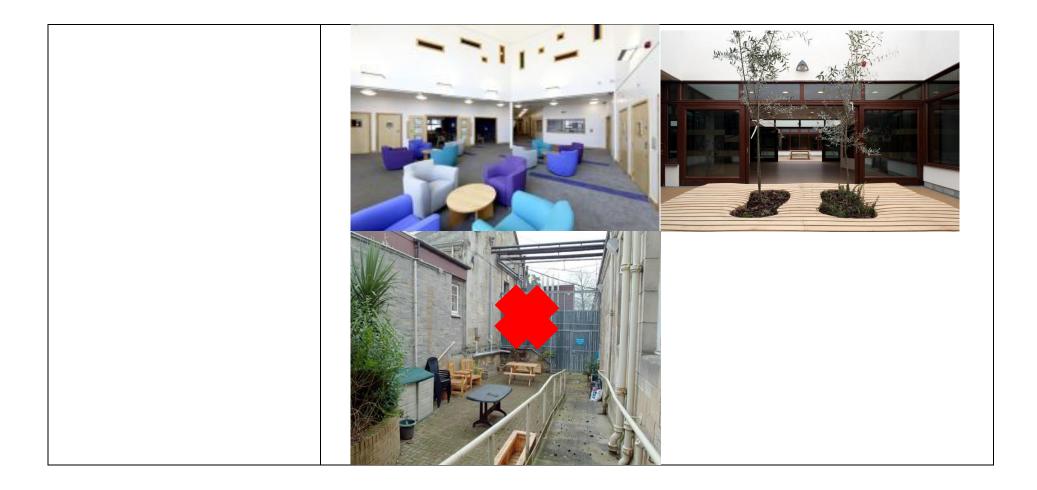


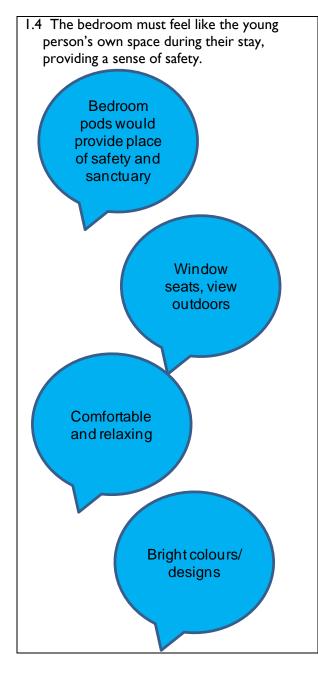
<ul> <li>pleasant experience, encouraging the young people to be out and about more and lowering anxiety about the next step on the journey and the destination.</li> <li>Glazing should provide natural light and views however should not be so prevalent that people feel the in a goldfish bowl.</li> <li>Circulation routes must have good natural light and a view out, with finishes carefully chosen to reduct noise, echo and reverberation (not clippy-cloppy). Acoustic design should meet the criteria set out in Scottish Health Technical Memorandum 08-01: Specialist services Acoustics.</li> <li>A lounge area should be provided separate from the bedrooms.</li> <li>The design should adopt a public to private gradation ethos e.g. Bedroom areas should offer as much privacy as possible, however whilst these areas should be private to the young person they should also</li> </ul>		<image/>
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privacy as possible, however whilst these areas should be private to the young person they should als		
		allow staff to discretely observe.
<ul> <li>Internal courtyards should not feel too enclosed.</li> </ul>		
Design should avoid features that obscure and provide hiding places.		





Some views of what success might look like for circulation routes – both internal and external – and impromptu seating boints





- Bedrooms to have: space for doing homework and sitting in comfort; features/places to display
  personal objects/posters etc; and means of watching TV and playing music. There must be a view –
  when seated or on the bed to controlled greenspace (no one outside the window) with no obvious
  barriers/fences blocking longer views.
- Interior design to be homely/youthful, bright colours and designs not sterile/clinical and private spaces should demarcate an area beyond which staff should not come without invitation (other than in emergency).
- Design of Bedrooms should look interesting even if there is nothing else in it.
- Lighting features where colours can be changed should be incorporated into the design .
- Private spaces must have a window with a view. Public spaces should have access to both long and short views.
- Lighting, heating and ventilation levels will be controllable.
- Sufficient storage space for clothes and personal belongings should be provided so that nothing precious goes missing and items are kept safe and secure.

### Some views of what success might look like for bedroom design

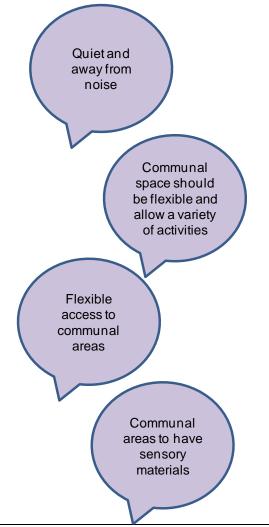




Courtyard views from bedrooms



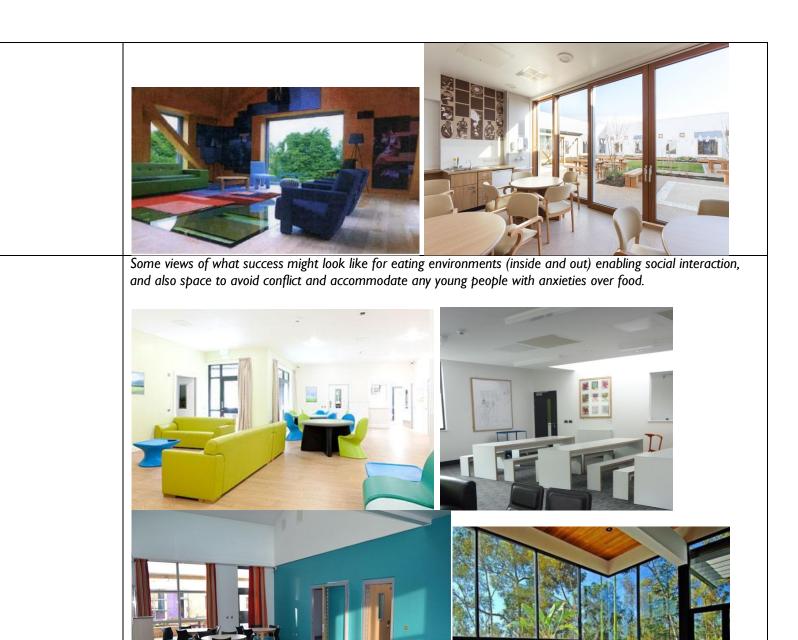
1.5 Spaces where young people come together Spaces for socialising (TV/computer games/traditional games/music/dancing/cinema/library) and eating socially must help alleviate anxiety, etc to be youthful in appearance, not stark or have a clinical feel. They must have good natural light, accommodate very different needs and comfortable furniture and an open aspect to useable landscape. contribute to creating fun, enjoyable and Nurses' room will be discrete from the social spaces. ٠ therapeutic experiences. • Spaces to allow different size groups to be formed to allow choice who you sit with and what you do, The aim is that special events within the day and to prevent transfer of noise between spaces being used for loud activities and those for quieter (mealtimes) and in the year (celebrations) activities. should be intimate experiences that the • Individual outside spaces for each ward area to be provided and one shared communal space. young people look forward to as an • Sheltered areas will allow access during inclement weather. important time. Mixture of outdoor areas with a range of textures. ٠

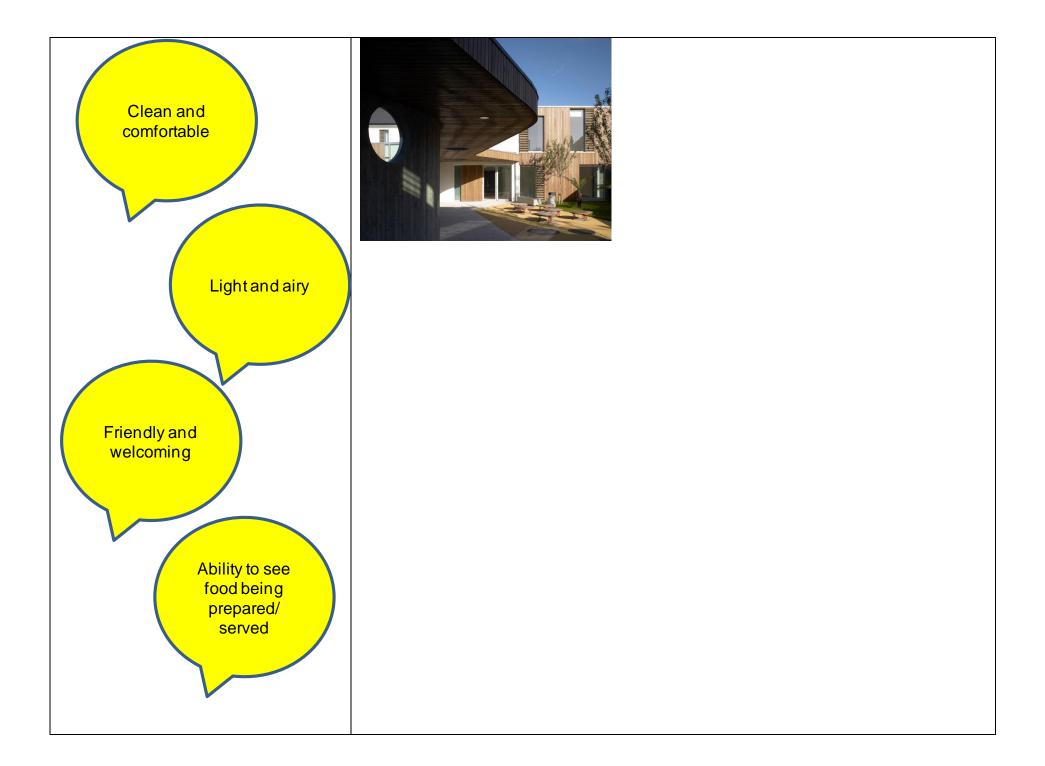


- No stones or gravel areas.
- Gym and play equipment outside.
- Comfortable furniture with attention to safety and security.
- All furniture will be fixed and solid and minimised.
- A dining area and lounge area will be separate.
- Lounge areas should have controllable access to drinking water, beverage preparation areas
- External spaces should have sheltered areas for use in rain/wind/snow etc and should be lit to enable use after dark, and provide attractive view in evenings.
- Access to food and drink (eg. fridge/ water cooler)

Some views of what success might look like for indoor social spaces



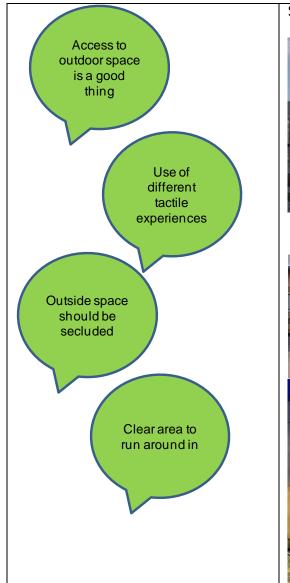




I.6 The young people must be able to The school should be located away from the living areas to allow for a similar routine to that of home to continue and further their be continued. However, there will be some children and young people who are too ill to attend school learning/education at the right time for and some provision should be made on the ward to allow for short teaching sessions on a 1:1 basis to be them in an environment that offers undertaken. educational opportunities and • Spaces must be flexible to accommodate range of educational needs and stages, with facilities for skills experiences as close as possible to based learning, academic courses and sitting exams. Education rooms to have good natural light and those they would have had at home. ventilation and be designed to reduce noise from activities and provide spaces for different children to be doing different work. Learning The educational area should be a clean, simple environment. ٠ environment There should be ample space to store materials safely. • should Good Information Technology facilities to be available for educational purposes. Rooms should have emulate a ٠ windows looking outside so don't feel closed in. normal classroom/ Two way glass to see out but people can't see in. ٠ school • Each classroom should look different. Young people should not feel confined in classrooms due to size. • The facility should have smaller multi-purpose rooms where different subjects could be taught with a • couple of bigger rooms for more practical subjects. Access to practical Some views of what success might look like for internal and external learning environments. activities important Education learning area should be separate from normal living area Good natural

> light and natural ventilation

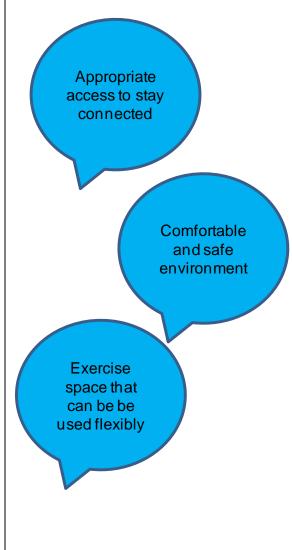
	<ul> <li>These spaces should be flexible enough to be used for different activities. Much like a community school might be used by the community in evenings/weekends, for therapeutic activities such as art/cooking/creative/growing activities and social gatherings (music/dance/cinema/yoga).</li> </ul>
1.7 There must be external landscape areas where young people can go both during daylight and darkness: there must be places to be exuberant and use energy through play and exercise, to be sociable, and places to be quiet and reflective. These must be adaptable for different interests, abilities and to enable memorable experiences (like use of a paddling pool in the summer) to happen readily.	<ul> <li>External Spaces should allow different size groups to meet for planned activities or to sit quietly, either escorted or with other clinical staff</li> <li>External features to include points of interest and places to rest. Planted areas to be colourful, have a scent and other sensory experiences. External spaces should have an area to allow shelter during wet/windy weather, and lighting to make the area attractive and useable during darkness/evenings.</li> <li>Safe outdoor space should allow for a range of activities.</li> <li>Exercise is an important part of a young person's life, therefore external spaces should be provided, for a variety of exercises, such as yoga, dance and fun activities.</li> <li>The outside areas require to have clear views at all times, the raised flower beds could potentially be used for gardening.</li> <li>A separate outdoor area that will allow ball games.</li> <li>Clear views around the whole courtyard should be provided.</li> <li>Sufficient space to allow young people to burn off energy should be provided.</li> </ul>



Some views of success in terms of external environments



1.8 The young people must be enabled to stay connected, as appropriate, with family life and their friends.

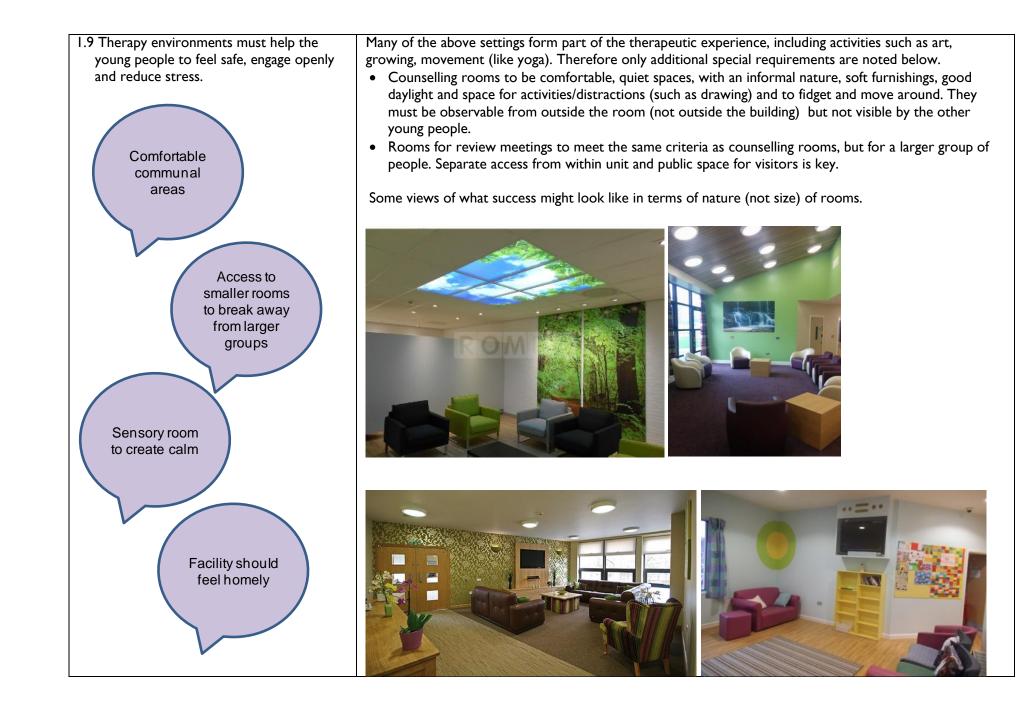


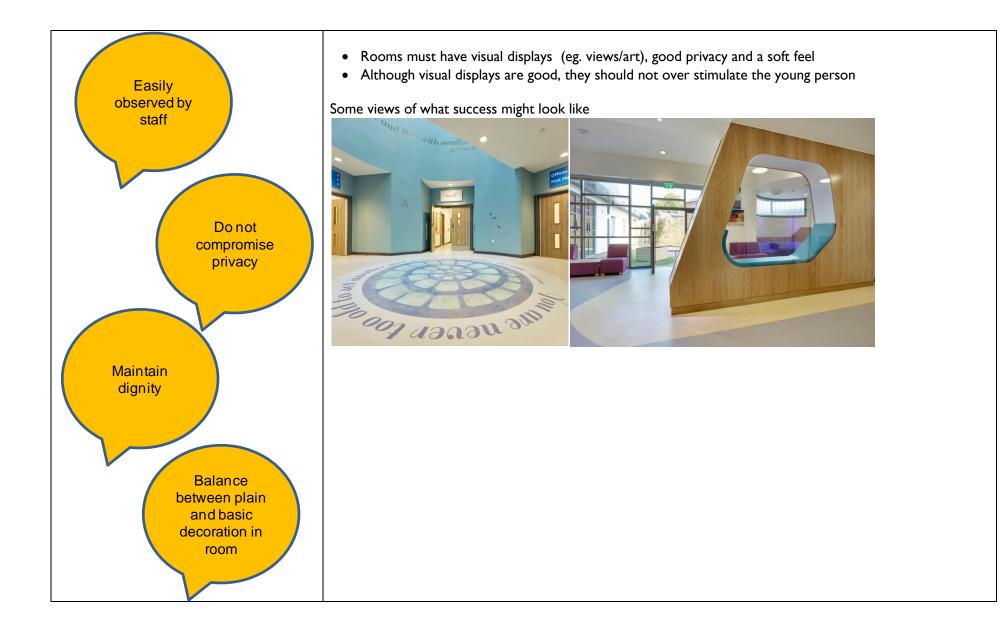
- A balance is required between privacy and the need for staff to make sure that the young person is safe, therefore the design of phone stations, WiFi and other means of connectivity within 'home' area of the facility need careful consideration..
- Appropriately supervised access to IT for social media etc, to be carefully thought out to ensure cyber security isn't too restrictive.
- Internal play area.
- Visitors' room should be in social space of the facility. Range of seating should be provided, for instance, lounge, table/chairs, bean bags and bright colours.
- Comfortable, homely, room with direct access to controlled external space out with the patient areas to meet with visitors: with room for a group of six people, and family pets, to sit, talk and play.

Some views of what success might look like









- 1.10 The layout of the facility must enable the young people to venture out of the secure environment, in a controlled way and gradually build their confidence to reconnect with the outside world.
   External spaces (surroundings outside secure building) around the facility must include areas with identity and some shelter from wind to sit in the public (non controlled) realm, but not 'on show' to busy areas of the site.
   Paths to be provided linking into local landscape, and to local amenities (café etc) with seated areas on route to enable short and extended walks with staff
  - route to enable short and extended walks with staff.Attention to outdoor landscaping

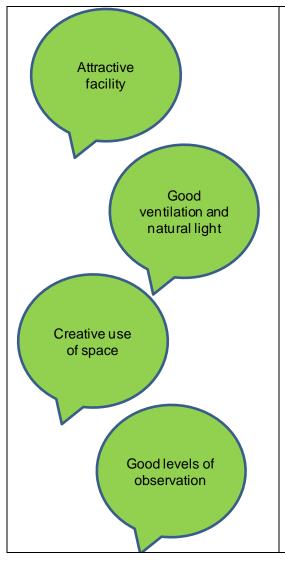
An aerial view of the site for the new facility and some views of the woodland walks in and around this area.



### 2 AGREED NON-NEGOTIABLES FOR STAFF

The majority of working areas are associated with patient activity. This section details staff specific environments.

Non-Negotiable Performance	Benchmarks					
objectives	The physical characteristics expected and/or some views of what success might look like for each					
What the design of the facility must enable						
<ol> <li>Staff must have easy access to the facility – particularly in an emergency.</li> </ol>	• Site-wide green travel plan will apply to staff and therefore no additional specific criteria are listed here for staff access to the site. There are very good cycle and walking routes to, from, and within Ayrshire Central Hospital					
	• Parking for staff, will be level and well lit providing access to a 24/7 entrance, that is visible on arrival at the facility.					
	<ul> <li>Staff changing facilities will be provided.</li> </ul>					
	<ul> <li>Secure storage of personal effects should be at the main entrance.</li> </ul>					
	Large lockers should be provided.					
	• Staff should arrive through the same route as visitors. Young people taking trips out of the facility should experience the same journey as visitors and staff arriving at the facility					
	• Staff will require to manage visits and a search and visitor policy will be required to provide clear guidance.					
2.2 The initial impression and overall feel of the facility must help attract and retain staff by helping them feel inspired, energised, respected and safe in their work, and part of a wider community of care.	<ul> <li>Facility sited on wider campus with shared facilities (staff training, eating, social) within 150 m so that connections can be made and maintained with colleagues working in other areas of the Campus for shared learning and support. Colleagues from other areas should also be able to use amenities within the facility and feel welcome to promote sense of shared community.</li> <li>External view of facility on arrival and from within to convey a therapeutic and youthful approach to care, non institutional.</li> </ul>					
	Some views of what success might look like for external impression and approach (other spaces being illustrated elsewhere)					





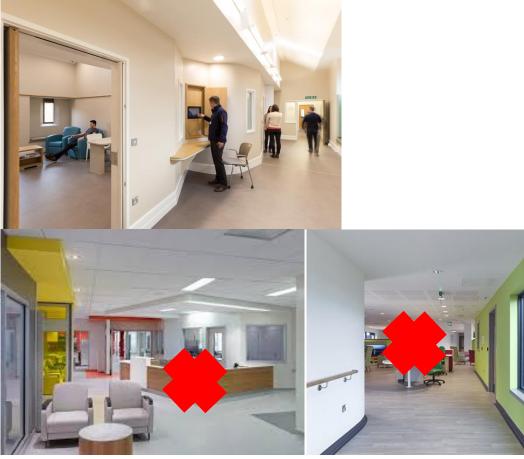
• The layout of the building (sightlines within patient areas, and to areas where escorted walks take place) must afford ready observation so that if staff require assistance another staff member can respond quickly. Electronic staff assist/attack security systems that connect to nearby larger Woodland View campus will be provided.

2.3. The patient areas must be easy to	Much of this is covered in section one. Additional aspects for staff are noted below.
deliver services within and support staff in their work.	• The layout of the building (sightlines within patient areas) must provide easy and unobtrusive observation so that staff can see if a young person is distressed and reach them within 5-10 seconds. This to be backed up by staff security systems.
	• Ease of monitoring young person should be provided. Services in the bedrooms will need to be controllable by staff, any water dispensing points (shower or sink tap) should also be controllable externally to the room to prevent flooding.
	• Informal seating areas adjacent to bedrooms (with direct view through viewing panel) to allow staff to sit
	near young people who require enhanced support in their room without their presence looking obtrusive
	or blocking other uses.



- There must be a space for handover and debriefing within the ward environment.
- Nursing office to be provided, no separate nursing station required this could be seen as a barrier and also could be hidden behind
- Spaces used by staff for education or administrative work must not be separated by discipline, seniority or area of work, but bring staff carrying out similar activities into the same space to enable conversations.
- There must be quiet spaces available to all staff for ItoI support and feedback, and for sensitive telephone conversations and video conferencing so that these things can happen without disturbing, or being disturbed by, other work.

Some views of what success might look like for office/pod/meeting areas



2.5 The facility must help staff meet the differing needs of young people due to age/stage/gender etc, and provide flexibility for services to adapt.	<ul> <li>Much of this is covered in section 1, therefore additional notes only included here:</li> <li>Ward to be designed with flexibility as to how bedrooms are managed.</li> <li>Spaces to be designed such that they are flexible in their use.</li> </ul>
2.6 The facility must help staff provide a continuity of care for the young people by maintaining contact with previous and future care providers.	• Video Conferencing facilities for staff to provide support to local practitioners and directly to the young people and their family.
2.7 The needs and welfare of staff must be supported.	<ul> <li>Controlled access to staff only toilets.</li> <li>Space to clean and the ability to change clothing (following any incidents with young people) within Smins of patient areas</li> <li>Staff 24/7rest facilities, with drink/food storage and prep, within 5mins walk of working areas. Staff area should be out with the ward to enable staff to feel they are on their break. It must be attractive to encourage use. Good natural light, long views to nature and access to fresh air. Seating to offer range of spaces so that staff can sit together for chat/interaction or take a quiet moment to themselves if they chose.</li> <li>Site wide walking / health promotion routes within 10m of the main entrance.</li> </ul> Some views of what success might look like for these social and respite spaces(internal) Torrel of what success might look like for these social and respite spaces(internal)

### 3 AGREED NON-NEGOTIABLES FOR VISITORS (FAMILY/FRIENDS/CARERS)

Additional needs beyond those noted in sections above for the young person's arrival, visiting spaces and assessment/tribunal rooms.

Non-Negotiable Performance objectives	Benchmarks				
What the design of the facility must enable	The physical characteristics expected and/or some views of what success might look like for each				
3.1 The experience of arriving must help lower stress and build confidence. Glass reception, area bright and airy and welcoming	<ul> <li>Information systems must provide clear wayfinding information, and the building, for all visitors in advance of them coming (all visits are arranged), This must co-ordinate with signage and landmarks on the site to reinforce the information.</li> <li>Car parking for visitors to be within 10m from the main entrance (which must be visible/identifiable from arrival route), with well lit route to door. Signposting to site cafeteria facilities etc to be provided at main entrance of the facility for those who may want to have a break before entering.</li> <li>See 2.2 above for benchmarks on initial visual impression of therapeutic environment.</li> </ul>				
Scale and height to be considered should not be imposing Close to green space					
Walking routes, keeping safe, nurturing environment					

	· ·
3.2. On entering the facility there must be a feeling of welcome, and visitors personal needs must be accommodated and supported.	<ul> <li>The Main Entrance area must be light, open with immediate access to staff.</li> <li>A clearly defined welcome desk/reception desk with control room to be provided.</li> <li>Access to drinking water.</li> <li>Toilet facilities should be provided.</li> <li>Waiting area should have comfortable seating.</li> <li>Lockers should be provided for visitors.</li> </ul>
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There must be a place to store personal effects securely, and attractive information systems signposting additional support, and discrete security information. These must not look institutional or detract from the welcoming nature of the arrival space.

Some views of success for lockers and information systems, or what you want to avoid (with red cross through)



### 4 ALIGNMENT OF INVESTMENT WITH POLICY

This section is about the additional benefits (not directly related to the service to be provided) that can be delivered, so things like contributing to regeneration, health promotion, good corporate citizenship, employment etc

Non-Negotiable Performance objectives What the design of the facility must enable	nchmarks e physical characteristics expected and/or some views of what success might look like for each		
4.1 The development, through its location and design, must be a positive part of the community and campus	<ul> <li>Please refer to Section 1.1</li> <li>The facility will add to the overall campus feel and be sympathetic to the existing architecture not preser a "prison" feel.</li> <li>Green space and walking routes to be maintained and improved</li> <li>Use of National Cycle Network through the Ayrshire Central Hospital site to be encouraged</li> <li>This facility will maximise the use of the available estate within the Ayrshire Central Hospital campus, further centralising mental health inpatient provision locally and as a National facility.</li> </ul>		
4.2. Sustainability. Promotes health, social, environment and economic sustainability by delivering whole life value from investment.	<ul> <li>Collaborative workshops using current BREEAM and BIM will be undertaken at key stages, evidencing a holistic approach to delivering safe, sustainable long term environment.</li> <li>BREEAM 2014 'Very Good' rating to be achieved.</li> <li>All mandatory BREEAM targets will be met.</li> <li>Every opportunity to be taken to implement sustainable building solutions, particularly where these are linked to carbon reduction and energy saving measures.</li> <li>Facility design should support ease of maintenance cleaning internally and externally.</li> <li>BREEAM assessment will highlight further targets.</li> </ul>		
4.3 Future flexibility and expansion – flexibility should be built into the design where possible to allow for future expansion and or flexibility of use of space.	<ul> <li>Facility should be designed to provide:</li> <li>Flexibility for future use</li> <li>Possible future alteration, for example support unknown further expansion required. Therefore soft spaces to support future expansion to facilities should be identified as "future development" areas.</li> <li>The proposed site for the new facility has ground that will allow expansion. During the design phase structural considerations will be discussed that may allow for a second tier.</li> <li>The Site will be large enough to allow for at least 20% expansion of the original footprint.</li> </ul>		

4.4 Wider community benefits - Good	Collaborative workshops for Equality Impact Assessment (EIA) at key stages, to set and evidence positive
corporate citizenship.	steps to reduce local health inequality, and incorporate Health Promoting Health Service (HPHS) for wider
	community; e.g. community space, gardens, gym, benches along walking routes, green transport
	improvements, shared car parks, site art and wayfinding. Regular liaison with Scottish Health Council will be
	maintained throughout the project to seek advice on communication and involvement on a local and national
	basis.

The facility should provide an innovative design that delivers safe, effective, person centred care. The key existing SHPN and HBN guidance that will be accessed in developing the design is outlined below, in addition all relevant SHTM guidance will also be accessed in developing and supporting the proposed design. In addition to the current guidance, exemplar models of care and healthcare facilities elsewhere in the UK and internationally will inform and support the development of the design.

- Facilities for child and adolescent mental health services (HBN 03-02)
- Core guidance clinical and clinical support spaces (HBN 00-03)
- Core guidance sanitary spaces (HBN 00-02)
- Core guidance General design for healthcare buildings (HBN 00-01)
- General design guidance (SHPN 03)
- Access disability (SHFN 14)
- Access checklist for people with dementia in healthcare premises (SHFN 03)
- Scottish Health Technical Memorandum (SHTM 08-01): Specialist services Acoustics
- Plus various SHTMs

This statement was developed through the engagement of the following stakeholders:-Aileen Blower, Clinical Director CAMHS, NHS Ayrshire & Arran Anne-Marie Black, NHS Ayrshire & Arran Audrey Baird, Good Shepherd Secure Unit Audrey Fisher, Head of Clinical Support Services, NHS Ayrshire & Arran Carole Dearie, St Mary's Kenmuir, Bishopbriggs Carole Ross, Senior Project Manager, NHS Ayrshire & Arran Caroline Amos, North Ayrshire Council Cindy Shiels, NHS Ayrshire & Arran Dan Johnson, Kibble Secure School David Mitchell, Rossie Young People's Trust David Thomson, Associate Nurse Director, NHS Ayrshire & Arran Dawn Carson, NHS Ayrshire & Arran Eileen Bray, NHS Ayrshire & Arran Ella Robertson, Service User Representative, Child & Adolescent Faculty Executive Committee, Royal College of Psychiatrists in Scotland Elaine McClure, Programme Office Manager, Capital Planning, NHS Ayrshire & Arran Elaine Steel, NHS Ayrshire & Arran Eric Clement, Health & Safety Advisor, NHS Ayrshire & Arran lain Fairley, Senior Project Manager, Capital Planning, NHS Ayrshire & Arran James Docherty, Violence Reduction Unit Janet McKay, Good Shepherd Centre Jen Robin, Criminal Justice Team, Glasgow Jessie Mitchell, NHS Ayrshire & Arran Julie Heaney, NHS Ayrshire & Arran Helen Smith, Consultant Forensic Child and Adolescent Psychiatrist, WGACH, Glasgow Lorraine Keith, National Forensic Carer Coordinator Louise Morrison, Good Shepherd Centre Martin Culshaw, Rowanbank, Glasgow Maureen Kenefick, North Ayrshire Council Myra Hesset, Education, North Ayrshire Council Nicol Shadbolt, Forensic Network, Castairs Parag Shah, Northumberland, Tyne & Wear NHS Foundation Trust Sarah Newman, SACRO, Glasgow Steven Lees, Estates Manager North, NHS Ayrshire & Arran Stuart McKenzie, NHS Ayrshire & Arran Susanna Mendes, Programme Lead, NSD Tahir Ali, NHS Ayrshire & Arran Thelma Bowers, Head of Mental Health Services, North Ayrshire Health & Social Care Partnership Tommy Stevenson, NHS Ayrshire & Arran William Lauder, NHS Ayrshire & Arran Young People from St Mary's Kenmuir, Good Shepherd Centre and Kibble Secure School

### 5 SELF ASSESSMENT PROCESS

Decision point	Authority of decision	Additional skills or other perspectives	How the above criteria will be considered at this stage and/or valued in the decision	Information needed to allow evaluation
Completion of both clinical and technical briefs to allow engagement with design teams.	Decision by Authority with advice from Steering Group and direction from Project Board	Peer review by colleague(s) with no previous connection to this project. Clinical Workstream sub group will contribute to the brief which will be developed with support from the Healthcare Planner and Design Team.	Is the above design statement included in the brief? Can the developed brief be fulfilled without fulfilling the above requirements? In developing the clinical brief a cross check will be made with the key design objectives within this design statement to ensure the design quality is maintained and design objectives are met.	Clinical and Technical design briefs. Clinical models of care, operational policies, key critical adjacencies and capacity requirements to be agreed.
Engagement with young people on design statement and ongoing clinical brief	Decision by Authority with advice from Steering Group and direction from Project Board	Comments sought from young people currently in secure accommodation. Engagement work with young people will be ongoing with the support of the staff from existing secure units.	Design concepts will be tested against the design statement at stakeholder events.	Clinical briefs
Selection of early design concept from options developed	Decision by Authority with advice from Steering Group and direction from Project Board	Comment to be sought from A&DS and HFS. Key stakeholder engagement to be undertaken to inform design. Clinical Workstream sub group with input from Healthcare Planner and Design Team will ensure design developed is functionally suitable, technically and financially feasible. The Authority will appoint advisors to support and help manage this process. NDAP process will be followed (as per SCIM NHS Scotland NDAP process guidance) comments and guidance sought from NDAP assessment team.	Stakeholder assessment of options using AEDET or other methodology to evaluate the likelihood of the options delivering a development that meets the criteria above. The Programme Board will seek sign off from the clinical Workstream sub group prior to Programme Board design sign off.	Sketch proposals developed to RIBA Stage C/D coloured to distinguish the main use types (bedrooms, day space, clinical, circulation treatment, staff facilities, usable external space).

Decision point	Authority of decision	Additional skills or other perspectives	How the above criteria will be considered at this stage and/or valued in the decision	Information needed to allow evaluation
Approval of Design prior to Statutory Approvals	Decision by Authority with advice from Steering Group and direction from Project Board	Completion of the brief with decisions made on planning arrangements, appearance, construction method, outline specification and cost of project. NDAP process will be followed with comments and guidance sought from NDAP assessment team. Comment to be sought from A&DS and HFS before submitting to Local Authority	Design to be measured against NDAP non-negotiables. The Programme Board will seek sign off from the clinical Workstream sub group prior to Programme Board design sign off.	General layout plans developed to 1:200 scale.
Before Construction commences	Decision by Authority with advice from Steering Group and direction from Project Board	PSCP comments on buildability and maintainability. Key stakeholder engagement to be undertaken to inform design.	NDAP report will be embedded within the briefing material handed to PSCP.	Clinical and Technical design briefs and NDAP report.
During commissioning	Decision by Authority with advice from Steering Group and direction from Project Board	Young People, visitors (families, friends, carers) and staff to provide perspective on new facility.	NDAP report will be used as a measure of feasibility.	General layout plans. Clinical and Technical design briefs and NDAP report and commissioning data.
Post Project Evaluation	Decision by Authority with advice from Steering Group and direction from Project Board. Project Board – lessons learned will be shared with Scottish Government.	Key stakeholder engagement to comment on and evaluate benefits and lessons learned. PPE report will be developed following SCIM guidance.	NDAP report will form part of the measure of success. AEDET to be undertaken against envisaged benefits. Benefits realisation plan, investment objectives and the design statement will assess how effectively the objectives have been met.	Feedback from all key stakeholders and performance data for the facility, eg programme, quality and cost.

# **Balfour Beatty**



## NHS Ayrshire & Arran National Forensic Adolescent Service Scotland Unit, ACH

**Option Feasibility Estimates** 

**April 2017** 

### **Document Issue Sheet**

Issue Nr.	Document	Issue Date	Parties Sent To	Prepared By	Checked By	Reviewed By
1	Option Feasibility Estimates	06/04/2017	NHS A&A	AH	EMcC	RR

Authorised by (Director)	R. Rankin
Date	06-Apr-17

NHS Ayrshire & Arran National Forensic Adolescent Service Scotland Unit, ACH Option Feasibility Estimates April 2017



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Appendix A - Detail Build-Up

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NHS Ayrshire & Arran National Forensic Adolescent Service Scotland Unit, ACH Option Feasibility Estimates April 2017



### 1.0 Executive Summary

1.1 This Feasibility Estimate has been prepared for the Proposed National Forensic Adolescent Service Scotland.

The overall total estimated Option cost exclusive of VAT and NHS A&A Project Costs is:-	Option Site 01 £ 3,553,839.85	Option Site 02 £ 3,423,459.35
This is broken down as follows:		
- Construction Works	2,589,703.00	2,494,694.00
- Preliminaries	315,684.80	304,103.20
- PSCP Fee	225,748.63	217,466.54
- PSCP Risk	156,556.82	150,813.19
- Stage 3 & 4 Costs	266,146.60	256,382.42
Target Cost excluding VAT and NHS A&A Project Costs	3,553,839.85	3,423,459.35

- 1.3 A summary of the Feasibility Option Outline Cost Estimate is included in Section 4.0; the complete detailed build up to this estimate is included in Appendix A.
- 1.4 This document has been prepared based upon the information noted in item 1 of Section 2.0
- 1.5 Exclusions to the Fesibility Option Outline Cost Estimate are listed in Section 3.0.
- 1.6 NHS A&A Project Costs are excluded from this estimate. This includes any Client Contingency.
- 1.7 The Option Feasibility Estimates have been prepared solely for the use of NHS Ayrshire & Arran and should not be relied upon by any third party.
- 1.8 The basis of pricing are rates current at April 2017 and no allowance has been made for inflation beyond this date.
- 1.9 All costs assume the works will be competitively tendered



### **2.0 Clarifications and Assumptions**

1 The estimate is based on Ryder Arch Dwgs RYD-00-00-DR-A-2001 and 3001

2 Assumes VAT rate at 20%.

- 3 PSCP Cost includes Group 1 costs and Group 2 Fit Only costs but excludes all Group 2 Supply and Group 3 and 4 Supply and Fit Costs
- 4 Assumes no adverse ground conditions
- 5 Assumes there is no contamination on sit which requires remediation.
- 6 Assumption agreed that no allowance for Site Services separation costs are required or included.
- 7 Construction costs are at 2Q 17 current prices with no allowance for inflation beyond this date .
- 8 Assumes external underground drainage connection is within 30m of building and is a standard connection.
- 9 There will be no Utility costs or diversions of existing utilities required. Cost for works in connection with utilities are therefore excluded from this Estimate.
- 10 Costs are based at April 2017 and no allowance has been made for inflation beyond this date.
- 11 All the works will be carried out in one continuous contract with no phasing
- 12 All works will be competatively tendered
- 13 No section drawings are currently available, a floor to ceiling height of 2.80m has been assumed. Roofs are assumed to be shallow pitched in line with the existing new development adjacent to the site.



### 3.0 Exclusions

- 1 Site acquisition and associated costs, land, agents, legal fees, planning/building control fees
- 2 Site Investigation costs
- 3 Local Authority charges, costs of planning approval
- 4 Capital allowances or other incentives / grants
- 5 Abnormal ground conditions, including consequential works and significant level of imported filling or removal of excavated material from site
- 6 Effect of discovery of archaeological artefacts or other antiquities, leading to delayed start
- 7 Abnormal service provisions or connection costs
- 8 Furniture and fittings (except those specifically listed)
- 9 Phasing of works
- 10 Site infrastructure and diversion of existing services
- 11 Client decant costs or finance charges
- 12 Demolition of existing buildings on Site 01
- 13 Client finance costs and insurances
- 14 Cost of surveys etc.
- 15 Removal of asbestos
- 16 Excludes all Cost Advisor , Supervisor and Client PM Fee costs .
- 17 Excludes any costs in relation to PFI contract / legal works.
- 18 Excludes NHS DG Clinical Clean costs.
- 19 Excludes all External Works other than those specifically noted in the Cost Plan.

# Balfour Beatty AECOM



4.0 Elemental Summary : Site 01

	m2	ft2
Gross Internal Floor Area	1257	13525.32

	£	£/m2	£/ft2
Demolitions and Alterations	£0.00	£0.00	£0.00
Substructure	£199,785.00	£158.94	£14.77
Roof	£284,025.00	£225.95	£21.00
Stairs	£0.00	£0.00	£0.00
External Walls	£158,440.00	£126.05	£11.71
Windows and External Doors	£73,634.00	£58.58	£5.44
Internal Walls and Partitions	£152,514.00	£121.33	£11.28
Internal Doors/Screens/Joiner	£107,425.00	£85.46	£7.94
Wall Finishes / Decoration	£139,226.00	£110.76	£10.29
Floor Coverings	£70,340.00	£55.96	£5.20
Ceilings	£99,303.00	£79.00	£7.34
Fittings	£108,605.00	£86.40	£8.03
Furniture - Loose Furniture excluded from Construction Costs	£0.00	£0.00	£0.00
Mechanical including sanitary fittings	£408,240.00	£324.77	£30.18
Electrical	£330,820.00	£263.18	£24.46
Lifts	£0.00	£0.00	£0.00
Builders Works	£36,953.00	£29.40	£2.73
External Services	£89,640.00	£71.31	£6.63
External Works	£330,753.00	£263.13	£24.45
Subtotal Subtotal	£2,589,703.00	£2,060.23	£191.47
Allowance for Contractors Prelims @ 12.19%	£315,684.80	£251.14	£23.34
PSCP Fee @ 7.77%	£225,748.63	£179.59	£16.69
Construction Cost	£3,131,136.43	£2,490.96	£231.50
PSCP Risk Costs - allow 5% meantime of Construction Cost	£156,556.82	£124.55	£11.58
Construction Cost excl Stage 3/4 Design Fees but Incl Risk	£3,287,693.25	£2,615.51	£243.08
Stage 3 Costs incl Des Team Fees & 7.77% Fee, 7%, all incl PSCP costs	£219,179.55	£174.37	£16.21
Stage 4 Costs : Des Team Fees incl 7.77% Fee, say 1.5%	£46,967.05	£37.36	£3.47
Target Cost Subtotal excl VAT	£3,553,839.85	£2,827.24	£262.75
VAT at 20%	£710,767.97	£565.45	£52.55
Estimated Total Cost PSCP Construction Cost including VAT	£4,264,607.81	£3,392.69	£315.31
Add NHSA&A Project Costs			
Joint Cost Advisor Fee, allow ?% of Construction Cost	ТВС		
Supervisor Fee, allow ?% of Construction Cost	ТВС		
PM Fee, allow ?% of Construction Cost	ТВС		
CLO Legal Fees	ТВС		
PFI Contractors Costs	ТВС		
Finance Advisors Costs	ТВС		
Loose Furniture	ТВС		
	ТВС		
	ТВС		
Supply & Delivery of Group 2, 3 and 4 Equipment IM&T Costs			
Supply & Delivery of Group 2, 3 and 4 Equipment IM&T Costs Decanting Costs	TBC		
Supply & Delivery of Group 2, 3 and 4 Equipment IM&T Costs Decanting Costs Clinical Cleaning costs	TBC TBC		
Supply & Delivery of Group 2, 3 and 4 Equipment IM&T Costs Decanting Costs	TBC TBC TBC		

# Balfour Beatty AECOM



4.0 Elemental Summary : Site 02

	m2	ft2
Gross Internal Floor Area	1257	13525.32

	£	£/m2	£/ft2
Demolitions and Alterations	£0.00	£0.00	£0.00
Substructure	£199,785.00	£158.94	£14.77
Roof	£284,025.00	£225.95	£21.00
Stairs	£0.00	£0.00	£0.00
External Walls	£158,440.00	£126.05	£11.71
Windows and External Doors	£73,634.00	£58.58	£5.44
Internal Walls and Partitions	£152,514.00	£121.33	£11.28
Internal Doors/Screens/Joiner	£107,425.00	£85.46	£7.94
Wall Finishes / Decoration	£139,226.00	£110.76	£10.29
Floor Coverings	£70,340.00	£55.96	£5.20
-		£33.90	£7.34
Ceilings	£99,303.00		
Fittings	£108,605.00	£86.40	£8.03
Furniture - Loose Furniture excluded from Construction Costs	£0.00	£0.00	£0.00
Mechanical including sanitary fittings	£408,240.00	£324.77	£30.18
Electrical	£330,820.00	£263.18	£24.46
Lifts	£0.00	£0.00	£0.00
Builders Works	£36,953.00	£29.40	£2.73
External Services	£82,740.00	£65.82	£6.12
External Works	£242,644.00	£193.03	£17.94
Subtotal	£2,494,694.00	£1,984.64	£184.45
Allowance for Contractors Prelims @ 12.19%	£304,103.20	£241.93	£22.48
PSCP Fee @ 7.77%	£217,466.54	£173.00	£16.08
Construction Cost	£3,016,263.74	£2,399.57	£223.01
PSCP Risk Costs - allow 5% meantime of Construction Cost	£150,813.19	£119.98	£11.15
Construction Cost excl Stage 3/4 Design Fees but Incl Risk	£3,167,076.93	£2,519.55	£234.16
Stage 3 Costs incl Des Team Fees & 7.77% Fee, 7%, all incl PSCP costs	£211,138.46	£167.97	£15.61
Stage 4 Costs : Des Team Fees incl 7.77% Fee, say 1.5%	£45,243.96	£35.99	£3.35
Target Cost Subtotal excl VAT	£3,423,459.35	£2,723.52	£253.11
VAT at 20%	£684,691.87	£544.70	£50.62
Estimated Total Cost PSCP Construction Cost including VAT	£4,108,151.22	£3,268.22	£303.74
Add NHSA&A Project Costs			
Joint Cost Advisor Fee, allow ?% of Construction Cost	TBC		
Supervisor Fee, allow ?% of Construction Cost	ТВС		
PM Fee, allow ?% of Construction Cost	ТВС		
CLO Legal Fees	ТВС		
PFI Contractors Costs	ТВС		
Finance Advisors Costs	TBC		
Loose Furniture	TBC		
Supply & Delivery of Group 2, 3 and 4 Equipment	TBC		
IM&T Costs	TBC		
Decanting Costs	ТВС		
Clinical Cleaning costs	ТВС		
NHS A&A Risk, allow 5%	ТВС		
VAT as applicable on Project Costs	ТВС		
Estimated Total Project Cost incl VAT	£4,108,151.22		



# **Demolitions and Alterations**

Item		Qnt	Unit	Rate	Total
	Note: All demolition works are excluded from this estimate, to be carried out by NHS A&A prior to commencement of contract works				
А	Locating, isolating and termination of existing service connections to existing single storey building				
В	Gas connection	1	item	£0.00	£0.00
с	Electrical connection	1	item	£0.00	£0.00
D	Water connection	1	item	£0.00	£0.00
E	Drainage connections	1	item	£0.00	£0.00
F	Demolition of existing single storey buildings, including cutting back, capping off and making safe	1	item	£0.00	£0.00
G	Allowance for re moval of asbestos prior to demolition	1	item	£0.00	£0.00
	To Summary				£0.00



### <u>Substructure</u>

Item		Qnt	Unit	Rate	Total
A	New ground floor slab construction including site strip, reduced level excavations, sub-base, blinding, 150 thick renforced concrete ground slab with rebar 150kg/m3, all necessary formwork, dpm, insulation	1257	m2	£130.00	£163,410.00
В	Foundations below new external walls; including excavations, concrete foundations or slab thickenings with rebar 150kg/m3, substruture external walls; dpc	291	m	£125.00	£36,375.00
	To Summary				£199,785.00



<u>Roof</u>

Item		Qnt	Unit	Rate	Total
А	Allowance for roof construction and coverings	1380	m2	£190.00	£262,200.00
В	Allowance for eaves detail around perimeter at external wall	291	m	£75.00	£21,825.00
	To Summary				£284,025.00



### <u>Stairs</u>

Item		Qnt	Unit	Rate	Total
A	Not applicable	0	nr	£10,000.00	£0.00
	To Summary				£0.00



# External Fabric/Frame

Item		Qnt	Unit	Rate	Total
	External Walls				
А	External walls construction, (average height assumed 3.20m from dpc level to top of wall) 291.0m	932	m2	£170.00	£158,440.00
	To Summary				£158,440.00



# Windows and External Doors

Item		Qnt	Unit	Rate	Total
	New windows, forming opening, flashings etc				
А	1.2m wide x 1.5m high	4	nr	£576.00	£2,304.00
В	1.5m wide x 1.5m high	1	nr	£720.00	£720.00
С	1.8m wide x 1.5m high	12	nr	£864.00	£10,368.00
D	2.0m wide x 2.4m high	2	nr	£1,536.00	£3,072.00
E	3.0m wide x 2.4m high	1	nr	£2,304.00	£2,304.00
F	4.0m wide x 2.4m high	1	nr	£3,072.00	£3,072.00
G	4.5m wide x 2.4m high	2	nr	£3,456.00	£6,912.00
н	4.7m wide x 2.4m high	2	nr	£3,610.00	£7,220.00
J	6.0m wide x 2.4m high	2	nr	£4,608.00	£9,216.00
К	8.2m wide x 2.4m high	1	nr	£6,298.00	£6,298.00
	carried forward				£51,486.00



# Windows and External Doors

ltem		Qnt	Unit	Rate	Total
	brought forward New glazed screen with integral doors				£51,486.00
А	1.5m wide x 2.4m high	1	nr	£1,152.00	£1,152.00
В	extra for integral single leaf solid cored doors and frames, including for factory finished decoration, ironmongery	1	nr	£1,200.00	£1,200.00
С	1.8m wide x 2.4m high	1	nr	£864.00	£864.00
D	extra for integral single leaf solid cored doors and frames, including for factory finished decoration, ironmongery	1	nr	£1,200.00	£1,200.00
E	4.2m wide x 2.4m high	2	nr	£2,016.00	£4,032.00
F	extra for integral double leaf solid cored doors and frames, including for factory finished decoration, ironmongery	2	nr	£1,500.00	£3,000.00
	Allowance for external quality doors and frames, including for factory finished decoration, ironmongery				
G	Single leaf door	1	nr	£1,750.00	£1,750.00
	carried forward				£64,684.00



# Windows and External Doors

Item		Qnt	Unit	Rate	Total
	brought forward Allowance for external quality doors and frames, including for factory finished decoration, ironmongery				£64,684.00
А	Double leaf door	2	nr	£2,600.00	£5,200.00
В	Louvred double leaf doors	1	nr	£3,750.00	£3,750.00
	To Summary				£73,634.00



# Internal Walls And Partitions

Item		Qnt	Unit	Rate	Total
	Internal partitions				
А	Allowance for internal partitions: 522m x 3.2m high	1,671	m2	£70.00	£116,970.00
В	Allowances for IPS installation in en-suite bathrooms (11m2 per bathroom x 12)	132	m2	£155.00	£20,460.00
С	Allowance for glazed screens not yet defined on drawing	1257	m2	£12.00	£15,084.00
	To Summary				£152,514.00



# Internal Doors/Screens /Joiner

Item		Qnt	Unit	Rate	Total
	Allowance for solid cored doors and frames, including for factory finished decoration, ironmongery				
А	Single leaf door and frame	62	nr	£900.00	£55,800.00
В	One and a half leaf door and frame	4	nr	£1,150.00	£4,600.00
с	Double leaf door and frame	12	nr	£1,300.00	£15,600.00
D	Sundry Joinerwork: rails, trims, framing etc	1257	m2	£25.00	£31,425.00
	To Summary				£107,425.00



### **Decoration**

Item		Qnt	Unit	Rate	Total
	Wall Finishes / Decoration				
А	Decoration to new partitions, timbers, etc	4274	m2	£25.00	£106,850.00
В	Extra for allowance for tiling in bathrooms	204	m2	£80.00	£16,320.00
с	Extra for allowance for finish in kitchen	50	m2	£120.00	£6,000.00
D	Extra for allowance for enhanced finishes in other areas	1257	m2	£8.00	£10,056.00
	To Summa	ry			£139,226.00



### **Ceilings**

ltem		Qnt	Unit	Rate	Total
А	Allow for standard spec ceilings	1257	m2	£45.00	£56,565.00
В	Extra over for higher spec ceilings	1257	m2	£20.00	£25,140.00
с	Allow for fire compartmentation not yet defined	1257	m2	£14.00	£17,598.00
	To Summary				£99,303.00



### Floor Coverinngs

Item		Qnt	Unit	Rate	Total
	Floor Coverings				
А	Allowance for floor coverings	1257	m2	£35.00	£43,995.00
	Extra over rates for enhanced floor coverings				
В	Fitness suite: timber flooring	24	m2	£65.00	£1,560.00
с	Matwells at entrances	17	m2	£280.00	£4,760.00
D	Allowance for skirtings	1335	m	£15.00	£20,025.00
	To Summary				£70,340.00



### **Fittings**

ltem		Qnt	Unit	Rate	Total
А	General allowance for fittings to all rooms: supply and fit Group 1, fitting only Group 2	1257	m2	£40	£50,280.00
	Extra allowances for				
В	Fitness area	24	m2	£30	£720.00
с	Kitchen	20	m2	£500	£10,000.00
E	Receipt desk and hatch	1	nr	£3,000.00	£3,000.00
F	Staff base / change areas	1	nr	£4,000.00	£4,000.00
G	Blinds	32	nr	£300.00	£9,600.00
н	Signage	1257	m2	£5.00	£6,285.00
I	Hoist to assissted bathroom	1	nr	£7,500.00	£7,500.00
J	Wall protection to all corridors , including corner protectors	265	m	£60.00	£15,900.00
к	Corner protectors 1200 high	44	nr	£30.00	£1,320.00
	To Summary				£108,605.00



### <u>Furniture</u>

ltem		Qnt	Unit	Rate	Total
А	Loose Furniture Costs Excluded from this Construction Cost	0	nr	£0.00	£0.00
	To Summary				£0.00



### **Mechanical**

Item		Qnt	Unit	Rate	Total
A	Mechanical Services	1257	m2	£320.00	£402,240.00
	Extra Over for Higher spec areas over standard				
В	Kitchen , extractor hoods etc	20	m2	£300.00	£6,000.00
	To Summary				£408,240.00



### **Electrical**

Item		Qnt	Unit	Rate	Total
А	Electrical Services	1257	m2	£260.00	£326,820.00
	Extra Over for higher Specification areas				
В	Kitchen , additional power , alarms etc.	20	m2	£200.00	£4,000.00
	To Summary	'			£330,820.00



<u>Lifts</u>

ltem		Qnt	Unit	Rate	Total
					60.00
A	Confirmed by NHS DG no works required , to remain as existing.		Item		£0.00
	To Summary				£0.00



# **Builders Works**

Item			Qnt	Unit	Rate	Total
A	Allowance for BWIC with Services	5% of M&E Costs				
		Mechanical Electrical	408,240.00 330,820.00 739,060.00		0.050	£36,953.00
		To Summary				£36,953.00



# Site 01 - External Services

ltem		Qnt	Unit	Rate	Total
	Allowances for external services				
A	Allowance for new water connection	1	item	£10,000.00	£10,000.00
В	Allowance for new gas connection	1	item	£10,000.00	£10,000.00
с	Allowance for new electricity connection	1	item	£7,500.00	£7,500.00
D	Underground Drainage, below building	1257	m2	£20.00	£25,140.00
E	Drainage around building and to hard landscape works and roads	1	ltem	£27,000.00	£27,000.00
F	Drainage Connection to main drains	1	ltem	£10,000.00	£10,000.00
	To Summary				£89,640.00



# Site 01 - External Works

Item		Qnt	Unit	Rate	Total
А	Allowance for removing existing trees	4	nr	£180.00	£720.00
	Allowance for breaking up existing tarmacadam hardstanding and carparking spaces including kerbs and removing from site	2933	m2	£25.00	£73,325.00
С	Allow for precast concrete paving around pavement around building; including all excavation, sub-base, blinding and slabs	316	m	£37.00	£11,692.00
D	Hard landscape to secure courtyards, including all excavation, sub-base, blinding, basecourse and asphalt topping	1085	m2	£40.00	£43,400.00
	Artificial grass surfacing to secure courtyards, including all necessary excavation, drainage, levelling, sub-base, blinding, base course and artificial surfacing	651	m2	£65.00	£42,315.00
F	Allowance for planted areas to secure courtyards; including all necessay excavation, levelling, topsoil, cultivation etc. as necessary, and shrub planting	163	m2	£40.00	£6,520.00
	Alowance for new area of tarmacadam road, including all excavation, sub-base, blinding, basecourse and weating course	889	m2	£40.00	£35,560.00
н	Allowance for new road kerbing and foundation	58	m	£22.00	£1,276.00
J	Allowance for 4.0m high security fencing at courtyards	93	m	£250.00	£23,250.00
	carried forward				£238,058.00



# Site 01 - External Works

ltem		Qnt	Unit	Rate	Total
	brought forward				£238,058.00
А	Allowance for external security lighting at courtyards	1	ltem	£20,000.00	£20,000.00
	Allowance for grassed areas (75% of soft landsape area); including topsoil as necessary, and grass seeding	2545	m2	£15.00	£38,175.00
С	Allowance for planted areas (75% of soft landsape area); including all necessay excavation, levelling, topsoil, cultivation etc. as necessary, and shrub planting	848	m2	£40.00	£33,920.00
D	Alowance for tree planting	4	m2	£150.00	£600.00
	To Summary				£330,753.00



# Site 02 - External Services

ltem		Qnt	Unit	Rate	Total
	Allowances for external services				
А	Allowance for new water connection	1	item	£10,000.00	£10,000.00
В	Allowance for new gas connection	1	item	£10,000.00	£10,000.00
с	Allowance for new electricity connection	1	item	£7,500.00	£7,500.00
D	Underground Drainage, below building	1257	m2	£20.00	£25,140.00
E	Drainage around building and to hard landscape works and roads	1	ltem	£20,100.00	£20,100.00
F	Drainage Connection to main drains	1	ltem	£10,000.00	£10,000.00
	To Summary				£82,740.00



# Site 02 - External Works

Item		Qnt	Unit	Rate	Total
А	Allowance for breaking up existing footpath including edgings and removing from site	729	m2	£25.00	£18,225.00
В	Allow for precast concrete paving around pavement around building; including all excavation, sub-base, blinding and slabs	316	m	£37.00	£11,692.00
С	Hard landscape to secure courtyards, including all excavation, sub-base, blinding, basecourse and asphalt topping	1085	m2	£40.00	£43,400.00
D	Artificial grass surfacing to secure courtyards, including all necessary excavation, drainage, levelling, sub-base, blinding, base course and artificial surfacing	651	m2	£65.00	£42,315.00
E	Allowance for planted areas to secure courtyards; including all necessay excavation, levelling, topsoil, cultivation etc. as necessary, and shrub planting	163	m2	£40.00	£6,520.00
F	Alowance for new area of tarmacadam road, including all excavation, sub-base, blinding, basecourse and weating course	272	m2	£40.00	£10,880.00
G	Allowance for new road kerbing and foundation	201	m	£22.00	£4,422.00
н	Allowance for 4.0m high security fencing at courtyards	93	m	£250.00	£23,250.00
J	Allowance for external security lighting at courtyards	1	ltem	£20,000.00	£20,000.00
	carried forward				£180,704.00



# Site 02 - External Works

Item		Qnt	Unit	Rate	Total
	brought forward				£180,704.00
A	Allowance for grassed areas (75% of soft landsape area); including topsoil as necessary, and grass seeding	2112	m2	£15.00	£31,680.00
В	Allowance for planted areas (75% of soft landsape area); including all necessay excavation, levelling, topsoil, cultivation etc. as necessary, and shrub planting	704	m2	£40.00	£28,160.00
С	Alowance for tree planting	4	m2	£150.00	£600.00
D	Allowance for work to tidy upand for area at end of existing footpath cut of by new developme	1	ltem	£1,500.00	£1,500.00
	To Summary				£242,644.00

### NHS Ayshire & Arran

### National Forensic Adolescent Service for Scotland

25/07/2017	
	hub
	South West Scotland

ATION

							Ad	justment Fact	or						
	Please select the non prime comparator		ealth Centre (DBFM)		Prime Cost	2 Function	3 Complexity	4 Programme	Phasing	7 Volume	Blanning Process	New Project Cap %	Diff %		
					2.3.	2.3.2	2.3.3	2.3.4	2.3.5	2.3.7	2.3.8				
Ref PRICING CAPS	COMPARATOR		%												
A Preliminaries	Health Centre (DBFM)	1	12.45%		0.00%		0.00%	0.00%				12.45%	0.00%		
B Professional Fees Stage 1	Health Centre (DBFM)	1	1.78%		0.00%	0.00%	0.00%					1.78%	0.00%		
C Professional Fees Stage 2	Health Centre (DBFM)	1	3.33%	This table is	0.00%	0.00%	0.00%				0.00%	3.33%	0.00%		
D Professional Fees PFC	Health Centre (DBFM)	1	3.91%	automated from below, do not	0.00%	0.00%	0.00%	0.00%				3.91%	0.00%		
E Desktop Survey	Health Centre (DBFM)	1	0.00	amend			0.00%				0.00%	0.00%	0.00%		
F Risk	Health Centre (DBFM)	1	10.00%									10.00%	0.00%		
G Overhead & Profit	Health Centre (DBFM)	1	4.50%									4.50%	0.00%		
H Hubco Costs	Health Centre (DBFM)	1	1.66%									1.66%	0.00%		
Indicative Programme (months)	•		12										AREA	1,245	T
Adjustments to Prime Costs:															
	rr. If 'Market Test' or 'Benchmark' then complete Ividual element		COMPARATOR	BASE RATE FOR COMPARATOR @3Q12	Prime Cost	Function	py	justment Fact Buuesbood	brasing	Volume	Planning Process	Total Adjustment	Adjusted Rate	Adjusted Cost	EXPLAI
1 SUBSTRUCTURE				£ 130.00								0.00%	£ 130.00	161,850	
2 SUPERSTRUCTURE 2A Frame				221.00								0.00%	£ 221.00	275,145	
2B Upper Floor				0.00								0.00%	£ 221.00	0	
2C Roof				130.00								0.00%	£ 130.00		
2D Stairs				0.00								0.00%	£ -	0	
2E External Walls				284.00								0.00%	£ 284.00		
2F External Windows and Doors				80.00								0.00%	£ 80.00	99,600	
2G Internal Walls and Partitions				117.00								0.00%	£ 117.00		
2H Internal Doors	Total Superstructure			56.00								0.00%	£ 56.00		
3 FINISHES	Total Superstructure			£ 888.00									£ 888.00	1,105,560	
3A Wall Finishes				46.00								0.00%	£ 46.00	57,270	
3B Floor Finishes				75.00				-				0.00%	£ 75.00		
3C Ceiling Finishes				58.00				-				0.00%	£ 58.00		
	Total Finishes			£ 179.00			•	-				0.0070	£ 179.00		
4 FITTINGS AND FURNISHINGS				£ 129.00								0.00%	£ 129.00		
5 SERVICES															
5A Sanitary Appliances				759.00								0.00%	£ 759.00	944,955	
5B Services Equipment												0.00%	£ -	0	
5C Disposal Installations												0.00%	£ -	0	
5D Water Installations												0.00%	£ -	0	
5E Heat Source								_				0.00%	£ -	0	
5F Space Heating and Air Conditioning								_				0.00%	£ -	0	
5G Ventilating System 5H Electrical Installations								_			_	0.00%	£ -	0	
								-				0.00%	£ -	0	
51 Fuel Installations 51 Lift and Conveyor Installations								_				0.00%	£ -	0	
55 Fire and Lighting Protection								-			-	0.00%	£ - £ -	0	
5L Communications and Security Installations								-			-	0.00%	£ -	0	
5M Special Installations								-				0.00%	£ -	0	
5N Builder's Work in Connection												0.00%	£ -	0	
50 Management of the Commissioning of Servi	Ces											0.00%	£ -	0	

5J Lift and Conveyor Installations					0.00%	£	-	0	
55 Fire and Lighting Protection					0.00%	£	-	0	
5L Communications and Security Installations					0.00%	£	-	0	
5M Special Installations					0.00%	£	-	0	
5N Builder's Work in Connection					0.00%	£	-	0	
Communications and Security Installations     Security Installations     Sh Builder's Work in Connection     So Management of the Commissioning of Services					0.00%	£	-	0	
I otal Services	£ 759.00					£	759.00	944,955	
6 BUILDING SUB-TOTAL	£ 2,085.00					£	2,085.00	2,595,825	
EA         EXTERNAL WORKS           GB         Site Works           C         Drainage           6D         External Services           6E         Minor Building Works									
6B Site Works	350.00				0.00%	£	350.00	435,750	
6C Drainage					0.00%	£	-	0	
6D External Services	60.00				0.00%	£	60.00	74,700	
6E Minor Building Works					0.00%	£	-	0	
7 Demolition and Work Outside the Site					0.00%	£	-		
Total External Works	£ 410.00					£	410.00	510,450	
ADJUSTED PRIME SUM						£	2,495.00	3,106,275	

					NON PRIME A	djustment Fa	actor						
NON PRIME COST ADJUSTMENTS	THIS COLUMN IS FOR INFORMATION ONLY. IT SHOWS THE BASE COMPARATOR FROM PROFORMA 2	MAXIMUM ALLOWABLE CAP	2.3.1 Prime Cost	2.3.2 Function	3.3 Complexity	2.3.4 Programme	2.3.5 Phasing	2.3.7 Volume	3.8 Planning Process	New Project Cap %	Diff %	PRICE	
1. Prime Cost (£,k)	4,800,000	3,106,275	2.3	2.3	2.3	2.3	2.3	2.3	2.3	0.00%	0.00%	3,106,275	
0 Particularia													
2. Preliminaries Carried forward from Pro-Forma 1 (Separate sheet) (£,k)	597,626	386,748	Insert proposi	ed adjustments								386,748	
Preliminaries (%)	12.45%	12.45%								12.45%	0.00%	12.45%	
3.Sub-Total (1 + (1 × 2))	5,397,626	3,493,023										3,493,023	
4. Risk %													
a. Design development risks	9.00% 1.00%	9.00% 1.00%								5.00%	-4.00% 4.00%	5.00% 5.00%	
b. Construction risks										5.00%	4.00%		
c. Risk Total (%) (Sum 4a-b)	10.00%	10.00%										10.00%	
d. Risk Total (£,k) (3 x 4c)	539,763	349,302										349,302	
5. Sub-Total (£,k) (3+4d)	5,937,388	3,842,325										3,842,325	
6. Professional Team Fees (%) (Post Financial Close) (Proforma 9 Part 1)	0.000/	0.000/	Insert adjustn	ent for each se	rvice, no service	to exceed C	AP			0.0001		0.000/	
a. Project Manager	0.00%	0.00%								0.00%	0.00%	0.00%	
b. Architect c. Structural Engineer	0.58%	0.58%								0.58%	0.00%	0.58%	
d. Services Engineer	0.78%	0.78%								0.78%	0.00%	0.78%	
e. Civil Engineer	0.12%	0.12%								0.12%	0.00%	0.12%	
f. Quantity Surveyor	0.19%	0.19%								0.19%	0.00%	0.19%	
g. Landscape Architect	0.09%	0.09%								0.09%	0.00%	0.09%	
h. BREEAM Consultant	0.12%	0.12%								0.12%	0.00%	0.12%	
i. Environmental Consultant j. Acoustic Consultant	0.00%	0.00%								0.00%	0.00%	0.00%	
k. Fire Engineering Consultant	0.12%	0.12%								0.12%	0.00%	0.12%	
I. CDM Co-ordinator	0.07%	0.07%								0.07%	0.00%	0.07%	
m. DDA Consultant	0.00%	0.00%								0.00%	0.00%	0.00%	
n. Traffic Consultant	0.00%	0.00%								0.00%	0.00%	0.00%	
o. Other fees (including legal)	0.50%	0.50%								0.50%	0.00%	0.50%	
p. Professional Team Fees Total (%) (Sum 6a-o)	3.91%	3.91%										3.91%	
q. Professional Team Fees Total (£,k) (3 x 6p)	210,799	136,416										136,416	
7. Total Excluding Overheads, Profit and Risk (£,k) (3+6q)	5,608,424	3,629,439										3,629,439	
8. Overheads and Profit (%)										Insert proposed figures,	not to average CAR-		
a. Main Contractors overheads	3.00%	3.00%								3.00%	0.00%	3.00%	
b. Main Contractors profit	1.50%	1.50%								1.50%	0.00%	1.50%	
c. Overheads and Profit Total (%) (Sum 8a-b)	4.50%	4.50%										4.50%	
d. Overheads and Profit Total (£,k) (7 x 8c)	252,379	163,325										163,325	
9. Indicative Construction Costs Total (£,k) (4d+7+8d)	6,400,566	4,142,066										4,142,066	
	1	1											

	NHS Ays	shire & Arran					25/07/2017
N	ational Forensic Adol	escent Service for	Scotland				hub
10. New Project Development Fee (Stage 1) (Proforma 9 Part 2)							South West Scotland
10.1. Fees for Professional Services (%) a. Project Manager	0.35%	0.350%	nsert adjustment for each service, no service to exceed CAP		0.35% 0.0		
b. Architect c. Structural Engineer	0.26% 0.13%	0.26% 0.13%			0.26% 0.0 0.13% 0.0	0% 0.26% 0% 0.13%	
d. Services Engineer e. Civil Engineer f. Oeservices	0.10% 0.05%	0.10% 0.05%			0.10% 0.0 0.05% 0.0	0% 0.05%	
f. Quantity Surveyor g. Landscape Architect h. BREEAM Consultant	0.48% 0.02% 0.03%	0.48% 0.02% 0.03%			0.48% 0.0 0.02% 0.0 0.03% 0.0	0.02%	
DREEAW Consultant     Environmental Consultant     Acoustic Consultant	0.05%	0.05%			0.03% 0.0 0.05% 0.0 0.04% 0.0	0% 0.05%	
k. Fire Engineering Consultant 1. CDM Co-ordinator	0.00%	0.00%			0.00% 0.0	0.00%	
n. DDA Consultant n. Traffic Consultant	0.05%	0.05%			0.05% 0.0 0.03% 0.0	0.05%	
o. Hard FM advice p. Other fees (including legal)	0.11% 0.00%	0.11% 0.00%			0.11% 0.0 0.00% 0.0	0% 0.11% 0% 0.00%	
<ul> <li>Q. Outline Planning (as identified in Proforma 10)</li> </ul>	0.06%	0.06%			0.06% 0.0	0% 0.06%	
r. Stage 1 Fees for Professional Services Total (%) (Sum 10.1a-q)	1.78%	1.78%				1.78%	
s. Stage 1 Fees for Professional Services Total (£,k) (3 x 10.1r)	96,346	62,349				62,349	
10.2 Desktop Survey Fee a. Desktop Survey fee (£,k)	10000	10000	Insert adjustment for each service, no service to ex	exceed CAP	0.00% 0.0	0% 10000	
b. Desktop Survey Fee Total (£,k)	10,000	10,000				10,000	
10.3 Statutory Fees			Insert adjustment for each service	ce, no service to exceed	d CAP		
a. Outline Planning Consent (£,k)	2,000	2,000				2,000	
b. Total Statutory Fees (£, k) (Sum 10.3a)	2,000	2,000				2,000	
c. Statutory Fees Total % mark up on 10.3b	0.00%	0.00%				0.00%	
d. Statutory Fees Total (£,k) (10.3b x 10.3c)	0	0				0	
10.4. Additional Stage 1 items that the Tenderer considers necessary							
a. Additional Istage 1 items that the Tenderer considers necessary	0.35%	0.35%			0.35% 0.0	0.35%	
b. Additional items Total (£,k) (3 x 10.4a)	18,892	12,226			0.0	12,226	
10.5 Survey Fees a. Topographic Survey fee	3,000	3,000	Insert adjustment for each service	ce, no service to exceed	d CAP	3,000	
b. Site investigation fee c. Geotechnical report	23,000 5,000	23,000 5,000				23,000 5,000	
d. Asbestos e. Condition Report	0 1,000	0 1,000				0 1,000	
f. Total Survey cost (sum 10.5a-e)	32,000	32,000				32,000	
g. Survey Fees Total % mark up on 10.5f	0.00%	0.00%				0.00%	
h. Survey Fees Total (£,k) (10.5f x 10.5g)	0	0				0	
		Ū					
10.6. Sum of Stage 1 costs (Sum 10.1s,10.2b, 10.3d, 10.4b, 10.5h)	125,238	84,575				84,575	
11. New Project Development Fee (Stage 2) (Proforma 9 Part 3) 11.1. Fees for Professional Services (%)			nsert adjustment for each service, no service to exceed CAP				
a. Project Manager b. Architect	0.70% 0.77%	0.70% 0.77%			0.70% 0.0 0.77% 0.0	0% 0.77%	
c. Structural Engineer d. Services Engineer	0.18% 0.10%	0.18% 0.10%			0.18% 0.0 0.10% 0.0	0% 0.10%	
e. Civil Engineer f. Quantity Surveyor	0.08% 0.69%	0.08%			0.08% 0.0 0.69% 0.0	0.69%	
g. Landscape Architect h. BREEAM Consultant	0.07% 0.03%	0.07% 0.03%			0.07% 0.0 0.03% 0.0	0.03%	
i. Environmental Consultant j. Acoustic Consultant	0.02% 0.04%	0.02% 0.04%			0.02% 0.0 0.04% 0.0	0.04%	
k. Fire Engineering Consultant I. CDM Co-ordinator	0.12%	0.12% 0.01%			0.12% 0.0 0.01% 0.0	0.01%	
m. DDA Consultant n. Traffic Consultant	0.08%	0.08%			0.08% 0.0 0.03% 0.0	0.03%	
o. Hard FM advice p. Other fees (Proforma 9)	0.22%	0.22%			0.22% 0.0 0.00% 0.0	0.00%	
q. Detailed Planning (as identified in Proforma 10)     r. Professional Team Fees Total (%) (Sum 11.1a-g)	0.21%	0.21%			0.21% 0.0	0.21%	
r. Professional feam Pees fotal (%) (Sum 11.1a-q)	3.33%	3.33%				3.33%	
s. Professional Team Fees Total (£,k) (3 x 11.1r)	179,882	116,409				116,409	
11.2 Statutory Fees							
a. Detailed Planning Consent (£,k)	15,000	15,000	Insert adjustment for each service	ce, no service to exceed	d CAP	15,000	
b. Building Warrant (£,k)	14,000	14,000				14,000	
c. Total Statutory Fees (sum 11.2a+b)	29,000	29,000				29,000	
d. Statutory Fees Total % mark up on 11.2c	0.00%	0.00%				0.00%	
e. Statutory Fees Total (£,k) (11.2c x 11.2d)	0	0				0	
11.3 Additional Stage 2 items that the Tenderer considers necessary							
a. hubco Portion (% of item 3)	0.56%	0.56%			0.56% 0.0	0.56%	
b. Additional Items (%) Pro-forma 12	0.00%	0.00%			0.00% 0.0		
c. Additional items (%) Pro-Forma 8	0.75%	0.75%			0.75% 0.0		
d. Additional items Total (£,k) ((11.3a x 3)+(11.3b x 3)+(11.3c x 3))	70,709	45,759				45,759	
44 A huban EN Market test and the ODEN and A							
11.4 hubco FM Market test costs (DBFM only)	0	0				0	
<ul> <li>a. Indicative annual Hard FM cost (£,k)</li> <li>b. % of Hard FM services cost to Market Test (% of 11.4a)</li> </ul>	0.00%	0				0.00%	
<ul> <li>b. % of Hard FM services cost to Market Test (% of 11.4a)</li> <li>c. Market Test costs (£,k) (11.4a x 11.4b)</li> </ul>	0.00%	0.00%				0.00%	
11.5 Sum of Stage 2 costs (Sum 11.1s, 11.2e, 11.3d, 11.4c)	250590	162,167				162167	
12. New Project Development Fee Total (£,k) (10.6+11.5)	375828	246,742				246742	
13. Additional fees Tenderer proposes (if required)							
a. % of sub total (3) - Profoma 11	0.77% 41,562	0.77%			0.77% 0.0		
b. Additional fees total (£,k) (13a x 3)	41,302	26,896				26,896	
Add in Surveys	63,000	63,000				63,000	
14. Indicative New Project Total (£,k) (9+12+13b)	6,880,956	4,478,705				4,478,705	
						, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
15. Add-ons per project a. Total Add-on (£, k) per Project (14 less 1)	2,080,956	1,372,430				1,372,430	
INFLATION Current Day Indicies 3Q2017							
Financial Close 2Q 2018	2.00%	89,574				89,574	
FIXED PRICE		4,568,279				4,568,279	
							L

PLEASE SCHEDULE OUT ANY ASSUMPTIONS IN RELATION TO YOUR PRICE	

### Benchmark

### Appendix J - AEDET Refresh NSAIS

### **National Adolescent Secure Inpatient Service**

Functionality	Build Quality			Impact	
Use	Weight Score Notes Performance		Weight Score Notes	Character and Innovation	Weight
The prime functional requirements of the brief are satisfied	1 2 YES D.01 The building and grounds are ea	asy to operate		G.01 There are clear ideas behind the design of the building and grounds	2
The design facilitates the care model	2 YES D.02 The building and grounds are ea	asy to clean and maintain		G.02 The building and grounds are interesting to look at and move around in	1
Overall the design is capable of handling the projected throughput	1 YES D.03 The building and grounds have	appropriately durable finishes and components	1 2 YES	G.03 The building, grounds and arts design contribute to the local setting	1
Work flows and logistics are arranged optimally	1 2 YES D.04 The building and grounds will w	veather and age well	1 2 YES	G.04 The design appropriately expresses the values of the NHS	1
The design is sufficiently flexible to respond to clinical /service change and to enable expansion	1 2 YES D.05 Access to daylight, views of natu	ure and outdoor space are robustly detailed	1	G.05 The project is likely to influence future designs	1
Where possible spaces are standardised and flexible in use patterns	1 3 YES D.06 The design maximises the oppo	rtunities for sustainability e.g. waste reduction and biodiversity	1 2 YES	G.06 The design provides a clear strategy for future adaptation and expansion	1
The design facilitates both security and supervision	2 YES D.07 The design minimises maintena	ance and simplifies this where it will be required	1 2 YES	G.07 The building, grounds and arts design contribute to well being and a sustainable therapeutic strategy	1
		Statement in relation to PERFORMANCE are met	0 2	G.08 The benchmarks in the Design Statement in relation to CHARACTER & INNOVATION are met	0
The design facilitates health promotion and equality for staff, patients and local community	1 2 YES D.08 The benchmarks in the Design S	statement in relation to FEM ONWANCE are met			
The design facilitates health promotion and equality for staff, patients and local community The design is sufficiently adaptatable to external changes e.g. Climate, Technology	1         2         YES         D.08         The benchmarks in the Design S           1         1         YES				
					,
The design is sufficiently adaptatable to external changes e.g. Climate, Technology				-	
The design is sufficiently adaptatable to external changes e.g. Climate, Technology			Weight Score Notes	- · ·	Weight
The design is sufficiently adaptatable to external changes e.g. Climate, Technology The benchmarks in the Design Statement in relation to building USE are met	1 YES			- · ·	1
The design is sufficiently adaptatable to external changes e.g. Climate, Technology The benchmarks in the Design Statement in relation to building USE are met Access	1     I     YES       0     I     I       weight     Score     Notes       2     4     Yes       E.01     The engineering systems are weight		1 2 YES	Form and Materials	Weight 1 2
The design is sufficiently adaptatable to external changes e.g. Climate, Technology The benchmarks in the Design Statement in relation to building USE are met Access There is good access from available public transport including any on- site roads	1     I     YES       0     I     I       weight     Score     Notes       2     4     Yes       E.01     The engineering systems are weight	ell designed, flexible and efficient in use t any benefits from standardisation and prefabrication where relevant	1 2 YES 1 2 YES	Form and Materials H.01 The design has a human scale and feels welcoming	1
The design is sufficiently adaptatable to external changes e.g. Climate, Technology The benchmarks in the Design Statement in relation to building USE are met Access There is good access from available public transport including any on- site roads There is adequate parking for visitors/ staff cars/ disabled people	1     I     YES       0     Image: Score state s	ell designed, flexible and efficient in use t any benefits from standardisation and prefabrication where relevant	1         2         YES           1         2         YES           1         2         YES	Form and Materials H.01 The design has a human scale and feels welcoming H.02 The design contributes to local microclimate, maximising sunlight and shelter from prevailing winds	1
The design is sufficiently adaptatable to external changes e.g. Climate, Technology The benchmarks in the Design Statement in relation to building USE are met Access There is good access from available public transport including any on- site roads There is adequate parking for visitors/ staff cars/ disabled people The approach and access for ambulances is appropriately provided	1     I     YES       0     Image: Score state s	ell designed, flexible and efficient in use t any benefits from standardisation and prefabrication where relevant ergy efficient rstems that are designed to minimise disruption	1         2         YES           1         2         YES           1         2         YES	Form and Materials H.01 The design has a human scale and feels welcoming H.02 The design contributes to local microclimate, maximising sunlight and shelter from prevailing winds H.03 Entrances are obvious and logical in relation to likely points of arrival on site	1
The design is sufficiently adaptatable to external changes e.g. Climate, Technology The benchmarks in the Design Statement in relation to building USE are met Access There is good access from available public transport including any on- site roads There is adequate parking for visitors/ staff cars/ disabled people The approach and access for ambulances is appropriately provided Service vehicle circulation is well considered and does not inappropriately impact on users and staff	I     YES       0     Vest       2     4       Yes     E.01       1     3       YES     E.02       1     3       YES     E.03       1     3       YES     E.04       The engineering systems are one       2     YES       E.03     The engineering systems are one       2     YES       E.04     There are emergency backup sy       1     2       YES     E.05       During construction disruption for	ell designed, flexible and efficient in use t any benefits from standardisation and prefabrication where relevant ergy efficient rstems that are designed to minimise disruption	1         2         YES           1         2         YES           1         2         YES	Form and Materials H.01 The design has a human scale and feels welcoming H.02 The design contributes to local microclimate, maximising sunlight and shelter from prevailing winds H.03 Entrances are obvious and logical in relation to likely points of arrival on site H.04 The external materials and detailing appear to be of high quality and are maintainable	1
The design is sufficiently adaptatable to external changes e.g. Climate, Technology The benchmarks in the Design Statement in relation to building USE are met Access There is good access from available public transport including any on- site roads There is adequate parking for visitors/ staff cars/ disabled people The approach and access for ambulances is appropriately provided Service vehicle circulation is well considered and does not inappropriately impact on users and staff Pedestrian access is obvious, pleasant and suitable for wheelchair/ disabled/ impaired sight patients	I     YES       0     Vest       2     4       Yes     E.01       1     3       YES     E.02       1     3       YES     E.03       1     3       YES     E.04       The engineering systems are one       2     YES       E.03     The engineering systems are one       2     YES       E.04     There are emergency backup sy       1     2       YES     E.05       During construction disruption for	ell designed, flexible and efficient in use It any benefits from standardisation and prefabrication where relevant lergy efficient stems that are designed to minimise disruption to essential services is minimised to essential healthcare services is minimised	1         2         YES           1         2         YES           1         2         YES	Form and Materials H.01 The design has a human scale and feels welcoming H.02 The design contributes to local microclimate, maximising sunlight and shelter from prevailing winds H.03 Entrances are obvious and logical in relation to likely points of arrival on site H.04 The external materials and detailing appear to be of high quality and are maintainable H.05 The external colours and textures seem appropriate and attractive for the local setting	1
The design is sufficiently adaptatable to external changes e.g. Climate, Technology The benchmarks in the Design Statement in relation to building USE are met Access There is good access from available public transport including any on- site roads There is adequate parking for visitors/ staff cars/ disabled people The approach and access for ambulances is appropriately provided Service vehicle circulation is well considered and does not inappropriately impact on users and staff Pedestrian access is obvious, pleasant and suitable for wheelchair/ disabled/ impaired sight patients Outdoor spaces wherever appropriate are usable, with safe lighting indicating paths, ramps, steps etc.	I     YES       0     Image: Score state stat	ell designed, flexible and efficient in use It any benefits from standardisation and prefabrication where relevant lergy efficient stems that are designed to minimise disruption to essential services is minimised to essential healthcare services is minimised	1         2         YES           1         2         YES	Form and Materials H.01 The design has a human scale and feels welcoming H.02 The design contributes to local microclimate, maximising sunlight and shelter from prevailing winds H.03 Entrances are obvious and logical in relation to likely points of arrival on site H.04 The external materials and detailing appear to be of high quality and are maintainable H.05 The external colours and textures seem appropriate and attractive for the local setting H.06 The design maximises the site opportunities and enhances a sense of place	1

C.01	The design achieves appropriate space standards
------	---

C.02 The ratio of usable space to total area is good

C.03 The circulation distances travelled by staff, patients and visitors is minimised by the layout

C.04 Any necessary isolation and segregation of spaces is achieved

- C.05 The design maximises opportunities for space to encourage informal social interaction & wellbeing
- C.06 There is adequate storage space
- C.07 The grounds provided spaces for informal/ formal therapeutic health activities

AEDET Refresh Benchmark Summary

C.08 The relationships between internal spaces and the outdoor environment work well

- C.09 The benchmarks in the Design Statement in relation to building SPACE are met
- YES YES 1 2 YE 2 0

tes		Construction
ES	F.01	If phased planning and construction are necessary the various stages are well organised
	F.02	Temporary construction work is minimised
ES	F.03	The impact of the building process on continuing healthcare provision is minimised
ES	F.04	The building and grounds can be readily maintained
S	F.05	The construction is robust
	F.06	Construction allows easy access to engineering systems for maintenance, replacement & expansion
S	F.07	The construction exploits opportunities from standardisation and prefabrication where relevant
S	F.08	The construction maximises the opportunities for sustainability e.g. waste and traffic reduction
	F.09	The construction contributes to being a good neighbour

F.10 Infection control risks for options, design and construction recorded/ minimised using HAI Scribe

I.01 The design reflects the dignity of patients and allows I.02 The design maximises the opportunities for daylight/ 1.03 The design maximises the opportunities for access to 1.04 There are high levels of both comfort and control of 1.05 The design is clearly understandable and wayfinding i 1.06 The interior of the building is attractive in appearance 1.07 There are good bath/ toilet and other facilities for pat 1.08 There are good facilities for staff with convenient place 1.09 There are good opportunities for staff, patients, visito I.10 The benchmarks in the Design Statement in relation t

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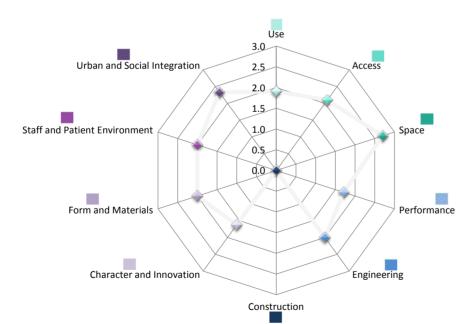
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### Urban and Social Integration

- J.01 The height, volume and skyline of the building relate
- J.02 The facility contributes positively to its locality
- J.03 The hard and soft landscape contribute positively to
- J.04 The overall design contributes positively to neighbour
- J.05 There is a clear vision behind the design, its setting an
- J.06 The benchmarks in the Design Statement in relation



Weighting	
2	
1	
0	



### AEDET Refresh v1.1 Feb 2016

	Weight	Score	Notes
s for appropriate levels of privacy	2	2	YES
/ views of green natural landscape or elements	1	2	YES
o usable outdoor space	1	2	YES
f comfort	1	2	YES
g is intuitive	1	2	
ce	1	2	YES
atients	1	3	YES
aces to work and relax without being on demand	2	2	YES
tors to use outdoors to recuperate/ relax	1	1	YES
to STAFF & PATIENT ENVIRONMENTare met	0		
	Weight	Score	Notes
e well to the surrounding environment	1	3	YES
	1	3	
o the locality	1	3	YES
urhood and is sensitive to passers-by	1	3	YES
and outdoor spaces	2	1	
to INTEGRATION are met	0		

Benchmark
1.9
2.1
2.7
1.7
2.0
0.0
1.6
2.0
2.0
2.3

=	Target	
=>	5 - 6	
>	3 - 4	
<	3	



### Appendix J - AEDET Refresh NSAIS

### AEDET Refresh v1.1 Feb 2016

### National Adolescent Secure Inpatient Service

💘 Ref	Note
A.01	A -1, B - 1 A is not functional sufficient. B more functionality
A.02	A - 1, B - 4 model of care is very good. Overall 2, rehab in B is still not sufficient.
A.03	A - 1, B - 1 no spare capacity. Cross border transfers are challenging for option A. Throughput for A, staff did try and accommodate patients.
A.04	A - 1, B - 4, for circulation for patients, flows, arrival. New facility will have separate entrances. Still issues regarding access FM and patient routes Overall 2.
A.05	A - 1, B - 3 flexible design, Old building reduces flexibility - no future upgrades available.
A.06	A - 3, B - 3 series of room that can be used flexibily, enough standardisation to allow functions to move on. Sufficient size rooms, space standards generous
A.07	A - 2, B - 3, supervised and space, limited views and could hear, passive observation not good in B although it has been modernised.
A.08	A - 2, B - 2. B has - elements of Health promotion for patient groups built into the faiclity. A - great opportunities for health promotion across site but neight access and
A.09	A - 1, B - 1. Both are hard to adaptability to outside influences as they are victorian buildings.
A.10	
B.01	A - 4, B - 4. A - good local transport links, B - good local and national transport links.
B.02	A - 4, B - 2 A - good numbers of car parking for all, B - limited parking facilities.
B.03	A - 3, B - 3 . A Both okay ambulance access provided.
B.04	A - 1, B - 1 . Separate service vehicles not provided.
B.05	A - 1, B - 2. Pedestrian access is not DDA as there are stairs at main entrance for A, B??
B.06	A - 1, B - 4. A is very poor for dedicated space, B - has outdoor space ie basketball court
B.07	A - 3 , B - 1 . Active travel and green routes. A - has good woodland walks. Limited walking area in B.
B.08	A - 5, B - 2. A - car parking is not in front of entrance. Easy access to transport links. B - very poor as car park is right up at the door and taxis drive up.
B.09	
C.01	A - 3 , B - 4 . A - good space standards, B - other activity spaces available
C.02	A - 5, B - 5. Usable space in A and B is adequate, all spaces are used. No spare space or capacity.
C.03	A - 5 , B - 4 . A - compact circulation space. B - more activity areas as they are more spread out.
C.04	A - 1 , B - 4 . A - limited privacy, safety, noisy and quiet areas, isolation areas available. B - more areas available.
C.05	A - 1, B - 3. A - one area for social interaction. B - more areas for social interaction, choice in rooms available.
C.06	A - 1, B - 1. Storage limited within A and B.
C.07	A - 2, B - 4. A - dedicated outdoors space poor but wider site good. B - better range of facilities that do not require escort to access.
C.08	A - 1, B - 3 . A - no dedicated outdoor space. B - better access to outdoor space.
C.09	
D.01	A - 2, ageing building and infrastructure
D.02	A - 2, ageing building and infrastructure
D.03	A - 2, ageing building and infrastructure
D.04	A - 2 , ageing building and infrastructure
D.05	
D.06	A - 2, Victorian design not adaptable.
D.07	A - 1, Victorian design not adaptable.
D.08	A-2
E.01	A - 2, ageing infrastructure
E.02	A - 2, ageing infrastructure
E.03 E.04	A - 2, ageing infrastructure A - 2, acceptable but old
E.04	A - 2
E.05	A-2 A-2
E.06	
F.01	A - 2, ageing but zoned.
F.01	
F.03	
F.04	
F.05	
F.06	
F.07	
F.08	
F.09	
F.10	
G.01	A - 2, B - 2. A - original buildings had clear ideas behind the design of the buildings and grounds, however this has been impacted on.
G.02	A - 2, B - 2. A - internal buildings are poor however gardens are good. B - no WOW factor. New facility should not be secretative and should have impact.
G.03	A - 3, B - 2. A has historical nostalgia, good woodland walks well used. B - no woodland walk or community amenity within grounds, over developed.
G.04	A - 1, B - 1.
G.05	A - 1, B - 1.
G.06	A - 2, B - 2. Limited therapeutic environment.
G.07	A -1, B - 1.
G.08	
H.01	A - 1 , B - 1. A - not particularly welcoming, feels institutional.
H.02	A - 1, B - 2. A has limited sunlight.
H.03	A - 3, B - 1. A has good wayfinding and entrance is obvious.
H.04	A - 3, B - 3 . Good sandstone with slate roof construction. Main materials are very durable, detailing of roof, guttering are also easy maintain.
H.05	A - 4, B - 2. A - all nearby buildings same colours and textures. B - Colours and textures are good but rest of the environment has changed.
H.06	A - 2 , B - 2 . A - protected space is poor for patients.
H.07	
1.01	A - 1, B - 4 . A - no privacy, B - has good privacy.
1.02	A - 1 , B - 2. A has views of green space from communal but doesn't have green space within facility.
1.03	A - 1, B - 4.
1.04	A - 1, B - 4. A has limited control of heating, cooling, light and noise. B has done the best it can given the constraints. A - 2, B - 2. A has limited options for moving.
1.05	A - 1, B - 3. A does not teel homely, light or airy. B does teel homely.
1.07	A - 3, B - 3 . A has ensuite facilities, bathroom but bedroom space allows easy access to patients. B does not have hoists or ensuite for all.
1.08	A - 2, B - 2. Staff in A could leave the building and dining facilities close by but staff did not leave ward. B - dining facility not close by.
1.08	A - 2, B - 1. A did not have ready access to outdoor space for patients, building does not enable outdoor access. B - no where to go in grounds.
1.10	2. 2.1. 2.1. 2.1. Construction of the const
J.01	A - 5 , B - 2. A does relate well to environment. B - has been adapted over years.
J.01	A -3, B - 3. Both facilities contributes positively to its locality.
J.02	A - 5, B - 2. A has a particularly positive landscape within the locality.
J.04	A - 3, B - 4. Have to go out your way to get to facility.
J.05	A - 1, B - 1. A and B have no clear vision
J.06	

High = High Pric	iority to the Project (2)	
Normal = Desira	rable (1)	
Zero = Not Appl	plicable (0)	
Scoring		
Virtually Total A	Agreement (6)	
Strong Agreeme	ient (5)	
Fair Agreement	it (4)	
Little Agreemer	nt (3)	
Hardly Any Agre	reement (2)	
Virtually No Age	greement (1)	
Unable to Score	re (0)	

### Guidance for Initial Agreement Stage

Weighting

1 AEDET Target (& Benchmark) to be set at IA Stage and must be submitted for NDAP as ANNEX 1 to the Design Statement 2 The OBC and FBC Stage AEDET reviews will be monitored against IA Stage. Boards will require to provide

an explanation of the reason for deviation from the IA Target 3 The note section to be completed to provide further briefing information

4 If any of the criteria is weighted as zero (not applicable) a note should state the reason for this

5 Boards may add project specific criteria. A note must be provided stating the reason for this.
6 Key actions arising from AEDET discussions to be recorded

Actions	by date	Owner	Complet
Arrange site visits to English Secure facilities.	Jan-18	EMcClure	
Ensure Design Team have working knowledge of Secure Adolescent facilities.	Jan-18	Ifairley	
		1	
		1	
		ł	
		1	
		1	



Benchmark



### National Adolescent Secure Inpatient Service

Functionality		Build Quality		Impact	
Use	Weight Score Notes	Performance	Weight Score Note	s Character and Innovation	Weight Score Note
A.01 The prime functional requirements of the brief are satisfied	1 4 D.	01 The building and grounds are easy to operate	1 4	G.01 There are clear ideas behind the design of the building and grounds	2 5
A.02 The design facilitates the care model	2 5 D.	02 The building and grounds are easy to clean and maintain	1 4	G.02 The building and grounds are interesting to look at and move around in	1 4
A.03 Overall the design is capable of handling the projected throughput	1 4 D.	03 The building and grounds have appropriately durable finishes and components	1 4	G.03 The building, grounds and arts design contribute to the local setting	1 4
A.04 Work flows and logistics are arranged optimally	1 4 D.	04 The building and grounds will weather and age well	1 4	G.04 The design appropriately expresses the values of the NHS	1 4
A.05 The design is sufficiently flexible to respond to clinical /service change and to enable expansion	1 4 D.	05 Access to daylight, views of nature and outdoor space are robustly detailed	1 4	G.05 The project is likely to influence future designs	1 4
A.06 Where possible spaces are standardised and flexible in use patterns	1 4 D.	06 The design maximises the opportunities for sustainability e.g. waste reduction and biodiversity	1 4	G.06 The design provides a clear strategy for future adaptation and expansion	1 4
A.07 The design facilitates both security and supervision	2 5 D.	07 The design minimises maintenance and simplifies this where it will be required	1 4	G.07 The building, grounds and arts design contribute to well being and a sustainable therapeutic strategy	1 4
A.08 The design facilitates health promotion and equality for staff, patients and local community	1 4 D.	08 The benchmarks in the Design Statement in relation to PERFORMANCE are met	2 5	G.08 The benchmarks in the Design Statement in relation to CHARACTER & INNOVATION are met	2 5
A.09 The design is sufficiently adaptatable to external changes e.g. Climate, Technology	1 4				
A.10 The benchmarks in the Design Statement in relation to building USE are met	2 5				
Access	Weight Score Notes	Engineering	Weight Score Note		Weight Score Note
B.01 There is good access from available public transport including any on- site roads	2 5 E.(	01 The engineering systems are well designed, flexible and efficient in use	1 4	H.01 The design has a human scale and feels welcoming	1 4
B.02 There is adequate parking for visitors/ staff cars/ disabled people	1 4 E.(	02 The engineering systems exploit any benefits from standardisation and prefabrication where relevant	1 4	H.02 The design contributes to local microclimate, maximising sunlight and shelter from prevailing winds	2 5
B.03 The approach and access for ambulances is appropriately provided	1 4 E.(	03 The engineering systems are energy efficient	1 4	H.03 Entrances are obvious and logical in relation to likely points of arrival on site	1 4
B.04 Service vehicle circulation is well considered and does not inappropriately impact on users and staff	2 5 E.C	04 There are emergency backup systems that are designed to minimise disruption	1 4	H.04 The external materials and detailing appear to be of high quality and are maintainable	2 5
B.05 Pedestrian access is obvious, pleasant and suitable for wheelchair/ disabled/ impaired sight patients	1 4 E.	05 During construction disruption to essential services is minimised	1 4	H.05 The external colours and textures seem appropriate and attractive for the local setting	1 4
B.06 Outdoor spaces wherever appropriate are usable, with safe lighting indicating paths, ramps, steps etc.	1 4 E.	06 During maintenance disruption to essential healthcare services is minimised	1 4	H.06 The design maximises the site opportunities and enhances a sense of place	1 4
B.07 Active travel is encouraged and connections to local green routes and spaces enhanced	1 4 E.	07 The design layout contributes to efficient zoning and energy use reduction	1 4	H.07 The benchmarks in the Design Statement in relation to FORM & MATERIALS are met	2 5
B.08 Car parking and drop-off should not visually dominate entrances or green routes	1 4				
B.09 The benchmarks in the Design Statement in relation to building ACCESS are met	2 5				

### Space

- C.01 The design achieves appropriate space standards
- C.02 The ratio of usable space to total area is good
- C.03 The circulation distances travelled by staff, patients and visitors is minimised by the layout
- C.04 Any necessary isolation and segregation of spaces is achieved
- C.05 The design maximises opportunities for space to encourage informal social interaction & wellbeing
- C.06 There is adequate storage space
- C.07 The grounds provided spaces for informal/ formal therapeutic health activities
- C.08 The relationships between internal spaces and the outdoor environment work well
- C.09 The benchmarks in the Design Statement in relation to building SPACE are met
- Construction Weight Score Notes F.01 If phased planning and construction are necessary the various stages are well organised F.02 Temporary construction work is minimised F.03 The impact of the building process on continuing healthcare provision is minimised 2 F.04 The building and grounds can be readily maintained 1 F.05 The construction is robust F.06 Construction allows easy access to engineering systems for maintenance, replacement & expansion F.07 The construction exploits opportunities from standardisation and prefabrication where relevant F.08 The construction maximises the opportunities for sustainability e.g. waste and traffic reduction F.09 The construction contributes to being a good neighbour

F.10	Infection control risks for options, design and construction recorded/ minimised using HAI Scribe

### Staff and Patient Environment Weight Score Notes I.01 The design reflects the dignity of patients and allows for appropriat 1.02 The design maximises the opportunities for daylight/ views of green 1.03 The design maximises the opportunities for access to usable outdoor 1.04 There are high levels of both comfort and control of comfort I.05 The design is clearly understandable and wayfinding is intuitive 1.06 The interior of the building is attractive in appearance I.07 There are good bath/ toilet and other facilities for patients 1.08 There are good facilities for staff with convenient places to work and 1.09 There are good opportunities for staff, patients, visitors to use outdo 1.10 The benchmarks in the Design Statement in relation to STAFF & PATI

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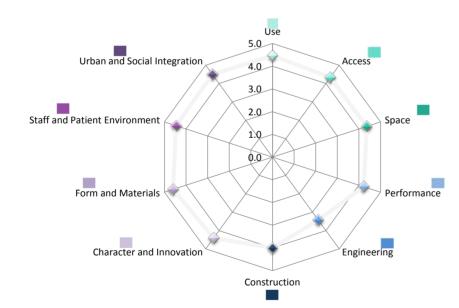
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### AEDET Refresh Target Summary



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# Urban and Social Integration

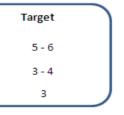
$\left( \right)$	Weighting	=
	2	=>
	1	>
	0	<

### AEDET Refresh v1.1 Feb 2016

	Weight	Score	Notes
e levels of privacy	2	5	
n natural landscape or elements	1	4	
or space	1	4	
	1	4	
	1	4	
	1	4	
	1	4	
d relax without being on demand	2	5	
loors to recuperate/ relax	1	4	
TIENT ENVIRONMENTare met	2	5	

	Urban and Social Integration	Weight	Score	Notes
J.01	The height, volume and skyline of the building relate well to the surrounding environment	1	4	
J.02	The facility contributes positively to its locality	1	4	
J.03	The hard and soft landscape contribute positively to the locality	1	4	
J.04	The design contributes to being a good neighbour and is sensitive to neighbours and passers- by	1	4	
J.05	There is a clear vision behind the design, its setting and outdoor spaces	2	5	
J.06	The benchmarks in the Design Statement in relation to INTEGRATION are met	2	5	







😿 Ref Note A.01 A.02 A.03 A.04 A.05 A.06 A.07 A.08 A.09

B.01 B.02 B.03 B.04

B.05 B.06 B.07

B.07 B.08 B.09 C.01

C.02

C.03

C.03 C.04 C.05 C.06 C.07

C.08

C.09 D.01 D.02

D.03 D.04 D.05 D.06

D.07 D.08 E.01 E.02 E.03 E.04 E.05 E.06 E.07 F.01 F.02 F.03 F.04 F.05 F.06 F.07 F.08 F.09 F.10 G.01 G.02 G.03 G.04 G.05 G.06 G.07 G.08 H.01 H.02 H.03 H.04

H.04 H.05 H.06 H.07 I.01

1.02 1.03

1.05 1.04 1.05 1.06 1.07 1.08

1.09 1.10 J.01 J.02 J.03 J.04 J.05

J.06

### National Adolescent Secure Inpatient Service

Weighting	
High = High Priority to the Project (2)	
Normal = Desirable (1)	
Zero = Not Applicable (0)	
Scoring	
Virtually Total Agreement (6)	
Strong Agreement (5)	
Fair Agreement (4)	
Little Agreement (3)	
Hardly Any Agreement (2)	
Virtually No Agreement (1)	
Unable to Score (0)	

### Guidance for Initial Agreement Stage

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- 2 The OBC and FBC Stage AEDET reviews will be monitored against IA Stage. Boards will require to provide
- an explanation of the reason for deviation from the IA Target
- 3 The note section to be completed to provide further briefing information
- 4 If any of the criteria is weighted as zero (not applicable) a note should state the reason for this 5 Boards may add project specific criteria. A note must be provided stating the reason for this.
- 6 Key actions arising from AEDET discussions to be recorded

Actions	by date	
		F
		⊢
		F
		-
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		-
		-

$\mathbf{i}$		Facilities	
	Health	Facilities	Scotland

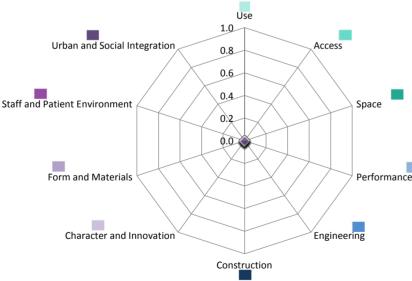
Target

r	Completed



### National Adolescent Secure Inpatient Service

Functionality	Build Quality	Impact	
Use	Weight Score Notes Performance	Weight Score Notes Character and Innovation Weight	ht Score
1 The prime functional requirements of the brief are satisfied	1 D.01 The building and grounds are easy to operate	1 G.01 There are clear ideas behind the design of the building and grounds 2	
2 The design facilitates the care model	2 D.02 The building and grounds are easy to clean and maintain	1 G.02 The building and grounds are interesting to look at and move around in 1	
3 Overall the design is capable of handling the projected throughput	1 D.03 The building and grounds have appropriately durable finishes and components	1 G.03 The building, grounds and arts design contribute to the local setting 1	
4 Work flows and logistics are arranged optimally	1 D.04 The building and grounds will weather and age well	1 G.04 The design appropriately expresses the values of the NHS 1	
5 The design is sufficiently flexible to respond to clinical /service change and to enable expansion	1 D.05 Access to daylight, views of nature and outdoor space are robustly detailed	1 G.05 The project is likely to influence future designs 1	
6 Where possible spaces are standardised and flexible in use patterns	1 D.06 The design maximises the opportunities for sustainability e.g. waste reduction and biodiversity	1 G.06 The design provides a clear strategy for future adaptation and expansion 1	
7 The design facilitates both security and supervision	2 D.07 The design minimises maintenance and simplifies this where it will be required	1 G.07 The building, grounds and arts design contribute to well being and a sustainable therapeutic strategy 1	
8 The design facilitates health promotion and equality for staff, patients and local community	1 D.08 The benchmarks in the Design Statement in relation to PERFORMANCE are met	2 G.08 The benchmarks in the Design Statement in relation to CHARACTER & INNOVATION are met 2	
<ul> <li>The design is sufficiently adaptatable to external changes e.g. Climate, Technology</li> <li>The benchmarks in the Design Statement in relation to building USE are met</li> </ul>			
Access	Weight Score Notes Engineering	Weight Score Notes Form and Materials Weight	
1 There is good access from available public transport including any on- site roads	Weight         Score         Notes         Engineering           2         E.01         The engineering systems are well designed, flexible and efficient in use	Weight         Score         Notes         Form and Materials         Weight           1         H.01         The design has a human scale and feels welcoming         1	at Score
2 There is adequate parking for visitors/ staff cars/ disabled people	1 E.02 The engineering systems are wendesigned, nextle and encient in use		
The approach and access for ambulances is appropriately provided	1 E.03 The engineering systems are energy efficient	1         H.03         Entrances are obvious and logical in relation to likely points of arrival on site         1	
<ul> <li>Service vehicle circulation is well considered and does not inappropriately impact on users and staff</li> </ul>	2 E.04 There are emergency backup systems that are designed to minimise disruption	1         H.04         The external materials and detailing appear to be of high quality and are maintainable         2	
5 Pedestrian access is obvious, pleasant and suitable for wheelchair/ disabled/ impaired sight patients	E.05 Uning construction disruption to essential services is minimised	1         H.05         The external colours and textures seem appropriate and attractive for the local setting         1	
5 Outdoor spaces wherever appropriate are usable, with safe lighting indicating paths, ramps, steps etc.	E.06 During maintenance disruption to essential healthcare services is minimised	1     H.06     The design maximises the site opportunities and enhances a sense of place     1	
7 Active travel is encouraged and connections to local green routes and spaces enhanced	E.07 The design layout contributes to efficient zoning and energy use reduction	1         H.07         The benchmarks in the Design Statement in relation to FORM & MATERIALS are met         2	
Car parking and drop-off should not visually dominate entrances or green routes			
<ul> <li>The benchmarks in the Design Statement in relation to building ACCESS are met</li> </ul>			
Space	Weight Score Notes Construction	Weight Score Notes Staff and Patient Environment Weight	tht Score
The design achieves appropriate space standards	1 F.01 If phased planning and construction are necessary the various stages are well organised	1 I.01 The design reflects the dignity of patients and allows for appropriate levels of privacy 2	
The ratio of usable space to total area is good	1 F.02 Temporary construction work is minimised	1 I.02 The design maximises the opportunities for daylight/ views of green natural landscape or elements 1	
The circulation distances travelled by staff, patients and visitors is minimised by the layout	1 F.03 The impact of the building process on continuing healthcare provision is minimised	1 I.03 The design maximises the opportunities for access to usable outdoor space 1	
Any necessary isolation and segregation of spaces is achieved	2 F.04 The building and grounds can be readily maintained	1 I.04 There are high levels of both comfort and control of comfort 1	
The design maximises opportunities for space to encourage informal social interaction & wellbeing	1 F.05 The construction is robust	1 I.05 The design is clearly understandable and wayfinding is intuitive 1	
There is adequate storage space	1 F.06 Construction allows easy access to engineering systems for maintenance, replacement & expans		
7 The grounds provided spaces for informal/ formal therapeutic health activities	1 F.07 The construction exploits opportunities from standardisation and prefabrication where relevant		
8 The relationships between internal spaces and the outdoor environment work well	1 F.08 The construction maximises the opportunities for sustainability e.g. waste and traffic reduction		
9 The benchmarks in the Design Statement in relation to building SPACE are met	2 F.09 The construction contributes to being a good neighbour	1 I.09 There are good opportunities for staff, patients, visitors to use outdoors to recuperate/ relax 1	
	F.10 Infection control risks for options, design and construction recorded/ minimised using HAI Scribe	e 1 1 1.10 The benchmarks in the Design Statement in relation to STAFF & PATIENT ENVIRONMENTare met 2	
		Urban and Social Integration weight	ght Score
		J.01 The height, volume and skyline of the building relate well to the surrounding environment	
		J.02 The facility contributes positively to its locality	
AEDET Refresh OBC Summary		1.03 The hard and soft landscape contribute positively to the locality	
		1.04 The design contributes to being a good neighbour and is sensitive to neighbours and passers- by	
		1.05 There is a clear vision behind the design, its setting and outdoor spaces 2	
		J.06 The benchmarks in the Design Statement in relation to INTEGRATION are met	
		Target	Progres
_	Use	Prev	v
Urban and Social Integration	0.8 Access		-
		4.5 Use 4.5	
	0.6	4.3 Access 4.3	2
Staff and Patient Environment	0.4 Space	4.4 Space 4.4	
	0.2	4.2 Performance 4.2	2
	0.0		
		3.4 Engineering 3.4	<u> </u>
Form and Materials	Performance	4.0 Construction 4.0	
	XTX//	4.4 Character and Innovation 4.4	
_ \ `	$\times \pm \chi / $	4.6 Form and Materials 4.6	5
Character and Innovation	Engineering	4.5 Staff and Patient Environment 4.5	5
			_
		A.C. Unkey and Casial Internation	4



			inipact		
~	Notes		Character and Innovation	Weight Sco	re Notes
c	NOLES	G 01	There are clear ideas behind the design of the building and grounds	2	Notes
			The building and grounds are interesting to look at and move around in	1	
			The building, grounds and arts design contribute to the local setting	1	
			The design appropriately expresses the values of the NHS	1	
		G.05	The project is likely to influence future designs	1	
		G.06	The design provides a clear strategy for future adaptation and expansion	1	
		G.07	The building, grounds and arts design contribute to well being and a sustainable therapeutic strategy	1	
		G.08	The benchmarks in the Design Statement in relation to CHARACTER & INNOVATION are met	2	
_			Form and Materials		
e	Notes	LI 01	The design has a human scale and feels welcoming	Weight Sco	re Notes
	$\vdash$		The design contributes to local microclimate, maximising sunlight and shelter from prevailing winds	2	
			Entrances are obvious and logical in relation to likely points of arrival on site	1	
			The external materials and detailing appear to be of high quality and are maintainable	2	
			The external colours and textures seem appropriate and attractive for the local setting	1	
		H.06	The design maximises the site opportunities and enhances a sense of place	1	
		H.07	The benchmarks in the Design Statement in relation to FORM & MATERIALS are met	2	
e	Notes		Staff and Patient Environment	Weight Sco	re Notes
			The design reflects the dignity of patients and allows for appropriate levels of privacy	2	
	$\vdash$		The design maximises the opportunities for daylight/ views of green natural landscape or elements	1	
			The design maximises the opportunities for access to usable outdoor space There are high levels of both comfort and control of comfort	1	
			The design is clearly understandable and wayfinding is intuitive	1	
	$\vdash$		The interior of the building is attractive in appearance	1	
	$\vdash$		There are good bath/ toilet and other facilities for patients	1	
			There are good facilities for staff with convenient places to work and relax without being on demand	2	
			There are good opportunities for staff, patients, visitors to use outdoors to recuperate/ relax	1	
		I.10	The benchmarks in the Design Statement in relation to STAFF & PATIENT ENVIRONMENTare met	2	
			Urban and Social Integration	Weight Sco	re Notes
			The height, volume and skyline of the building relate well to the surrounding environment	1	
			The facility contributes positively to its locality	1	
			The hard and soft landscape contribute positively to the locality	1	
			The design contributes to being a good neighbour and is sensitive to neighbours and passers- by	2	
			There is a clear vision behind the design, its setting and outdoor spaces	2	
		1.00	The benchmarks in the Design Statement in relation to INTEGRATION are met	2	
	Target			Prog	ress
	0				
				Prev	Curr
	4.5		Use	4.5	0.0
	4.3		Access	4.3	0.0
	4.4		Space	4.4	0.0
	4.2		Derformance	4.2	0.0
	4.2		Performance	4.2	0.0
	3.4		Engineering	3.4	0.0
					0.0
	4.0		Construction	4.0	0.0
	4.4		Character and Innovation	4.4	0.0
	4.6		Form and Materials	4.6	0.0
					_
	4.5		Staff and Patient Environment	4.5	0.0
	4.5		Unkers and Castel Internation	45	0.0
	4.5		Urban and Social Integration	4.5	0.0

(	Weighting	=
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### OBC

### AEDET Refresh v1.1 Feb 2016

Target	$\square$
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Ref Note A.02

# National Adolescent Secure Inpatient Service

Weighting	
High = High Priority to the Project (2)	
Normal = Desirable (1)	
Zero = Not Applicable (0)	
Scoring	
Virtually Total Agreement (6)	
Strong Agreement (5)	
Fair Agreement (4)	
Little Agreement (3)	
Hardly Any Agreement (2)	
Virtually No Agreement (1)	
Unable to Score (0)	

#### Guidance for Outline Business Case Stage

- ${\tt 1}$  AEDET OBC to be recorded near end of OBC Stage and must be submitted for NDAP
- 2 The OBC and FBC Stage AEDET reviews will be monitored against IA Stage. Boards will require to provide an explanation of the reason for deviation from the IA Target
- 3 The note section to be completed to provide further briefing information
- 4 If any of the criteria is weighted as zero (not applicable) a note should state the reason for this
- 5 Boards may add project specific criteria. A note must be provided stating the reason for this.
- 6 Key actions arising from AEDET discussions to be recorded

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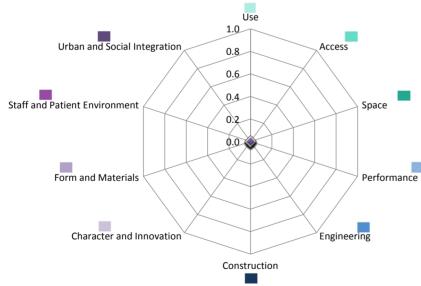
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	B.02 B.03	
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	B.04 B.05	
	B.05 B.06	
	B.05 B.07	
	B.07 B.08	
	B.08 B.09	
	C.01	
	C.01	
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#### National Adolescent Secure Inpatient Service

Functionality	Build Quality	Impact	
Use	Weight Score Notes Performance	Weight Score Notes Character and Innovation	Weight Score N
01 The prime functional requirements of the brief are satisfied	1 D.01 The building and grounds are easy to operate	1 G.01 There are clear ideas behind the design of the building and grounds	2
02 The design facilitates the care model	2 D.02 The building and grounds are easy to clean and maintain	1 G.02 The building and grounds are interesting to look at and move around in	1
Overall the design is capable of handling the projected throughput	1 D.03 The building and grounds have appropriately durable finishes and components	1 G.03 The building, grounds and arts design contribute to the local setting	1
14 Work flows and logistics are arranged optimally	1 D.04 The building and grounds will weather and age well	1 G.04 The design appropriately expresses the values of the NHS	1
5 The design is sufficiently flexible to respond to clinical /service change and to enable expansion	1 D.05 Access to daylight, views of nature and outdoor space are robustly detailed	1 G.05 The project is likely to influence future designs	1
6 Where possible spaces are standardised and flexible in use patterns	1 D.06 The design maximises the opportunities for sustainability e.g. waste reduction and biodiversity	1 G.06 The design provides a clear strategy for future adaptation and expansion	1
7 The design facilitates both security and supervision	2 D.07 The design minimises maintenance and simplifies this where it will be required	1 G.07 The building, grounds and arts design contribute to well being and a sustainable therapeutic strategy	1
8 The design facilitates health promotion and equality for staff, patients and local community	1 D.08 The benchmarks in the Design Statement in relation to PERFORMANCE are met	2 G.08 The benchmarks in the Design Statement in relation to CHARACTER & INNOVATION are met	2
9 The design is sufficiently adaptatable to external changes e.g. Climate, Technology	1		
0 The benchmarks in the Design Statement in relation to building USE are met	2		
Access	Weight Score Notes Engineering	Weight Score Notes Form and Materials	Weight Score
1 There is good access from available public transport including any on- site roads	2 E.01 The engineering systems are well designed, flexible and efficient in use	1 H.01 The design has a human scale and feels welcoming	1
D2 There is adequate parking for visitors/ staff cars/ disabled people	1 E.02 The engineering systems exploit any benefits from standardisation and prefabrication where re-	levant 1 H.02 The design contributes to local microclimate, maximising sunlight and shelter from prevailing winds	2
3 The approach and access for ambulances is appropriately provided	1 E.03 The engineering systems are energy efficient	1 H.03 Entrances are obvious and logical in relation to likely points of arrival on site	1
4 Service vehicle circulation is well considered and does not inappropriately impact on users and staff	2 E.04 There are emergency backup systems that are designed to minimise disruption	1 H.04 The external materials and detailing appear to be of high quality and are maintainable	2
5 Pedestrian access is obvious, pleasant and suitable for wheelchair/ disabled/ impaired sight patients	E.05 During construction disruption to essential services is minimised	1 H.05 The external colours and textures seem appropriate and attractive for the local setting	1
06 Outdoor spaces wherever appropriate are usable, with safe lighting indicating paths, ramps, steps etc.	1 E.06 During maintenance disruption to essential healthcare services is minimised	1 H.06 The design maximises the site opportunities and enhances a sense of place	1
07 Active travel is encouraged and connections to local green routes and spaces enhanced	1 E.07 The design layout contributes to efficient zoning and energy use reduction	1 H.07 The benchmarks in the Design Statement in relation to FORM & MATERIALS are met	2
08 Car parking and drop-off should not visually dominate entrances or green routes	1		
9 The benchmarks in the Design Statement in relation to building ACCESS are met	2		
Space	Weight Score Notes Construction	Weight Score Notes Staff and Patient Environment	Weight Score
01 The design achieves appropriate space standards	1 F.01 If phased planning and construction are necessary the various stages are well organised	0 I.01 The design reflects the dignity of patients and allows for appropriate levels of privacy	2
D2 The ratio of usable space to total area is good	1 F.02 Temporary construction work is minimised	0 1.02 The design maximises the opportunities for daylight/ views of green natural landscape or elements	1
3 The circulation distances travelled by staff, patients and visitors is minimised by the layout	1 F.03 The impact of the building process on continuing healthcare provision is minimised	1 I.03 The design maximises the opportunities for access to usable outdoor space	1
14 Any necessary isolation and segregation of spaces is achieved	2 F.04 The building and grounds can be readily maintained	1 I.04 There are high levels of both comfort and control of comfort	1
5 The design maximises opportunities for space to encourage informal social interaction & wellbeing	1 F.05 The construction is robust	1 I.05 The design is clearly understandable and wayfinding is intuitive	1
16 There is adequate storage space	1 F.06 Construction allows easy access to engineering systems for maintenance, replacement & expan	ision 1 I.06 The interior of the building is attractive in appearance	1
07 The grounds provided spaces for informal/ formal therapeutic health activities	1 F.07 The construction exploits opportunities from standardisation and prefabrication where relevan	I I.07 There are good bath/ toilet and other facilities for patients	1
08 The relationships between internal spaces and the outdoor environment work well	1 F.08 The construction maximises the opportunities for sustainability e.g. waste and traffic reduction	1 I.08 There are good facilities for staff with convenient places to work and relax without being on demand	2
09 The benchmarks in the Design Statement in relation to building SPACE are met	F.09 The construction contributes to being a good neighbour F.10 Infection control risks for options, design and construction recorded/ minimised using HAI Scrib	1         I.09         There are good opportunities for staff, patients, visitors to use outdoors to recuperate/relax           be         1         I.10         The benchmarks in the Design Statement in relation to STAFF & PATIENT ENVIRONMENTare met	1
AEDET Refresh FBC Summary		Urban and Social Integration           J.01         The height, volume and skyline of the building relate well to the surrounding environment           J.02         The facility contributes positively to its locality           J.03         The hard and soft landscape contribute positively to the locality           J.04         The design contributes to being a good neighbour and is sensitive to neighbours and passers- by           J.05         There is a clear vision behind the design, its setting and outdoor spaces           J.06         The benchmarks in the Design Statement in relation to INTEGRATION are met	Weight         Score         N           1
	Use	Target	Progress
Urban and Social Integration	0.8 Access	4.5 Use	0.0
	0.6	4.3 Access	0.0
	0.4		
Staff and Patient Environment	Space	4.4 Space	0.0
		4.2 Performance	0.0
		3.4 Engineering	0.0
Form and Materials	Performance	4.0 Construction	0.0
	X + X / /	4.4 Character and Innovation	0.0
_ \		4.6 Form and Materials	0.0
Character and Innovation	Engineering	4.5 Staff and Patient Environment	0.0
		4.5 Urban and Social Integration	0.0
	Construction	4.5 Orban and Social Integration	0.0



		inipact		
re Notes	1	Character and Innovation	Weight Sco	re Notes
ie Notes	G.01	There are clear ideas behind the design of the building and grounds	2	ie Notes
	-	The building and grounds are interesting to look at and move around in	1	
	-	The building, grounds and arts design contribute to the local setting	1	
	G.04	The design appropriately expresses the values of the NHS	1	
	G.05	The project is likely to influence future designs	1	
	G.06	The design provides a clear strategy for future adaptation and expansion	1	
	G.07	The building, grounds and arts design contribute to well being and a sustainable therapeutic strategy	1	
	G.08	The benchmarks in the Design Statement in relation to CHARACTER & INNOVATION are met	2	
	1	Form and Materials		
e Notes	ц 01	The design has a human scale and feels welcoming	Weight Sco	re Notes
-∥	-	The design contributes to local microclimate, maximising sunlight and shelter from prevailing winds	2	
	-	Entrances are obvious and logical in relation to likely points of arrival on site	1	
	-	The external materials and detailing appear to be of high quality and are maintainable	2	
	-	The external colours and textures seem appropriate and attractive for the local setting	1	
	H.06	The design maximises the site opportunities and enhances a sense of place	1	
	H.07	The benchmarks in the Design Statement in relation to FORM & MATERIALS are met	2	
	•			
	1	Staff and Dationt Environment	and the	
e Notes	1.01	Staff and Patient Environment	Weight Sco	re Notes
╢──	-	The design reflects the dignity of patients and allows for appropriate levels of privacy The design maximises the opportunities for daylight / views of green natural landscape or elements	2	-∦
	-	The design maximises the opportunities for daylight/ views of green natural landscape or elements The design maximises the opportunities for access to usable outdoor space	1	
	-	There are high levels of both comfort and control of comfort	1	
	-	The design is clearly understandable and wayfinding is intuitive	1	
	-	The interior of the building is attractive in appearance	1	
	-	There are good bath/ toilet and other facilities for patients	1	
	-	There are good facilities for staff with convenient places to work and relax without being on demand	2	
	1.09	There are good opportunities for staff, patients, visitors to use outdoors to recuperate/ relax	1	
	I.10	The benchmarks in the Design Statement in relation to STAFF & PATIENT ENVIRONMENTare met	2	
		Urban and Social Integration	Weight Sco	re Notes
		The height, volume and skyline of the building relate well to the surrounding environment	1	
		The facility contributes positively to its locality	1	
		The hard and soft landscape contribute positively to the locality	1	
		The design contributes to being a good neighbour and is sensitive to neighbours and passers- by There is a clear vision behind the design, its setting and outdoor spaces	2	
		The benchmarks in the Design Statement in relation to INTEGRATION are met	2	
	3.00		-	
Targe	et		Prog	ress
			Prev	Curr
4.5		U.s.		0.0
4.5		Use	0.0	0.0
4.3		Access	0.0	0.0
4.5		ACCSS	0.0	0.0
4.4		Space	0.0	0.0
	-			
4.2		Performance	0.0	0.0
				_
3.4		Engineering	0.0	0.0
4.0		Construction	0.0	0.0
4.0		Construction	0.0	0.0
4.4		Character and Innovation	0.0	0.0
	-			
4.6		Form and Materials	0.0	0.0
	_			
4.5		Staff and Patient Environment	0.0	0.0
4.5		Urban and Social Integration	0.0	0.0

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# NHS National Services Scotland

#### AEDET Refresh v1.1 Feb 2016

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Ref Note A.01 A.02

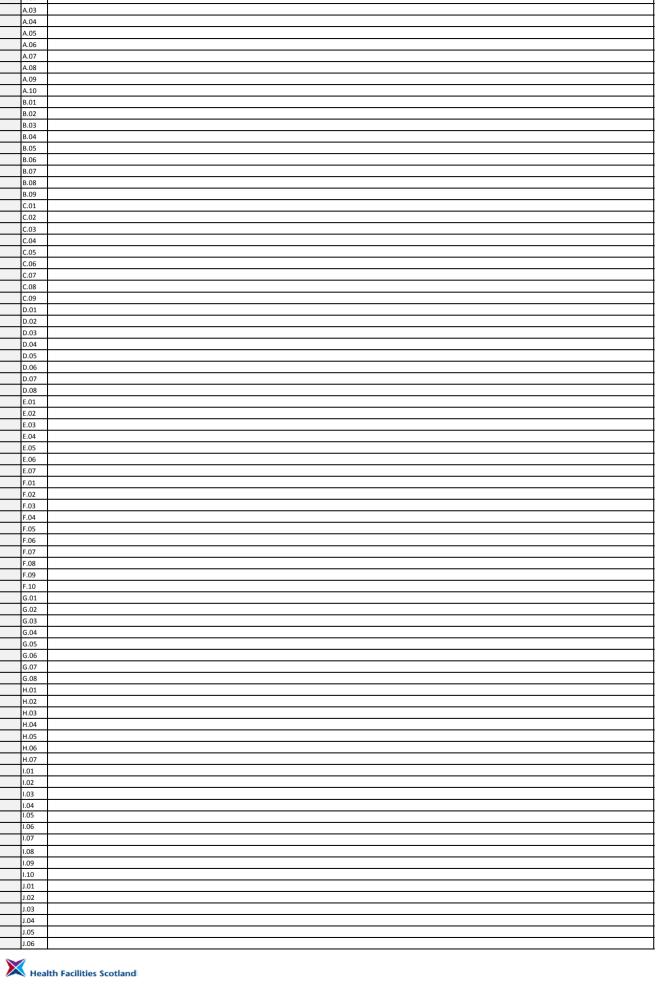
#### National Adolescent Secure Inpatient Service

Weighting	
High = High Priority to the Project (2	)
Normal = Desirable (1)	
Zero = Not Applicable (0)	
Scoring	
Virtually Total Agreement (6)	
Strong Agreement (5)	
Fair Agreement (4)	
Little Agreement (3)	
Hardly Any Agreement (2)	
Virtually No Agreement (1)	
Unable to Score (0)	

#### Guidance for Full Business Case Stage

- 1 AEDET FBC to be recorded near end of FBC (or SBC) Stage and must be submitted for NDAP
- 2 The OBC and FBC Stage AEDET reviews will be monitored against IA Stage. Boards will require to provide an explanation of the reason for deviation from the IA Target
- 3 The note section to be completed to provide further briefing information
- 4 If any of the criteria is weighted as zero (not applicable) a note should state the reason for this
- 5 Boards may add project specific criteria. A note must be provided stating the reason for this.
- 6 Key actions arising from AEDET discussions to be recorded

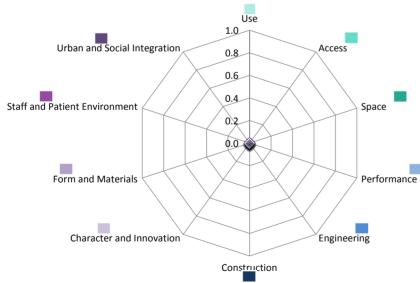
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#### National Adolescent Secure Inpatient Service

Functionality	Build Quality	Impact	l
Use	Weight Score Notes Performance	Weight Score Notes Character and Innovation	Weight Score No
1 The prime functional requirements of the brief are satisfied	1 D.01 The building and grounds are easy to operate	1         G.01         There are clear ideas behind the design of the building and grounds	2
2 The design facilitates the care model	2 D.02 The building and grounds are easy to clean and maintain	1 G.02 The building and grounds are interesting to look at and move around in	1
3 Overall the design is capable of handling the projected throughput	1 D.03 The building and grounds have appropriately durable finishes and components	1 G.03 The building, grounds and arts design contribute to the local setting	1
4 Work flows and logistics are arranged optimally	1 D.04 The building and grounds will weather and age well	1 G.04 The design appropriately expresses the values of the NHS	1
5 The design is sufficiently flexible to respond to clinical /service change and to enable expansion	1 D.05 Access to daylight, views of nature and outdoor space are robustly detailed	1 G.05 The project is likely to influence future designs	1
6 Where possible spaces are standardised and flexible in use patterns	1 D.06 The design maximises the opportunities for sustainability e.g. waste reduction and biodiversity	G.06 The design provides a clear strategy for future adaptation and expansion	1
7 The design facilitates both security and supervision		1 G.07 The building, grounds and arts design contribute to well being and a sustainable therapeutic strategy	1
8 The design facilitates health promotion and equality for staff, patients and local community		2 G.08 The benchmarks in the Design Statement in relation to CHARACTER & INNOVATION are met	2
9 The design is sufficiently adaptatable to external changes e.g. Climate, Technology			
O The benchmarks in the Design Statement in relation to building USE are met	2		
Access	Weight Score Notes Engineering	Weight Score Notes Form and Materials	Weight Score No
		1 H.01 The design has a human scale and feels welcoming	
		H.03 Entrances are obvious and logical in relation to likely points of arrival on site	
		1         H.04 The external materials and detailing appear to be of high quality and are maintainable           1         H.05 The external colours and textures seem appropriate and attractive for the local setting	
		1         H.05         The external colours and textures seem appropriate and actuative for the local setting           1         H.06         The design maximises the site opportunities and enhances a sense of place	
		1 H.07 The benchmarks in the Design Statement in relation to FORM & MATERIALS are met	2
8 Car parking and drop-off should not visually dominate entrances or green routes			
<ul> <li>The benchmarks in the Design Statement in relation to building ACCESS are met</li> </ul>			
Space	Weight Scree Notes Construction	Weight Score Notes Staff and Patient Environment	Weight Score No
The design achieves appropriate space standards		O         I.01         The design reflects the dignity of patients and allows for appropriate levels of privacy	2
The ratio of usable space to total area is good		0 I.02 The design maximises the opportunities for daylight/ views of green natural landscape or elements	1
The circulation distances travelled by staff, patients and visitors is minimised by the layout		1 I.03 The design maximises the opportunities for access to usable outdoor space	1
Any necessary isolation and segregation of spaces is achieved		1 I.04 There are high levels of both comfort and control of comfort	1
The design maximises opportunities for space to encourage informal social interaction & wellbeing	1 F.05 The construction is robust	1 I.05 The design is clearly understandable and wayfinding is intuitive	1
There is adequate storage space	1 F.06 Construction allows easy access to engineering systems for maintenance, replacement & expansion	1 1.06 The interior of the building is attractive in appearance	1
The grounds provided spaces for informal/ formal therapeutic health activities	1 F.07 The construction exploits opportunities from standardisation and prefabrication where relevant	1 I.07 There are good bath/ toilet and other facilities for patients	1
The relationships between internal spaces and the outdoor environment work well	1 F.08 The construction maximises the opportunities for sustainability e.g. waste and traffic reduction	1 I.08 There are good facilities for staff with convenient places to work and relax without being on demand	2
The benchmarks in the Design Statement in relation to building SPACE are met	2 F.09 The construction contributes to being a good neighbour	1 1.09 There are good opportunities for staff, patients, visitors to use outdoors to recuperate/ relax	1
	F.10 Infection control risks for options, design and construction recorded/ minimised using HAI Scribe	1 I.10 The benchmarks in the Design Statement in relation to STAFF & PATIENT ENVIRONMENTare met	2
		Urban and Social Integration	Weight Score No
		J.01 The height, volume and skyline of the building relate well to the surrounding environment	1
		J.02 The facility contributes positively to its locality	1
AEDET Refresh POE Summary		J.03 The hard and soft landscape contribute positively to the locality	1
•		J.04 The design contributes to being a good neighbour and is sensitive to neighbours and passers- by	1
		J.05 There is a clear vision behind the design, its setting and outdoor spaces	2
		J.06 The benchmarks in the Design Statement in relation to INTEGRATION are met	2
		Target	Progress
_	Use		Prev Cu
Urban and Social Integration	Access		
	U.a	4.5 Use	0.0
	0.6	4.3 Access	0.0
Staff and Patient Environment	0.4 Snace	4.4 Space	0.0 0.
	0.2	4.2 Performance	0.0 0.
		3.4 Engineering	0.0 0.
Form and Materials	Performance	4.0 Construction	0.0
	$\times \pm \times / /$	4.4 Character and Innovation	0.0
	pixel service of specific difference of sp	4.6 Form and Materials	0.0 0.
	Engineering		
	Construction	4.5 Urban and Social Integration	0.0 0.



	Impact		
otes	Character and Innovation	Weight Score	Notes
G.01	There are clear ideas behind the design of the building and grounds	2	
G.02	The building and grounds are interesting to look at and move around in	1	
G.03	The building, grounds and arts design contribute to the local setting	1	
G.04	The design appropriately expresses the values of the NHS	1	
G.05	The project is likely to influence future designs	1	
G.06	The design provides a clear strategy for future adaptation and expansion	1	
G.07	The building, grounds and arts design contribute to well being and a sustainable therapeutic strategy	1	
G.08	The benchmarks in the Design Statement in relation to CHARACTER & INNOVATION are met	2	
_			
otes	Form and Materials	Weight Score	Note
	The design has a human scale and feels welcoming	1	
	The design contributes to local microclimate, maximising sunlight and shelter from prevailing winds	2	
	Entrances are obvious and logical in relation to likely points of arrival on site	1	
	The external materials and detailing appear to be of high quality and are maintainable	2	
	The external colours and textures seem appropriate and attractive for the local setting	1	
	The design maximises the site opportunities and enhances a sense of place	1	
H.0.	The benchmarks in the Design Statement in relation to FORM & MATERIALS are met	2	
otes	Staff and Patient Environment	Weight Score	Notes
1.01	The design reflects the dignity of patients and allows for appropriate levels of privacy	2	
	The design maximises the opportunities for daylight/ views of green natural landscape or elements	1	
1.03		1	
1.04		1	
1.05	The design is clearly understandable and wayfinding is intuitive	1	
1.06	The interior of the building is attractive in appearance	1	
1.07	There are good bath/ toilet and other facilities for patients	1	
1.08	There are good facilities for staff with convenient places to work and relax without being on demand	2	
1.09	There are good opportunities for staff, patients, visitors to use outdoors to recuperate/ relax	1	
1.10	The benchmarks in the Design Statement in relation to STAFF & PATIENT ENVIRONMENTare met	2	
	Urban and Social Integration	Weight Score	Note
J.01	The height, volume and skyline of the building relate well to the surrounding environment	1	
J.02	The facility contributes positively to its locality	1	
J.03	The hard and soft landscape contribute positively to the locality	1	
J.04	The design contributes to being a good neighbour and is sensitive to neighbours and passers- by	1	
J.05	There is a clear vision behind the design, its setting and outdoor spaces	2	
J.06	The benchmarks in the Design Statement in relation to INTEGRATION are met	2	
get		Progress	5
		Prev	Curr
.5	Use	0.0	0.0
3	Access	0.0	0.0
.4	Space	0.0	0.0
.2	Performance	0.0	0.0
.4	Engineering	0.0	0.0
.0	Construction	0.0	0.0
4	Character and Innovation	0.0	0.0
.4		0.0	0.0
	Form and Materials	0.0	0.0
.6			
	Staff and Patient Environment	0.0	0.0
.6 .5 .5	Staff and Patient Environment Urban and Social Integration	0.0	0.0

$\left( \right)$	Weighting	=
	2	= >
	1	>
	0	<

#### POE

#### AEDET Refresh v1.1 Feb 2016

Target	
5 - 6	
3 - 4	
3	



Ref Note

#### National Adolescent Secure Inpatient Service

Weighting	
High = High Priority to the Project (2)	
Normal = Desirable (1)	
Zero = Not Applicable (0)	
Scoring	
Virtually Total Agreement (6)	
Strong Agreement (5)	
Fair Agreement (4)	
Little Agreement (3)	
Hardly Any Agreement (2)	
Virtually No Agreement (1)	
Unable to Score (0)	

#### Guidance for Post Occupation Evaluation Stage

- 1 AEDET POE to be set approx 1-2 years after occupation and must be submitted for NDAP Post Project Evaluation
- 2 The OBC and FBC Stage AEDET reviews will be monitored against IA Stage. Boards will require to provide
- an explanation of the reason for deviation from the IA Target
- 3 The note section to be completed to provide further briefing information
- 4 If any of the criteria is weighted as zero (not applicable) a note should state the reason for this 5 Boards may add project specific criteria. A note must be provided stating the reason for this.
- 6 Key actions arising from AEDET discussions to be recorded

Actions	by date	Owne

	A.02	
	A.03	
	A.04	
	A.05	
	A.06	
	A.07	
	A.08	
	A.09	
	A.10	
	B.01	
	B.02	
	B.03	
	B.04	
	B.05	
	B.06	
	B.07	
	B.08	
####		
	C.01	
	C.02	
	C.03	
	C.04	
	C.05	
	C.06	
	C.07	
	C.08	
	C.09	
	D.01	
	D.02	
	D.03	
	D.04	
	D.05	
	D.06	
	D.07	
	D.08	
	E.01	
	E.02	
	E.03	
	E.04	
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	E.07	
	F.01	
	F.02	
	F.03	
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	F.05	
	F.06	
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	F.08	
	F.09	
	F.10	
	G.01	
	G.02	
	G.03	
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	G.07	
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_	H.01	
	H.02 H.03	
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_	H.04	
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_	1.01	
_	1.02	
	1.03	
	1.04 1.05	
	1.05	
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_	1.09	
	1.10	
	J.01	
	J.02	
	J.03	
	J.04	
_	J.05	
_	J.06	
$\mathbf{i}$	1	th Facilities Scotland
	Hoal	th Excilition Scotland

AEDET-POE

r	Completed



#### AEDET Refresh v1.1 Feb 2016

National Adolescent Secure Inpatient Service

Summary

Category	Benchmark	Target	OBC	FBC	POE
Use	1.9	4.5	0.0	0.0	0.0
Access	2.1	4.3	0.0	0.0	0.0
Space	2.7	4.4	0.0	0.0	0.0
Performance	1.7	4.2	0.0	0.0	0.0
Engineering	2.0	3.4	0.0	0.0	0.0
Construction	0.0	4.0	0.0	0.0	0.0
Character and Innovation	1.6	4.4	0.0	0.0	0.0
Form and Materials	2.0	4.6	0.0	0.0	0.0
Staff and Patient Environment	2.0	4.5	0.0	0.0	0.0
Urban and Social Integration	2.3	4.5	0.0	0.0	0.0



Health Facilities Scotland

#### NHS AYRSHIRE AND ARRAN

#### NATIONAL FORENSIC ADOLESCENT SERVICE FOR SCOTLAND

#### **OPTION 1 - 8 BEDDED UNIT**

#### SUMMARY NET PRESENT VALUE CALCULATION

Year	Capital Cost	Revenue Costs	Net Cash Flow	Discount Factor	NPV	Cummulative NPV
	(excl.VAT)	(Exc Capital Charges)				
0	-4,371,705	-3,941,744	-8,313,449	1.00000000	-£8,313,449.00	-£ 8,313,449.00
1	0	-3,941,744	-3,941,744	0.966183575	-£3,718,626.42	-£ 12,032,075.42
2	0	-3,941,744	-3,941,744	0.933510700	-£3,679,660.20	-£ 15,711,735.62
3	0	-3,941,744	-3,941,744	0.901942706		-£ 19,266,962.87
4	0	-3,941,744	-3,941,744	0.871442228	-£3,435,002.17	-£ 22,701,965.04
5	0	-3,941,744	-3,941,744	0.841973167	-£3,318,842.68	-£ 26,020,807.72
6	0	-3,941,744	-3,941,744	0.813500644	-£3,206,611.28	-£ 29,227,419.00
7	0	-3,941,744	-3,941,744	0.785990961	-£3,098,175.15	-£ 32,325,594.15
8	0	-3,941,744	-3,941,744	0.759411556	-£2,993,405.95	-£ 35,319,000.10
9	0	-3,941,744	-3,941,744	0.733730972	-£2,892,179.66	-£ 38,211,179.76
10	0	-3,941,744	-3,941,744	0.708918814	-£2,794,376.48	-£ 41,005,556.24
11	0	-3,941,744	-3,941,744	0.684945714	-£2,699,880.66	-£ 43,705,436.89
12	0	-3,941,744	-3,941,744	0.661783298	-£2,608,580.35	
13	0	-3,941,744	-3,941,744	0.639404153	-£2,520,367.48	-£ 48,834,384.72
14	0	-3,941,744	-3,941,744	0.617781790	-£2,435,137.67	-£ 51,269,522.39
15	0	-3,941,744	-3,941,744	0.596890619	-£2,352,790.01	-£ 53,622,312.40
16	0	-3,941,744	-3,941,744	0.576705912	-£2,273,227.07	-£ 55,895,539.47
17	0	-3,941,744	-3,941,744	0.557203779	-£2,196,354.65	-£ 58,091,894.12
18	0	-3,941,744	-3,941,744	0.538361140	-£2,122,081.79	-£ 60,213,975.92
19	0	-3,941,744	-3,941,744	0.520155690	-£2,050,320.57	-£ 62,264,296.49
20	0	-3,941,744	-3,941,744	0.502565884	-£1,980,986.06	-£ 64,245,282.55
21	0	-3,941,744	-3,941,744	0.485570903	-£1,913,996.19	-£ 66,159,278.74
22	0	-3,941,744	-3,941,744	0.469150631	-£1,849,271.68	-£ 68,008,550.42
23	0	-3,941,744	-3,941,744	0.453285634	-£1,786,735.93	-£ 69,795,286.35
24	0	-3,941,744	-3,941,744	0.437957134	-£1,726,314.90	-£ 71,521,601.25
25	0	-3,941,744	-3,941,744	0.423146989	-£1,667,937.11	-£ 73,189,538.36
26	0	-3,941,744	-3,941,744	0.408837671	-£1,611,533.44	-£ 74,801,071.80
27	0	-3,941,744	-3,941,744	0.395012242	-£1,557,037.14	-£ 76,358,108.93
28	0	-3,941,744	-3,941,744	0.381654340	-£1,504,383.71	-£ 77,862,492.64
29	0	-3,941,744	-3,941,744	0.368748155	-£1,453,510.83	-£ 79,316,003.47
30	0	-3,941,744	-3,941,744	0.356278411	-£1,404,358.29	-£ 80,720,361.75
31	0	-3,941,744	-3,941,744	0.344230348	-£1,356,867.91	-£ 82,077,229.66
32	0	-3,941,744	-3,941,744	0.332589709	-£1,310,983.49	-£ 83,388,213.15
33	0	-3,941,744	-3,941,744	0.321342714	-£1,266,650.71	-£ 84,654,863.87
34	0	-3,941,744	-3,941,744	0.310476052	-£1,223,817.11	-£ 85,878,680.98
35	0	-3,941,744	-3,941,744	0.299976862		-£ 87,061,112.98
36	0	-3,941,744	-3,941,744	0.289832717	-£1,142,446.37	-£ 88,203,559.35
37	0	-3,941,744	-3,941,744	0.280031610	-£1,103,812.92	-£ 89,307,372.27
38	0	-3,941,744	-3,941,744	0.270561942	-£1,066,485.91	-£ 90,373,858.18
39	0		-3,941,744	0.261412505	-£1,030,421.17	-£ 91,404,279.35
39	0	-3,941,744	-3,941,744	0.252572468	-£995,576.01	-£ 92,399,855.36

#### NHS AYRSHIRE AND ARRAN

#### NATIONAL FORENSIC ADOLESCENT SERVICE FOR SCOTLAND

#### OPTION 2 - 12 BEDDED UNIT

#### SUMMARY NET PRESENT VALUE CALCULATION

Year	Capital Cost	Revenue Costs	Net Cash Flow	Discount Factor	NPV	Cummulative NPV
	(excl.VAT)	(Exc Capital Charges)				
0	-5,058,650	-3,941,744	-9,000,394	1.00000000	-£9,000,394.00	-£ 9,000,394.00
1	0	-3,941,744	-3,941,744	0.966183575	-£3,718,626.42	-£ 12,719,020.42
2	0	-3,941,744	-3,941,744	0.933510700	-£3,679,660.20	-£ 16,398,680.62
3	0	-3,941,744	-3,941,744	0.901942706	-£3,555,227.25	-£ 19,953,907.87
4	0	-3,941,744	-3,941,744	0.871442228	-£3,435,002.17	-£ 23,388,910.04
5	0	-3,941,744	-3,941,744	0.841973167	-£3,318,842.68	-£ 26,707,752.72
6	0	-3,941,744	-3,941,744	0.813500644	-£3,206,611.28	-£ 29,914,364.00
7	0	-3,941,744	-3,941,744	0.785990961	-£3,098,175.15	-£ 33,012,539.15
8	0	-3,941,744	-3,941,744	0.759411556	-£2,993,405.95	-£ 36,005,945.10
9	0	-3,941,744	-3,941,744	0.733730972	-£2,892,179.66	-£ 38,898,124.76
10	0	-3,941,744	-3,941,744	0.708918814	-£2,794,376.48	-£ 41,692,501.24
11	0	-3,941,744	-3,941,744	0.684945714	-£2,699,880.66	-£ 44,392,381.89
12	0	-3,941,744	-3,941,744	0.661783298	-£2,608,580.35	-£ 47,000,962.24
13	0	-3,941,744	-3,941,744	0.639404153	-£2,520,367.48	-£ 49,521,329.72
14	0	-3,941,744	-3,941,744	0.617781790	-£2,435,137.67	-£ 51,956,467.39
15	0	-3,941,744	-3,941,744	0.596890619	-£2,352,790.01	-£ 54,309,257.40
16	0	-3,941,744	-3,941,744	0.576705912	-£2,273,227.07	-£ 56,582,484.47
17	0	-3,941,744	-3,941,744	0.557203779	-£2,196,354.65	-£ 58,778,839.12
18	0	-3,941,744	-3,941,744	0.538361140	-£2,122,081.79	-£ 60,900,920.92
19	0	-3,941,744	-3,941,744	0.520155690	-£2,050,320.57	-£ 62,951,241.49
20	0	-3,941,744	-3,941,744	0.502565884	-£1,980,986.06	-£ 64,932,227.55
21	0	-3,941,744	-3,941,744	0.485570903	-£1,913,996.19	-£ 66,846,223.74
22	0	-3,941,744	-3,941,744	0.469150631	-£1,849,271.68	-£ 68,695,495.42
23	0	-3,941,744	-3,941,744	0.453285634	-£1,786,735.93	-£ 70,482,231.35
24	0	-3,941,744	-3,941,744	0.437957134	-£1,726,314.90	-£ 72,208,546.25
25	0	-3,941,744	-3,941,744	0.423146989	-£1,667,937.11	-£ 73,876,483.36
26	0	-3,941,744	-3,941,744	0.408837671	-£1,611,533.44	-£ 75,488,016.80
27	0	-3,941,744	-3,941,744	0.395012242	-£1,557,037.14	-£ 77,045,053.93
28	0	-3,941,744	-3,941,744	0.381654340	-£1,504,383.71	-£ 78,549,437.64
29	0	-3,941,744	-3,941,744	0.368748155	-£1,453,510.83	-£ 80,002,948.47
30	0	-3,941,744	-3,941,744	0.356278411	-£1,404,358.29	-£ 81,407,306.75
31	0	-3,941,744	-3,941,744	0.344230348	-£1,356,867.91	-£ 82,764,174.66
32	0	-3,941,744	-3,941,744	0.332589709	-£1,310,983.49	-£ 84,075,158.15
33	0	-3,941,744	-3,941,744	0.321342714	-£1,266,650.71	-£ 85,341,808.87
34	0	-3,941,744	-3,941,744	0.310476052	-£1,223,817.11	-£ 86,565,625.98
35	0		-3,941,744	0.299976862	-£1,182,431.99	-£ 87,748,057.98
36	0	-3,941,744	-3,941,744	0.289832717	-£1,142,446.37	-£ 88,890,504.35
37	0	-3,941,744	-3,941,744	0.280031610	-£1,103,812.92	-£ 89,994,317.27
38	0	-3,941,744	-3,941,744	0.270561942	-£1,066,485.91	-£ 91,060,803.18
39	0	-3,941,744	-3,941,744	0.261412505	-£1,030,421.17	-£ 92,091,224.35
39	0	-3,941,744	-3,941,744	0.252572468	-£995,576.01	-£ 93,086,800.36

# NHS AYRSHIRE AND ARRAN

# NATIONAL FORENSIC ADOLESCENT SERVICE FOR SCOTLAND

# **OPTION 3 - 12 BEDDED UNIT (ENHANCED)**

#### SUMMARY NET PRESENT VALUE CALCULATION

Year	Capital Cost	Revenue Costs	Net Cash Flow	Discount Factor	NPV	Cummulative NPV
	(excl.VAT)	(Exc Capital Charges)				
0	-5,225,328	-3,941,744	-9,167,072	1.00000000	-£9,167,072.00	-£ 9,167,072.00
1	0	-3,941,744	-3,941,744	0.966183575	-£3,718,626.42	-£ 12,885,698.42
2	0	-3,941,744	-3,941,744	0.933510700	-£3,679,660.20	-£ 16,565,358.62
3	0	-3,941,744	-3,941,744	0.901942706	-£3,555,227.25	-£ 20,120,585.87
4	0	-3,941,744	-3,941,744	0.871442228	-£3,435,002.17	-£ 23,555,588.04
5	0	-3,941,744	-3,941,744	0.841973167	-£3,318,842.68	-£ 26,874,430.72
6	0	-3,941,744	-3,941,744	0.813500644	-£3,206,611.28	-£ 30,081,042.00
7	0	-3,941,744	-3,941,744	0.785990961	-£3,098,175.15	-£ 33,179,217.15
8	0	-3,941,744	-3,941,744	0.759411556	-£2,993,405.95	-£ 36,172,623.10
9	0	-3,941,744	-3,941,744	0.733730972	-£2,892,179.66	-£ 39,064,802.76
10	0	-3,941,744	-3,941,744	0.708918814	-£2,794,376.48	-£ 41,859,179.24
11	0	-3,941,744	-3,941,744	0.684945714	-£2,699,880.66	-£ 44,559,059.89
12	0	-3,941,744	-3,941,744	0.661783298	-£2,608,580.35	-£ 47,167,640.24
13	0	-3,941,744	-3,941,744	0.639404153	-£2,520,367.48	-£ 49,688,007.72
14	0	-3,941,744	-3,941,744	0.617781790	-£2,435,137.67	-£ 52,123,145.39
15	0	-3,941,744	-3,941,744	0.596890619	-£2,352,790.01	-£ 54,475,935.40
16	0	-3,941,744	-3,941,744	0.576705912	-£2,273,227.07	-£ 56,749,162.47
17	0	-3,941,744	-3,941,744	0.557203779	-£2,196,354.65	-£ 58,945,517.12
18	0	-3,941,744	-3,941,744	0.538361140	-£2,122,081.79	-£ 61,067,598.92
19	0	-3,941,744	-3,941,744	0.520155690	-£2,050,320.57	-£ 63,117,919.49
20	0	-3,941,744	-3,941,744	0.502565884	-£1,980,986.06	-£ 65,098,905.55
21	0	-3,941,744	-3,941,744	0.485570903	-£1,913,996.19	-£ 67,012,901.74
22	0	-3,941,744	-3,941,744	0.469150631	-£1,849,271.68	-£ 68,862,173.42
23	0	-3,941,744	-3,941,744	0.453285634	-£1,786,735.93	-£ 70,648,909.35
24	0	-3,941,744	-3,941,744	0.437957134	-£1,726,314.90	-£ 72,375,224.25
25	0	-3,941,744	-3,941,744	0.423146989	-£1,667,937.11	-£ 74,043,161.36

26	0	-3,941,744	-3,941,744	0.408837671	-£1,611,533.44 -£	75,654,694.80
27	0	-3,941,744	-3,941,744	0.395012242	-£1,557,037.14 -£	2 77,211,731.93
28	0	-3,941,744	-3,941,744	0.381654340	-£1,504,383.71 -£	2 78,716,115.64
29		-3,941,744	-3,941,744	0.368748155	-£1,453,510.83 -£	80,169,626.47
30	0	-3,941,744	-3,941,744	0.356278411	-£1,404,358.29 -£	81,573,984.75
31	0	-3,941,744	-3,941,744	0.344230348	-£1,356,867.91 -£	82,930,852.66
32	0	-3,941,744	-3,941,744	0.332589709	-£1,310,983.49 -£	84,241,836.15
33	0	-3,941,744	-3,941,744	0.321342714	-£1,266,650.71 -£	85,508,486.87
34	0	-3,941,744	-3,941,744	0.310476052	-£1,223,817.11 -£	86,732,303.98
35	0	-3,941,744	-3,941,744	0.299976862	-£1,182,431.99 -£	87,914,735.98
36	0	-3,941,744	-3,941,744	0.289832717	-£1,142,446.37 -£	89,057,182.35
37	0	-3,941,744	-3,941,744	0.280031610	-£1,103,812.92 -£	90,160,995.27
38	0	-3,941,744	-3,941,744	0.270561942	-£1,066,485.91 -£	91,227,481.18
39	0	-3,941,744	-3,941,744	0.261412505	-£1,030,421.17 -£	92,257,902.35
39	0	-3,941,744	-3,941,744	0.252572468	-£995,576.01 -£	93,253,478.36

-5,225,328

# **Needs Analysis**

Please complete Part 1 and this will determine if an answer is required to Part 2 of this survey. Thank you in advance for your assistance, it really is appreciated. Once completed please return this to Dr Gillian Howieson [gillian.howieson@nhs.net].

Name:	
Workplace:	

# Part 1

Question	Response (please answer yes or no)
1) Do you have any patients currently in secure hospital outside Scotland?	1)
2) Have you referred any patients to secure hospital outside Scotland in last 5 years who didn't go?	2)
3) Have you had any patients discharged from secure hospital outside Scotland in last 5 years?	3)
4) Do you have any patients who would benefit from secure adolescent hospital in Scotland (but not in above	4)a)
numbers)?: a) Currently b) Nearly/maybe soon c) Did (in last 5 means) but no longer	4)b)
c) Did (in last 5 years), but no longer appropriate	4)c)

Note: Only complete Part 2 (next page) if you answered <u>yes</u> to any of the above questions. If you answered <u>no</u> to all of the questions then that's all the information we require, so thank you for your time.

# Part 2

**Questionnaire** (about specific patient – but no identifying information. If you have more than one patient then please complete a questionnaire for each patient)

Question	Response
1. Gender	
<ol> <li>Age at present (&amp; when referred/admitted, if different)</li> </ol>	
3. Diagnoses	
<ol> <li>Location of patient prior to referral i.e. hospital/secure unit</li> </ol>	
5. Length of time in unit (months)	
6. Referring health board	
7. Admitting unit (or level of security if you do not wish to specify)	
8. Specific needs requiring referral/admission to the unit	
9. Are these needs being met	
10. Before/whilst in secure hospital	Please tick the answers applicable:
<ul> <li>Absconding/escape</li> </ul>	
o Assaults	
<ul> <li>Property</li> </ul>	
<ul> <li>Staff/professionals</li> </ul>	
<ul> <li>Other patients/peers</li> </ul>	
<ul> <li>Visitors</li> </ul>	
<ul> <li>Public</li> </ul>	
<ul> <li>Others</li> </ul>	
<ul> <li>Fire setting</li> </ul>	
o Deliberate self injury	

a) required A&E or other time out with	
unit?	
<ul> <li>Cutting</li> </ul>	
<ul> <li>Swallowing</li> </ul>	
<ul> <li>Ligatures</li> </ul>	
• Other	Please specify
<ul> <li>Significant physical health needs</li> </ul>	
<ul> <li>Need time out with unit?</li> </ul>	
11. Needed constant/special obs	
<ul> <li>How long (weeks)</li> </ul>	weeks
<ul> <li>How many staff</li> </ul>	staff
12. Needed seclusion	
13. Do they need to be cared for away from any	
individuals (e.g. gender specific issues)?	What issues:
14. Has time out of the unit?	
15. Contact with family	
• In person	
<ul> <li>Skype/video/phone/letter/email</li> </ul>	Please specify
16. History/current problems with alcohol and/or drugs	Please specify
17. Difficulties relating to trauma	Please tick the answers
o Physical	applicable:
o Sexual	
o Emotional	
o Neglect	
o Death	

o Other	
	Please specify
18. Where will they move on to?	
<ul> <li>Any problems relating to this?</li> </ul>	
<ul> <li>Any issues with delayed discharge?</li> </ul>	
19. What's worked well with the referral/admission?	
20. What's not worked so well?	
<ul> <li>Any suggestions for improvement?</li> </ul>	
21. Any other relevant information?	
22. For those that were referred but not admitted, why?	Didn't need secure hospital
	hospital Problems with legal
	hospital Problems with legal status:
	<ul> <li>hospital</li> <li>Problems with legal status:</li> <li>a) Not detainable</li> <li>b) Couldn't leave</li> </ul>
	<ul> <li>hospital</li> <li>Problems with legal status:</li> <li>a) Not detainable</li> <li>b) Couldn't leave Scotland</li> </ul>
	hospital   Problems with legal   status:   a) Not detainable   b) Couldn't leave   Scotland   c) Other   Cross border transfer
	<ul> <li>hospital</li> <li>Problems with legal status:</li> <li>a) Not detainable</li> <li>b) Couldn't leave Scotland</li> <li>c) Other</li> <li>Cross border transfer appeal upheld</li> </ul>
	<ul> <li>hospital</li> <li>Problems with legal status:</li> <li>a) Not detainable</li> <li>b) Couldn't leave Scotland</li> <li>c) Other</li> <li>Cross border transfer appeal upheld</li> </ul>
	<ul> <li>hospital</li> <li>Problems with legal status:</li> <li>a) Not detainable</li> <li>b) Couldn't leave Scotland</li> <li>c) Other</li> <li>Cross border transfer appeal upheld</li> </ul>

	Needed secure hospital again?
	Ongoing mental health follow-up?
	Were admission objectives achieved
	a) Yes, for long term
	b) Short term but recurred
	🗌 c) Other
24. For those that are/were inappropriately placed/near misses/missed opportunities:	What are the unmet needs?
	How did/are they resolving/being addressed?
	What helped?
	What could be improved on?

Thank you for the time you have spent completing this.





**NHS Ayrshire & Arran** 

# National Secure Adolescent Inpatient Service for Scotland: NATIONAL STAKEHOLDER GROUP TERMS of REFERENCE (17.04.2018)

# 1. GENERAL

These terms of reference set out the membership, remit responsibilities and reporting arrangements of the National Stakeholder Group for the Secure Adolescent Inpatient Service for Scotland ("the Group").

# 2. PURPOSE & ROLE

- 2.1. The Group will be established in April 2018 by NHS Ayrshire & Arran Mental Health Services, hosted by North Ayrshire Health & Social Care Partnership
- 2.2. The Group will provide expert advice on the development, planning, implementation and evaluation of the National Secure Adolescent Mental Health Inpatient Service for Scotland (NSAIS).
- 2.3. The Group will provide a robust advisory structure which draws on expertise from existing professional, patient and public groups.
- 2.4. The Group will be consulted on key decisions at all stages in Business Planning for the NSAIS<sup>1</sup>
- 2.5. Consultation will be undertaken with reference to key priorities of the proposed national service:
  - Provision of safe, effective, person-centred care including model of care.
  - Equitable access for adolescents who require secure inpatient care from all areas of Scotland, including care pathways, discharge pathways, workforce planning, building an effective workforce and medical model.
  - Treatment will be provided within framework of relevant mental health and children's legislation

<sup>&</sup>lt;sup>1</sup>Business case timetable – Appendix A

# 3. Membership:

- 3.1. The Group will have a sufficiently wide membership to ensure that meaningful discussion can take place on all key elements of design and function of the NSAIS for Scotland.
- 3.2. Members will provide a network of support and advice, rather than represent any specific discipline or patient interest group.
- 3.3. The Group will comprise maximum of 30 members with a quorum of 10 members of which there must be representation from professionals and patients/carers.
- 3.4. Membership will be for two years in the first instance, and could be extended for a further two years.
- 3.5. Chair will be appointed by Director of North Ayrshire Health & Care Partnership and Head of Mental Health.
- 3.6. National representatives invited from a range of the following:
  - Senior clinician/manager from each of the three regions (West, South/East and North, as structured for provision of adolescent inpatient services)
  - Forensic Network
  - Healthcare Improvement Scotland: Mental Health Access & Improvement Services Team / Scottish Patient Safety Programme
  - Scottish Children's Reporter Administration
  - Scottish Government: Mental Health & Protection of Rights Division
  - National Services Division
  - Scottish Government CAMHS Lead Clinicians Group
  - Scottish Prison Service
  - NHS Education for Scotland
  - Royal College of Psychiatrists in Scotland, Child & Adolescent and Forensic Faculties
  - NHS England Medium Secure Forensic Services for Young People
  - Integration Joint Board
  - Mental Welfare Commission for Scotland
  - Public and Patient representative group
  - Secure Care Board

# 4. Accountability

- 4.1 The Group will report to the NSAIS Project Board and Steering Group.
- 4.2 Individual Group members will consult with and feedback to others in their locality or sphere of expertise to ensure broad representation of views.

# 5. Review

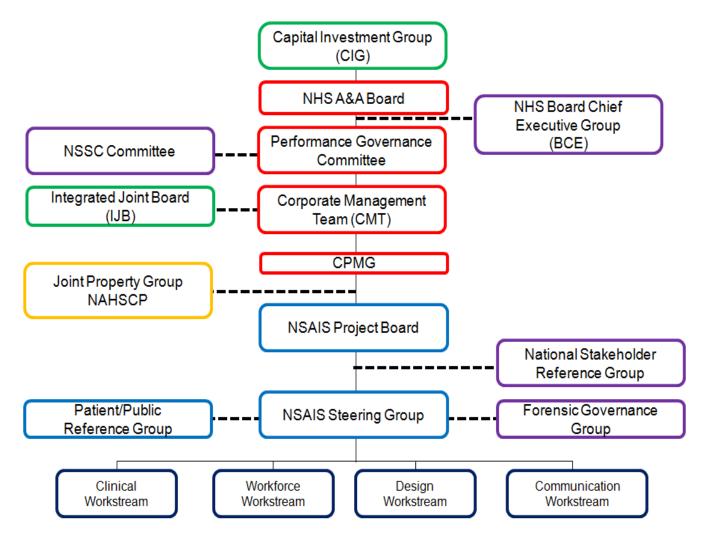
5.1 The Group will contribute to review of its Terms of Reference by the Steering Group and Project Board at the end of the Project Design.

# 6. Ways of working

- 6.1 The Group will have dedicated secretarial support to minute meetings and circulate agenda and documents.
- 6.2 Sub groups may be convened to focus on specific topics.
- 6.3 The Group will meet three times per year for two years in the first instance.
- 6.4 Flow of information in and out of the Group is summarised in Appendix A.

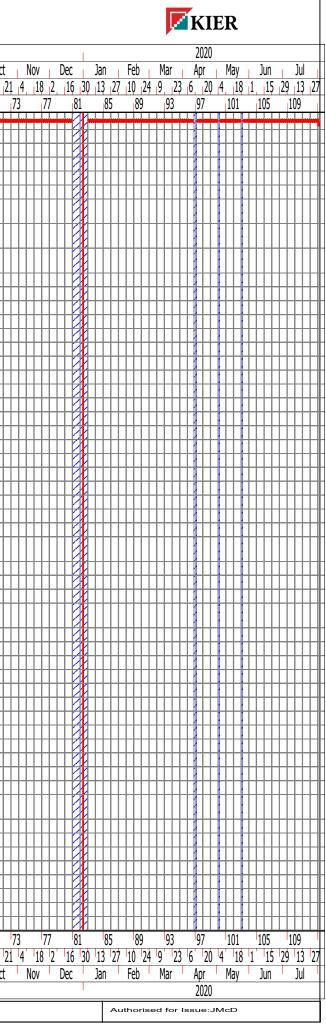
# Appendix A

# **Governance Groups**



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2	STAGE 2 DEVELOPMENT to OBC		10 Apr 19	286d																										ļ
3	PSCP Letter of Appointment Contract Conditions Meeting Kier/Client/AECOM		14 Feb 18 25 Apr 18		3 🗳	++++		8			$\left  \right  \left  \right $	+++	++++	+++	++++	+++	$\mathbb{H}$		+++	$\left  \right  \left  \right $	++++	┼╬┼┤					┼┼┼┼	++++	+++	ł
5	Mobilise Team		11 May 18	12d				5																				++++	++++	t
6	NHS A&A/Kier Stakeholder Review Meeting	23 May 18	23 May 18						6 💊																					l
7	Establishing Schedule of Accommodation/Benchmarking Cost Discussions/Agreement of Project Brief Meeting	29 May 18	20 Jul 18	24d					7																					
8	"A Day in the Life" Visit/Experience by our Healthcare Architect - Lianne Knotts (Date TBC	) 18 May 18	18 May 18	1d				8	8																					ļ
9	Legacy Information & Workshops - "Complete by" Dates Shown until Dates Agreed	23 May 18		111d					9 <b>F</b>						++1															
10	Surveys		31 Jul 18	37d								I						ЦЦ												ļ
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15	Initial Meeting - Kier/Estates: Initial Information/Access/Logistics Discussions		23 May 18		$\left  \right  \left  \right $	++++			.5 💍	$\square$	$\left  \right  \left  \right $	+++	$\left  \right  \left  \right $	+++	$\left  \right  \left  \right $	+++	HHF	<b>  </b>	+++		$\left  \right  \left  \right $	+					₩₩	++++	+++	ł
16	As-Built Stuctural & Building Layouts - Kier/NHS A&A As-Built MEP Layouts - Kier/NHS A&A		11 Jun 18 11 Jun 18			++++			16		$\left  \right  \left  \right $	+++	++++	+++	++++	+++	$\mathbb{H}$	<b>µ</b> ⊣	+++	$\left  \right  \left  \right $	++++						++++	++++	+++	╉
18	As-Built Incoming Services & Drainage Layouts - Kier/NHS A&A		11 Jun 18						118																		┝┼╋┼	++++	+++	t
19	Asbestos Records - Kier/NHS A&A		11 Jun 18						19																					t
20	Workshops		26 Oct 18	89d						20																				1
21	AEDET Workshop - NHS A&A/Design Team/Kier		26 Oct 18			++++								+++	21 🔷	+++		ЦЦ			$\left  \right  \left  \right $						$\square$	++++		┦
22 23	HAISCRIBE Workshop - NHS A&A/Design Team/Kier Infection Control Review/Workshop - NHS A&A/Design Team/Kier		25 Jun 18 25 Jun 18			++++	╂┼┼	┼┼┠┤		22 🔷	$\left  \right  \left  \right $	+++	++++	+++	++++	+++	$\mathbb{H}$	HH	+++	$\left  \right  \left  \right $	++++	+	$\square$				┢┼╋╋	++++	+++	$\frac{1}{2}$
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25	IM&T Workshop - NHS A&A/Design Team/Kier		02 Jul 18							25 🔷																			+++-	1
26	Access/Security Workshop - NHS A&A/Design Team/Kier		02 Jul 18							26 🔷																	ШП		Ш	1
27	NDAP Workshop - Kier/NHS A&A	26 Oct 18	26 Oct 18			++++					$\left  \right  \left  \right $	+++	++++	+++	27 🔷	+++		411	+++		++++						┼┼╀┼	++++	++++	┦
28	Service Diversions involving Statutory Authorities & Estates - Kier/NHS A&A Estates/Design Team	09 Jul 18	09 Jul 18							28 <	<b>&gt;</b>							411												
29	Service Isolation/Curtailment Plan & Protocol - NHS A&A Estates/Kier		09 Jul 18							29 <	<b>&gt;</b>							ИП												İ
30	Emergency Procedures Protocol Workshop - NHS A&A/Kier		09 Jul 18							30 🗸																			111	1
31	BREEAM Assessment - Kier Group 2 & 3 Equipment Workshop - Availability Programming & Coordination - NHS		09 Jul 18			++++		╎┤╏╎		31 🔇	<b>?</b>	+++	++++	+++	++++	+++		4	+++	$\left  \right  \left  \right $	++++	┼╬┼┤					┝┼╋╋	++++	+++	+
32	A&A/Kier	06 Sep 18	06 Sep 18										32 🔷																	
33	Design Development	11 Jun 18	20 Dec 18	139d					33																					1
34	Concept Design & NHS A&A Sign Off		16 Aug 18			++++							$\square$	+++	++++	+++		ИЦ	+++		$\left  \right  \left  \right $						$\square$	++++		4
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37	Design Brief/SOA/Adjacencies (Round 1)		28 Jun 18						37								HHE										++++	++++	+++	t
38	Clinical Task Group Meeting 1	29 Jun 18	29 Jun 18							38 🔷	ШП						ШĚ													Ĵ
39	NHS A&A Internal Work Stream Meeting & Sign Off - Round 1		05 Jul 18	10.1		μП		ĻĻ∏		39 🤇		$\downarrow \downarrow \downarrow$	μП	$\downarrow \downarrow \downarrow$	$\square$	+ + + + + + + + + + + + + + + + + + +	HIL	ЦП	+++	μП	μΠ		$   \square$		$   \square$	$\downarrow\downarrow\downarrow$	Щ∏	440	$\downarrow\downarrow\downarrow\downarrow$	ļ
40	Round 2 Design Brief/SOA/Adjacencies (Round 2)		26 Jul 18 18 Jul 18	19d 14d	$\left  \right  \left  \right $	++++		╎╎╏╎				+++	$\left  \right  \left  \right $	+++	$\left\{ \left  \right\rangle \right\}$	+++			+++		$\left\{ \left\{ \left\{ \right\} \right\} \right\}$						┟┼╫┼	┼┼┼┦	+++	+
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44	Round 3		16 Aug 18	20d							44		ΠΠ					ЦП			ΠΠ						μΠ		$\Pi$	1
45	1:500 Concept, 'Bubble'/Flow Diagram Sign Off + Room Data Sheet for Generic and Standard Room Types (Round 4)	19 Jul 18	08 Aug 18	15d							45	•																		
46	Clinical Task Group Meeting 4		09 Aug 18								4	16 🔷																		1
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48	Developed Design 1:200 & NHS A&A Sign Off		27 Nov 18		$\parallel \mid \mid$	++++		$\left  \right  \left  \right $			$\left  \right  \left  \right $						HHE	KH1	+++		$\left\{ \left\{ \right\} \right\}$	┼╢┤	$\parallel \mid \mid$			+++	₩₩	++++	+++	ļ
49 50	Architectural Round 1		26 Oct 18 13 Sep 18	56d 25d	$\left\{ \left  \left  \right\rangle \right  \right\}$	++++		┼┼╟┤		$\left  \right  \left  \right $	┼┼┼┼					+++	/		+++	┝┼┼┼	┼┼┼┼				$\left  \right  \left  \right $		┟┼╫┼	++++	+++	ł
51	1:200 Scheme Design: 1:200 Layout Review - Round 1	09 Aug 18	05 Sep 18	20d		++++						51	╞╧															++++	+++	ł
52	Clinical Task Group Meeting 1	06 Sep 18	06 Sep 18										52 🔷																	1
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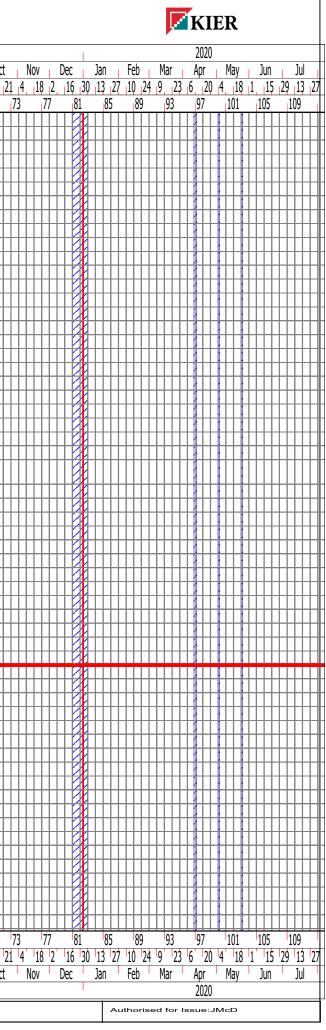
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56	Clinical Task Group Meeting 2	27 Sep 18	27 Sep 18											5	6															ⅲ		
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60	Clinical Task Group Meeting 3	19 Oct 18	19 Oct 18													•			ДП											Ш	Ш	
61 62	NHS A&A Internal Work Stream Meeting & Sign Off - Round 3 Civil &Structural	26 Oct 18 06 Sep 18	26 Oct 18 07 Nov 18	45d				+++			$\left  \right $	+++	+++	62		61 🔷			<b>¦</b> ∰	$\square$			++						┼┼┼	┼┼┼	+++	$\left  \right $
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67	Time Risk Allowance - Stage 2 Design Production/Resourcing	08 Nov 18	14 Nov 18													6																
68	Stage 2 Design Sign Off Complete - Design Frozen Architectural Report		15 Nov 18 10 Dec 18	18d				+++		╉╫┼	$\left  \right  \left  \right $	+++	+++		+++		58		<u> </u>			$\left  \right  \left  \right $				$\left  \right  \left  \right $			┼╫┼	+++	+++	┝┼┤
69 70	Planning & Building Warrant		20 Dec 18	40d							++++	+++	+++			70	69			$\left  \right  \right $	$\left  \right  \right $		┼┼∦						┼╂┼	+++	+++	+
	Early Engagement - Clarifications/Discussions for Project Requirements																															
71 72	Planning Submission & Approval Building Warrant Submission & approval		20 Dec 18 20 Dec 18	40d 40d	+++	+++		+++		╂┼┼	++++	+++	+++		+++	71			<b>µ</b> ∏	$\left  \right  \right $		$\left  \right  \left  \right $	++	+		$\left  \right  \left  \right $			┼╫┼	+++	+++	┝┼┤
73	Cost Planning	30 May 18	09 Jan 19	151d					• 7.	73						/2														+++	+++	H
74	Cost Plan Development			86d							74	111							ДП										Ш	Ш	Ш	
75 76	1:500/Concept Check 1:200 Checks		22 Aug 18 01 Nov 18					+++			75				1					$\square$									+++	+++	+++	$\mathbb{H}$
77	Risk Review		19 Oct 18						7.	77						╕																
78	Risk Review Workshops	30 May 18	19 Oct 18						78	3					♦	<b>♦</b>															$\square$	
79	Stage 2 Final Cost Plan & Report		09 Jan 19														79														₩	
80	Stage 2 Final Cost Plan		10 Dec 18					+++			$\left  \right  \left  \right $	+++	+++		+++		80	81	4	$\square$						$\left  \right  \left  \right $			+	+++	+++	
81 82	Stage 2 Cost Plan Discussions Stage 2 Cost Plan Report		09 Jan 19	50 7d				+++			++++	+++	+++		+++		+++	81		$\left  \right  \right $	$\left  \right $							+++	┼╫┼	+++	+++	
83	NHS A&A Board & CIG OBC Approvals	10 Jan 19	10 Apr 19	64d				Ш															•						Ⅲ	▦	Ш	
84 85	OBC CPMG/CMT/Performance Governance/IJB Submission & Approvals		05 Mar 19 20 Feb 19	38d 30d		++		+++	+++	╂┼┼	$\left\{ \left\{ \right\} \right\}$	+++	+++		+++				84			$\left  \right  \left  \right $	┼┼∦	+		$\left  \right  \left  \right $			┼╫┼	+++	+++	┝┼┤
86	Submit to Board	21 Feb 19	04 Mar 19	-															ΪΠ	8	6											
87	Board Approval of OBC		05 Mar 19	00.1							$\left  \right $								<b>A</b>		87🔷							$\square$	₩	₩	Ш	
88 89	CIG Issue to CIG		10 Apr 19 13 Mar 19	20d				+++			++++	+++								+++			┦╢					+++	┼╂┼	+++	+++	++
90	CIG Meeting - Approval of Outline Business Case	10 Apr 19	10 Apr 19																			9	0							##		
91	Stage 2 Approved	10 Apr 19	10 Apr 19																			ė	1 🔷 🚺					┿┿┿	┿	┿┿	┿┿┥	H
92	STAGE 3 DEVELOPMENT to FBC	15 Nov 18	30 Aug 19	191d								+++					92											<b>+++</b> +	┿╅	+++	+++	H
93	Design Development	15 Nov 18	20 Mar 19	80d				Ш									93													Ш	Ш	
94 95	Technical Design 1:50 Architectural	15 Nov 18 15 Nov 18	20 Mar 19	80d 35d				+++		╢┼	$\left\{ \right\}$	+++	+++		+++								┼┼∦	+					┼╂┼	+++	+++	$\left  \right $
96	Round 1	15 Nov 18	06 Dec 18	15d													96													Ш	Ⅲ	
97	1:50 Detailed Design: 1:50 Loaded Departmental Layout (Round 1)		28 Nov 18 29 Nov 18					+++			$\left  \right  \left  \right $	+++	+++		+++		97 ====		4			$\left  \right  \left  \right $				$\left  \right  \left  \right $			+	+++	+++	┝┼┤
98 99	Clinical Task Group Meeting 1 NHS A&A Internal Work Stream Meeting & Sign Off - Round 1		06 Dec 18								$\left\{ \right\}$							0		$\mathbb{H}$	$\left  \right $								┼╂┼	+++	+++	
100	Round 2	29 Nov 18	20 Dec 18					Ш																					Ⅲ	Ш	Ш	
101 102	1:50 Detailed Design: 1:50 Loaded Departmental Layout (Round 2) Clinical Task Group Meeting 2		12 Dec 18 13 Dec 18			++		+++			$\left\{ \left\{ \right\} \right\}$	+++	+++		+++			02		$\left  \right  \right $		$\left  \right  \left  \right $		+		$\left  \right  \left  \right $			┼╫┼	+++	+++	$\left  \right $
103	NHS A&A Internal Work Stream Meeting & Sign Off - Round 2		20 Dec 18														+++1	103												+++	+++	
104	Round 3		17 Jan 19					Ш										104												Ш	Ш	
105 106	1:50 Detailed Design: 1:50 Loaded Departmental Layout Sign Off (Round 3) Time Risk Allowance - Stage 3 Design Production/Resourcing		19 Dec 18					+++		╂┼┼	++++	+++	+++		+++			105		$\left  \right  \right $	$\left  \right  \right $		┼┼∦	+				++++	┼╫┼	+++	+++	$\left  \right $
107	Clinical Task Group Meeting 3	10 Jan 19	10 Jan 19																07													
108	NHS A&A Internal Work Stream Meeting & Sign Off - Round 3 Civil &Structural	17 Jan 19 29 Nov 18	17 Jan 19 23 Jan 19	30d	$\square$	$    ^{\top}$		$\parallel \parallel$	$\mathbf{H}$	$\prod$	[] [] [] [] [] [] [] [] [] [] [] [] [] [	┼┼┦	$\frac{1}{1}$	$    \overline{ }$	+++	$\square$	100		108	$\prod$	μF	[] []			H	$\square$		+++	┼╫Ҭ	+++	++1	μĮ
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R	1																															

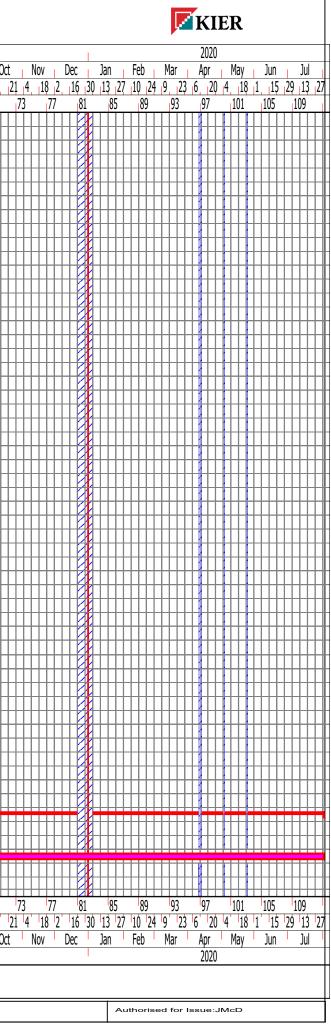
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110	Civil		23 Jan 19			•		ΪΠ	T T			ПŤТ					110										<u>,,,</u>			İTT	ΠT		П
111	Structural		23 Jan 19														111					Ш						Т	Ш		Ш	⋣	Ш
112	MEP	12 Dec 18	19 Feb 19	40d																	1						+++		<u>    </u> '		$\downarrow\downarrow\downarrow\downarrow$	Ш	j
113	MEP		19 Feb 19					$\left  \right  \left  \right $					$\left  \right  \left  \right $		+++		113						+		++		+++		<u>       </u>	++∔	+++		$\square$
<b>114</b>	Construction Details Cost Planning & Market Testing	10 Jan 19 29 Nov 18	20 Mar 19 04 Jun 19	<b>50d</b> 120d				$\left  \right $	╏╎╎╏	++++			$\left  \right $		+++				4				$\left  \right  \right $				+++	++-/	$\left  + + + \right $	┼┼╊	+++	┿┿┦	+
116	Cost Checks		30 Jan 19				┼╂┼	+++					+++				115				╈	+++	+++		┼┼			+++	H	+++	+++	+++	H
117	1:50 - No. 1		05 Dec 18				╡┋┼	HH					HH				117			•	++	$\square$			++			+++	H	Ħ	ĦŦ	+++	H
118	1:50 - No. 2	17 Jan 19	23 Jan 19	5d															118 🗖									T				$\square$	
119	1:50 - No. 3		30 Jan 19																119									Ш				$\square$	
120	Risk Review		24 Jan 19					$\square$							+++			<b>=</b> //				$\square$	$\square$				+++	Щ.	<u>    </u> '	₩.	₩	Ш	$\parallel$
121	Risk Review Workshops		24 Jan 19					$\left  \right $					$\left  \right $		+++		121	14				$\square$	$\left  \right  \right $		++		+++		<u>   </u>  '	┼┼╋	+++	┼┼┦	+
122 123	Work Package/Billing Work Package Design Review		06 Mar 19 25 Jan 19				┼╋┼	$\left  \right $		++++			$\left  \right $	$\left  \right  \left  \right $	+++		+++		122		Ŧ	$\square$	$\square$		++		+++		+++-'	┼┼╋	+++	┼┼┦	H
123	Billing Period		06 Mar 19		$\left\{ \left  \left  \right\rangle \right  \right\}$		╈	++++	╏╎╎╏	++++		┝┼┼┼	┼┼┼┤	┝┼┼┼	+++	┝┼┼┦	╉╋	╎╢	123	+++		$\left  \right  \right $	$\left  \right  $	╏┼╏	++		+++	++-	+++	┼┼╋		╂╂┦	$\mathbb{H}$
124	Market Testing		17 Apr 19				╈	$\uparrow \uparrow \uparrow \downarrow$		++++			$\uparrow \uparrow \uparrow \downarrow$	+++	+++	┝┼┼┤	+++	/		125					++		$\dagger$	+++	++		$\parallel \parallel$	$\parallel \parallel$	$\parallel$
126	M&E Costs: Market Testing/Target Cost	07 Feb 19	13 Mar 19	25d																126			ШŤ									$\square$	Ħ
127	Market Testing: Tender Preparation & Issue Work Packages	07 Feb 19	13 Mar 19	25d				$\square$						ШП		ШП				127			$\square$		П			П	Ш		Ш	П	П
128	Work Package: Tender Assessments		27 Mar 19		$\parallel \mid \mid$	$\parallel \parallel$		$\square$	<b>↓</b> ↓↓ [	$\downarrow\downarrow\downarrow\downarrow\downarrow$			$\square$	ЩЦ	$\parallel \mid \mid$	μЦ	<u>     [</u>		Щ	128	-		Ш	<b>#</b>   [	$\parallel$		111	Щ	$\mu$	$\downarrow\downarrow\downarrow\downarrow$	$\downarrow\downarrow\downarrow\downarrow$	Ш	Щ
129	Life Cycle Costings		27 Mar 19		+++			$\left  \right  \left  \right $		++++			$\left  \right $		+++		+++			129							+++	44	₩+	┼┼╬	+++	╨	
130 131	Joint Cost Review Market Test Complete		03 Apr 19 04 Apr 19				┼╬┼	$\left  \right  \left  \right $		++++			$\left  \right $	$\left  \right  \left  \right $		$\left  \right $	+++				130				++		+++	++-/	+++-'	┼┼╬	+++	┼┼┦	H
132	Time Risk Allowance - Market Testing Issues		17 Apr 19				┼┇┼	$\left  \right $		++++			+++	$\left  \right $	+++		+++			+++	┼┼	13.	82		++		+++	+++	+++	┼┼╬	+++	┼┼┦	+
133	Stage 3 Target Cost & Report	18 Apr 19	04 Jun 19	30d			┼┇┼																					+++	+++		+++	╆╋┥	H
134	Finlise Target Cost Proposal	18 Apr 19	26 Apr 19	5d				Ш					Ш									ĦŦ						111	HT		ĦŦ	Ħ	Н
135	Kier Internal Adjudication		03 May 19																					135				Т	ПГ		Ш	$\square$	П
136	Review & Agree Target Cost with NHS A&A		14 May 19												$\parallel \mid \mid$							Ш		136				'	<u>   </u>  '	$\square$	$\downarrow\downarrow\downarrow\downarrow$	Ш	Ш
137 138	Stage 3 Complete & Target Price Concluded AECOM JCA Sign Off		15 May 19		+++			+++		++++		+++	+++		+++		+++					$\square$	$\square$	137			+++	-++-/	<u> </u>  ++-'	┿	+++	₩	H
138	Stage 3 Report		20 May 19 04 Jun 19		+++		┼╋┼	$\left  \right $		++++			$\left  \right $	$\left  \right $	+++	$\left  \right $	+++				┼┼	+++	+++		38		+++	++-'	<u> '</u>	┼┼╋	+++	₩	+
140	NHS A&A Board & CIG FBC Approvals	05 Jun 19	30 Aug 19	61d			┼╋┼	$\left  \right $		++++	+++-		$\left  \right $	$\left  \right  \left  \right $	+++		+++			+++	┼┼	$\left  \right  \right $	$\left  \right $					╧╧╧┙	╞╪╪╧	╆╪╪╬		┼┼┦	H
141	FBC	05 Jun 19	31 Jul 19	40d																	╈	$\square$			╈	141						+++	
142	CPMG/CMT/Performance Governance/IJB Submission & Approvals		16 Jul 19	30d																						142					Ħ		
143	Submit to Board		30 Jul 19	10d																								143			Ш	Ш	Ш
144	NHS A&A Board Approval of FBC	31 Jul 19	31 Jul 19	00.1				$\left  \right  \left  \right $					$\left  \right  \left  \right $		+++							$\square$					+++	14	44			Ш	$\square$
145 146	CIG Issue to CIG		30 Aug 19 01 Aug 19				┼╂┼	$\left  \right  \left  \right $		++++			$\left  \right $	$\left  \right  \left  \right $		$\left  \right $	+++	12			╨	+++	$\left  \right $		++		+++	++-!	145			┼┼┦	H
140	CIG Meeting (TBC) - Approval of FBC		30 Aug 19				┼╬┼	+++		++++			+++	$\left  \right $	+++		+++			+++	╈	+++	+++		┼┼		+++	+++	46	147	₩	┼┼┦	+
148	Stage 4 Legal & Commercial	06 Dec 18	29 Apr 19	90d			┼┋┼										148								╈			+++	H		<b>f</b> +++	+++	H
149	NHS A&A Collate Employer's Contract Data Part 1		16 Jan 19					ΗH									149	Ħ				ĦŦ						+++	H		ĦĦ	Ħ	Н
150	Kier: Contract Data part 2		04 Apr 19																150									Т				$\square$	
151	Draft & Agree Stage 4 Activity Schedule		13 Feb 19					$\square$							$\parallel \mid \mid$				151		++	$\square$	Ш		1				<u>   </u>  '	$\downarrow\downarrow\downarrow\downarrow$	$\downarrow\downarrow\downarrow\downarrow$	Ш	Ш
152	Draft & Agree Stage 4 Pricing Matrix		27 Feb 19		$\left  \right  \left  \right $			$\left  \right  \left  \right $	╟╟╟	++++			$\left  \right  \left  \right $		+++		+++	/		152			$\parallel \mid$		++		$\left  \right  \right $	++	H	┼┼╞	₩	₩	$\mathbb{H}$
153 154	Agree Stage 4 Programme Collate Contract Data Part 2		27 Mar 19 03 Apr 19		$\left  \right  \left  \right $	+++	╉	┼┼┼┤	╟┼┼╟	++++	+++-	┝┼┼┼	┼┼┼┤	┝┼┼┼	+++	┝┼┼┦	╉╋		++	┼┼┤	++	153		∦╂╟	++		+++	┽┽┙	H	┼┼╋	┼┼┼	╫┦	+
154	Issue Stage 4 Form of Scheme Proposal		03 Apr 19				┼┇┼	++++					++++			┝┼┼┦	+++		++	┼┼┤	++				++		+++	+++	++		$\parallel \parallel \parallel$	$\{ \downarrow \downarrow \downarrow \downarrow$	$\mathbb{H}$
156	Final Reviews		29 Apr 19	10d			11	$\parallel \parallel$					$\parallel \parallel$							$\uparrow \uparrow \uparrow$	$\uparrow \uparrow$		156		$\uparrow \uparrow$							$\uparrow \uparrow \uparrow$	Ħ
157	NHS A&A review Stage 4 Form of Proposal	11 Apr 19	17 Apr 19	5d										Ш		Ш							157					П	Ш		Ш	П	П
158	NHS A&A Issue Appendix to Scheme Agreement		18 Apr 19					$\square$							$\parallel \mid \mid$							$\square$	158		1			<u> </u>	<u>    </u> '	↓↓↓	$\downarrow\downarrow\downarrow\downarrow$	Ш	$\square$
159	NHS A&A & Kier Sign Appendix D of Agreement		29 Apr 19				┥┨┼	$\left  \right  \left  \right $		++++			$\left  \right $		+++							$\square$	1	59 🔷 [	++	╟╢	+++		<u>       </u>	┼┼┞		Ш	
160	STAGE 4 - CONSTRUCTION Instruction to Proceed to Stage 4 Construction		03 Aug 20 03 Sep 19	2200	$\left  \right  + \left  \right $	+++	┼╂┼	$\left\{ \left  \right\rangle \right\}$	╏┤┤┨	++++		┝┼┼┼	┼┼┼┤	┝┼┼┼	+++	┝┼┼┦	+++		$\left  + + \right $	┼┼┤	++	$\left  \right  \right $	$\left  \right  \right $	╉┼┨	++	╏┼┼	+++	++	+++	160		+++	H
162	Mobilisation		30 Sep 19	20d			╈	+++					+++			┝┼┼┤			$\left  \right  $	┼┼┤	++	$\parallel \parallel$	+++	╏	++		+++	+++	++	16	1	╧	+
163	Anticipated Construction Period		03 Aug 20																							ĽĦ		j††			163	3	
																ШП		Ø				$\square$	$\square$			Ш	$\prod$	Т	Ш		Ш	П	П
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This schedule of accommodation offers guidance on the rooms that may be required within a CAMHS unit.

Descriptions for some rooms, such as offices, indicate that the size required will be based on number of places and will be project-specific.

Further project-specific considerations are at the foot of the schedule.

Column B HBN Reference	HBN containing the full description of the room.
Column C HBN 03-02 specific room	Refers to rooms only described in this HBN.
Column D Functional Uses	Completed for all HBN 03-02 roooms and where there are additional functions for CAMHS for rooms in other HBNs.
Column E Description	Completed for all HBN 03-02 roooms and where there are CAMHS- specific descriptions for rooms in other HBNs.
Column F Notes	Guidance notes specific to the activity space/room.

	Reference	03-02 specific	area allowance m <sup>2</sup>	area m²		Description	
Activity Space	HBN	HBN room		Total	Functional Uses	(where CAMHS-specific)	Notes

EXAMPLE: 12-bed ward, 100%	The spreadsheet can be used to calculate local project-specific requirements by amending columns D & E (area allowance and quantity).
single-bed rooms	Changing the circulation, communication and engineering percentages also updates the GIA.

ENTRANCE AREA	HBN 03-01 HBN 00-03				Main entrance to the unit. May contain a reception desk, shop, café and other facilities depending on the size of the unit.	A warm and welcoming area that is not overly noisy and does not overpower young people is required. Space for waiting, parking of prams and buggies may be required.	Age-appropriate (applies to all activity spaces). Anti-ligature fixtures and fittings (applies to all patient accessible areas).
Draught Lobby	HBN 03-01	6	1	6	To retain warmth within the reception area of the building.		
Main entrance/recention	HBN 03-01 HBN 00-03	20	1	20		Sign-posting to CAMHS wards. Specific operational policy should be considered for CAMHS ward visitors where this is the main entrance to a unit containing other adult services.	This may be a main entrance for a CAMHS unit only; however, if it is the main entrance to a larger adult facility, then a smaller ward entrance may be required further into the building.
Reception desk. (Size based on number of places.)	HBN 03-01 HBN 00-03	5.5	1	5.5	As per HBN guidance.		
Reception office. (Size based on number of places)	HBN 03-01 HBN 00-04	6	2				

Waiting area (5 places including wheelchair space). (Size based on number of places.)	HBN 03-01 HBN 00-03	1.8	5	9		Additional space may be required to accommodate baby buggies.	
Waiting play area	HBN 23	13	1	13			
Café	HBN 03-01 HBN 00-03	2	10	20	As per HBN guidance.		If there is no café, consideration could be given to providing a vending machine within the reception / waiting area.
Shop	HBN 03-01 HBN 00-03	20	1	20	As per HBN guidance.		

SANITARY FACILITIES	HBN 00-02				support space such as therapy and t	nould be given as to whether or not these should be gender-specific.
WC - ambulant	HBN 00-02	2	1	2	As per HBN guidance.	
WC - semi-ambulant	HBN 00-02	2.5	1	2.5	As per HBN guidance.	
WC (independent wheelchair/semi-ambulant)	HBN 00-02	5.5	1	5.5	As per HBN guidance.	The accessible WC should be kept locked when located in the reception area, to be opened upon request.
Nappy change	HBN 00-02	5	1	5	As per HBN guidance.	Normally located close to the visiting room.

OFFICE / MEETING ROOMS					Mobile working allows for more fl	ow may be used for a number of purpose lexible use of office / administration space o allow for more flexible working.	
Advocacy / Voluntary sector office. (Size based on number of workstations)	HBN 03-01	6	1	6	As per HBN guidance.		This could be a shared space with other voluntary sector organisations.

Interview room	HBN 03-01	12	1	12	As per HBN guidance.	Located within the entrance this can offer a space for fa carers to meet with member staff without advancing furth the unit. This room could also form p the tribunal room.	mily / rs of her into
Tribunal / Conference suite	HBN 03-01	32	1	32	As per HBN guidance.	The location and size of the CAMHS unit will indicate wf or not a dedicated tribunal s required. If it is deemed not required then consideration to be given to where tribuna be held. If the unit has a me room sufficiently large to ho occasional tribunal then loc this close to an interview ro assist in the dual purpose. I considered necessary to sh accommodation with other f on-site, then care will need taken for issues of safegual particularly when moving vulnerable and possibly dist patients. Conference-type room, dep on the location, could be m for the young people out-of- for example, as a cinema / o room.	hether suite is to be a needs als will beeting old the sating om will of it is hare facilities to be rding, tressed pending hulti-use -hours,

Meeting room / Staff handover / group therapy / activities	HBN 03-01		16	1	16	As per HBN guidance.		These rooms should be multi- functional and offer the opportunity for other activities to take place, when not in use for meetings. Ideally a bookable facility will offer more flexibility. Furnishings and storage for unused furniture should be considered carefully to allow for the room layout to be changed.
Multi-faith / contemplation room	HBN 03-01		16	1	16	As per HBN guidance.	Located in a quiet area, but easily	If a room is not available young people require access to multi-faith materials /facilities.
Medical records store	HBN 03-01		12	1	12	As per HBN guidance.		This room may not be required though this will depend whether electronic patient records are used rather than hard copy records.
Ward entrance	HBN 03-02	$\checkmark$	6	1	6	accessed through other service	Locked entrance will require buzzer / video and audio connection to ward office or other designated area.	The entrance to the CAMHS unit / ward should be monitored. Staff should be able to clearly see who is entering and / or leaving the ward. In addition to the main entrance to the CAMHS unit, the entrance to the PICU should be via an airlock. An additional discrete vehicular entrance will be required to allow for the admission of distressed patients without the need for them to enter through a main public area.

VISITORS FACILITIES								
Visiting room	HBN 03-02	~	16	1	16	For visiting. When not in use may be used for informal meetings in a relaxed space.	A range of seating should be provided to cater for adults and children, this could include bean bags and small chairs. Space for play should be available. Easy access to snacks and drinks should be available.	This room should be large enough to accommodate a family including siblings with sufficient space for children to play. The location of the unit may mean that visitors travel long distances and stay for some hours, therefore depending on the size of the unit, more than one visiting room may be required. Consideration should also be given to enable the preparation of food and drinks by the visitors. Access to safe and secure external space which is not overlooked by any other areas should be considered.
Kitchen / beverage area	HBN 03-02	V	6	1	6	To prepare snacks and drinks.	An area where visitors may prepare a drink and snacks to consume in the visitors room with family members.	If overnight accommodation is to be included within the building, depending on the location of the accommodation to the family visitors room then a cooker could be provided within this kitchen area to allow visitors to make a meal.
Overnight family bedroom	HBN 03-02	√	18	1		Sleeping accommodation for two adults and a child, with space for a cot.	Twin bedded room with space for a bed / settee or z-bed and a cot. A small wardrobe with drawers may be required. If a kitchen is not included in this area then tea / coffee making facilities within the room will be required.	If overnight accommodation is not included within the unit then information on the location of reasonably priced overnight accommodation nearby should be available.
En-suite	HBN 03-02	$\checkmark$	4.5	1	4.5			

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PATIENT: BED AREAS					In a mixed-gender ward, a swing-zone as described in H consider carefully the issues of same-sex accommodation	
Single bedroom	HBN 03-01	10.5	10	105	As per HBN guidance.	Personalisation of the room by the patient would be advantageous. The opportunity to display posters and photographs. Lighting which can reflect mood, colour changing, dimmable and controlled from within the room would be advantageous.
Single bedroom (Accessible)	HBN 03-01	12.5	2	25	As per HBN guidance.	As above.
En-suite	HBN 03-01	4.5	12	54	As per HBN guidance.	A lockback door gives the opportunity for the door to be locked in the open or closed position by staff.
Assisted bathroom	HBN 03-01	15	2	30	As per HBN guidance.	Consider provision of a 'domestic'- type bathroom, feels like being at home. Also consider DDA shower as young people often prefer showers to baths.
Mobile hoist storage	HBN 03-01	2	2	4	As per HBN guidance.	Hoists may be stored within an dedicated lockable recess within the bathroom. If this is unavailable, the hoist should be stored in a locked store room within the area which may also contain weighing / sanitary chairs.

PATIENT: COMMUNAL AREAS					Where the ward operate a day-ser required.	rvice, for those young people, additional	l communal space may be
Sitting area/room (size based on number of places)	HBN 03-01	2	12	24	As per HBN guidance.	An open plan area with access to an outside space. An assortment of comfortable seating, television and areas for activities such as electronic games.	
Dining area (size based on number of places)	HBN 03-01	2	12	24	As per HBN guidance.	Open plan, possibly co-located to the sitting area to give a larger space for use outside of mealtimes for activities such as board games, jigsaw puzzles etc.	
Quiet room	HBN 03-01	8	2	16	As per HBN guidance.		
Activities area	HBN 03-01	16	1	16	As per HBN guidance.		This area should include appropriate activities for the age group. This may include electronic games.
Games area / room	HBN 03-01	25	1	25	An area to play games which require more space to allow for movement, such as table tennis, pool or computer games / exercise programmes.		Space should be considered carefully if a table tennis and / or pool table is required. Lockable storage may also be required for the tables and other equipment.
Telephone booth	HBN 03-01	2	1	2	As per HBN guidance.		Location of a telephone booth should be considered carefully. It should be away from the noise and bustle of the communal space but visible for staff.
Staff communication base/ward base (size based on number of places)	HBN 03-01	5.5	2	11	As per HBN guidance.		

UNIT SUPPORT AREAS							
Unit kitchen / ward kitchen	HBN 03-01 HBN 00-03	12	1	12	As per HBN guidance.		The catering solution and the size of the unit will determine the requirements for either a kitchen for the unit and / or ward kitchens.
Patients' beverage area	HBN 03-01 HBN 00-03	6	1	6	As per HBN guidance.		
Patients' property store	HBN 03-01	16	1	16	patient and some floor space if it is	possession, not allowed within the unit or property which has to be controlled by staff (such as aerosol cans)	The size of this room may be smaller than previously as single bedrooms with lockable storage allows more property to be kept in a secure manner. The lockable storage can be mixed and some can be controlled by staff only within the bedroom.
Patients' laundry	HBN 03-01	12	1	12	As per HBN guidance.		Inclusion of this room in the unit, can assist in developing life skills.
Dirty utility (with bed pan processing)	HBN 00-03	12	1	12	As per HBN guidance.		
Disposal hold	HBN 00-03	8	1	8	As per HBN guidance.		
Cleaners' rooms	HBN 00-03	8	1	8	As per HBN guidance.		

STORAGE						All storage should be lockable. A	variety of storage solutions will be reqເ	iired.
Linen storage	HBN 03-01		5	1	5	As per HBN guidance.		This can be one linen store or could be small cupboard areas located in bedroom corridors.
Equipment	HBN 03-01		12	1	12	As per HBN guidance.		Sockets may be required for equipment which requires charging.
Outdoor storage	HBN 03-02	√	12	1	12		bicycles, tents and sports equipment. Storge for gardening equipment may also	This does not need to be located within the building but could be an unheated external structure such as a garden shed or garage.

CLINICAL/THERAPY AREAS							
Treatment room	HBN 00-03 HBN 03-01	16	1	16	As per HBN guidance.		
Clinic room / drug storage	HBN 03-01 HBN 03-02	8	1	8	Space to prepare medications for	Locked storage for drugs and medicines	Allows for drugs to be administered in privacy allowing the patient to discuss their medication in a private environment. It also leaves the treatment room free to be used simultaneously.
Small private room / area	HBN 03-01 HBN 03-02	8	1	8	discuss the medication in a private	Chairs and a small table may be required. A space to place a jug of water and glasses.	Co-located to the clinic room / treatment room.

THERAPY ROOMS						A variety of activity rooms may be required. Where the ward operates a day-service, for those young people, additional communal space may be required.		
Arts and Crafts room			16	1	16	As per HBN guidance.		
Group therapy rooms			16	1	16	As per HBN guidance.		
Therapy kitchen			20	1	20	As per HBN guidance.		
PE / Activity Hall	HBN 03-02	$\checkmark$	306	1	158	A space to allow for exercise to be undertaken, social events and other activities requiring larger space.	Suggested area for 1 Badminton court with run off (Sport England)* excluding any requirement for lockable storage. *https://www.sportengland.org/media/438 1/comparative-sizes-indoor.pdf	This could be a shared area with the school.
Gym	HBN 03-01		30	1	30	As per HBN guidance.		
Therapy office (size based on number of places)			6	1	6	As per HBN guidance.		

SECLUSION AND DE-ESCALATION							
Lobby to seclusion room	HBN 03-01	8	1	8	As per HBN guidance.		
Seclusion room	HBN 03-01	15	1	15	As per HBN guidance.		Access to safe and secure external space which is not overlooked by any other areas should be considered.
En-suite	HBN 03-01	4.5	1	4.5	As per HBN guidance.		
De-escalation area	HBN 03-01	12	1	12	As per HBN guidance.		Access to safe and secure external space which is not overlooked by any other areas should be considered.
Sensory room	HBN 03-01	12	1	12	As per HBN guidance.		
Place of Safety (Section 136 facility)	HBN 03-01			0	l As per HBN quidance	Refer to HBN 03-01 for room requirements if this suite is required.	

STAFF & OFFICE: ADMINISTRATION SPACE								
Small waiting area	HBN 03-01 HBN 00-03		1.8	4	7.2	As per HBN guidance.		If visitors to the administration area are anticipated then this may be required if the department is on a different level or some distance from the main reception waiting area.
Office - 1 person with informal meeting space	HBN 00-03		12	1	12	As per HBN guidance.	Variety of office space may be required, ranging from single-person with informal meeting space to open plan mobile working offices.	
Office - 1 person	HBN 00-03		8	1				
Multi-person office (size based on number of places)	HBN 00-03		6.6	6	39.6	As per HBN guidance.	A variety of office space may be required, ranging from single-person with informal meeting space to open plan mobile working offices.	
Office machine rooms	HBN 00-03		6	1	6	this room. Storage for printing	There may be one machine room to serve the whole unit or one per area may be required if there are no local printers within offices.	
Interview	HBN 03-01		8	1	8	As per HBN guidance.		
Resource room / library	HBN 02-01	~	12	1	12	May contain journals and other reference books with space for staff to study these. Computer(s) may also be required.		

STAFF ACCOMMODATION								
	HBN 03-01 HBN 00-03		1.8	6	10.8	As per HBN guidance.		
Staff WCs, changing rooms and showers (10 lockers)	HBN 00-02		6	2	12	As per HBN guidance.		May include lockers and hanging space (see below).
Lockers	HBN 03-02	$\checkmark$	5	1		Storage of personal items for staff whilst on duty.	Lockers.	These could be located in a number of places. The size of the locker will depend on the requirements. If there is a uniform policy and staff need to change, then the lockers should be half lockers located in the changing room. If they are only to contain handbags and rucksacks then cube lockers should be sufficient. These could be located in the rest room, the staff changing or another area. Consideration should be given to hanging wet outdoor clothing.

CIRCULATION ROUTES								
Circulation space	HBN 00-04 HBN 03-01				0	Quiet seating areas, informal social activities; escort/restraint of children and young people.	quality to recreational and activity areas. Means of monitoring blind spots integrated into design. Natural light and	Local widening, windows, door clustering, short sections. Recessed doors to bedrooms to maintain clear corridor width. Adequate width (corridor min 1800 mm), minimal physical obstructions. Good lines of sight. Avoid dead ends, long internal corridors. Annexes and small corridors off main routes to be avoided.
SCHOOL AREA						An area for educational activities.	The location of this area should be away from the ward area to allow a more normal environment for young people, leaving the ward to go to school. However, this will be dependent on the size of the unit and the number of teaching rooms required. Some multi-purpose space may be required on the ward to allow for teaching of those young people who may be too ill to leave the ward.	Reference should be made to QNIC standards (2016), Oftsted and Department of Education guidance when planning this area. Teacher / pupil ratio is recommended at 1:4. Anyone teaching a young person under the age 16 is required to be Ofsted registered.
Teaching room (minimum recommended space for any teaching room is 3 persons) (size based on number of spaces)	HBN 03-02	~	4	3	12	For the study and teaching of subjects such as English and mathematics.	whiteboard or smart board may be	In smaller units this room could be shared to allow a number of staff members to teach different subjects.

ICT room (size based on number of computers required)	HBN 03-02	~	4	2	8	Equipped with computers to enable the teaching of a variety of subjects and computer skills.	The number of computers will vary depending of young people and the subjects for which the room is used.	QNIC standards suggest 1 computer for every 2 young people in school. Depending on the size of the unit these may be located within this room, in larger units they may be in other teaching areas. Secure web filtering will be required.
Science room	HBN 03-02	~	12	2	24	Teaching area for science subjects.	COSSH cupboards and other lockable storage will be required. Equipment within the room will be a project specific decision based on what experiments and other practical work will be undertaken in here.	The GCSE curriculum requires entrants to undertake 9 practical experiments. Where it is anticipated that the length of stay within the unit would of such a length that the pupil would be disadvantaged by not being able to undertake these, consideration should be given to finding other options. A small specialist laboratory with vision and audio for pupils but teacher access only could be one possibility.
Science viewing room	HBN 03-02	$\checkmark$	6	1	6			
Art room	HBN 03-02	✓	20	1	20			
Learning resource area	HBN 03-02	~	10	1	10			
Staff room/office space (size based on number of spaces)	HBN 03-02	$\checkmark$	6.6	5	33	Space for administrative work, lesson preparation, marking, informal meetings with other staff members.	Desk / worktop space with computer access. Informal meeting area. Storage for files and educational equipment.	The size of the unit will indicate whether any other office space is required.
Secure Store with safe	HBN 03-02	~	4	1	4	To store external examination papers in a secure and safe environment.	Safe.	If external examinations are to be taken in the school then a secure store with safe will be required for the examination papers.

Office space - 1 person HBN 00-03	8	1	8		Desk with space for an informal meeting, storage for files and other equipment.	Depending on the size of the school individual and shared officers may be required for head teacher, secretaries and for multi- disciplinary teams.
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PROJECT-SPECIFIC BUILDING REQUIREMENTS				
Plant				Generally, some 12% of NIA is allowed (depending on the size and nature of the building, and the location of the plant - rooftop plant, for instance, will require negligble m <sup>2</sup> ).
EDC / Switch cupboard				Generally 2m <sup>2</sup> (depending on location): one unit per 2/3 departments, depending on local circumstances.
Comms room				Modern comms can require significant space allocation. It is important to engage with the local IT team as early as possible.

Net internal area (NIA) m <sup>2</sup>		1271
Circulation allowance	25%	318
Communication	10%	127
Engineering	25%	318
Gross internal area (GIA)	m²	2034

This schedule of accommodation offers guidance on the rooms that may be required within a CAMHS unit.

Descriptions for some rooms, such as offices, indicate that the size required will be based on number of places and will be project-specific.

Further project-specific considerations are at the foot of the schedule.

Column B HBN Reference	HBN containing the full description of the room.
Column C HBN 03-02 specific room	Refers to rooms only described in this HBN.
Column D Functional Uses	Completed for all HBN 03-02 roooms and where there are additional functions for CAMHS for rooms in other HBNs.
Column E Description	Completed for all HBN 03-02 roooms and where there are CAMHS- specific descriptions for rooms in other HBNs.
Column F Notes	Guidance notes specific to the activity space/room.

Activity Space	HBN Reference	HBN 03-02 specific room	Unit area allowance m <sup>2</sup>	Quantity	Total area m²		Description (where CAMHS-specific)	Notes		
			EXAMPLE: 12-bed ward, 100% single-bed rooms		vard, 100%	The spreadsheet can be used to calculate local project-specific requirements by amending columns D & E (area allowance and quantity). Changing the circulation, communication and engineering percentages also updates the GIA.				
ENTRANCE AREA	HBN 03-01 HBN 00-03					Main entrance to the unit. May contain a reception desk, shop, café and other facilities depending on the size of the unit.	A warm and welcoming area that is not overly noisy and does not overpower young people is required. Space for waiting, parking of prams and buggies may be required.	Age-appropriate (applies to all activity spaces). Anti-ligature fixtures and fittings (applies to all patient accessible areas).		
Draught Lobby	HBN 03-01		6	1	6	To retain warmth within the reception area of the building.				

Draught Lobby	HBN 03-01	6	1	6	To retain warmth within the reception area of the building.		
Main entrance/recention	HBN 03-01 HBN 00-03	20	1	20		operational policy should be considered for CAMHS ward visitors where this is the main entrance to a unit containing other adult services	This may be a main entrance for a CAMHS unit only; however, if it is the main entrance to a larger adult facility, then a smaller ward entrance may be required further into the building.
pased on number of	HBN 03-01 HBN 00-03	5.5	2	11	As per HBN guidance.		
Reception office. (Size based on number of places)	HBN 03-01 HBN 00-04	6	2	12			

Waiting area (5 places including wheelchair space). (Size based on number of places.)	HBN 03-01 HBN 00-03	1.8	12	21.6		Additional space may be required to accommodate baby buggies.	Increased to 12 spaces (Max number required)
Waiting play area	HBN 23	13	0	0			Not required. Child visting policy to be reviewed.
Café	HBN 03-01 HBN 00-03	2	0	0	As per HBN guidance.		Removed as café and shop available in Woodland View
Shop	HBN 03-01 HBN 00-03	20	0	0	As per HBN guidance.		Removed as café and shop available in Woodland View

SANITARY FACILITIES	HBN 00-02				support space such as therapy a	n should be given as to whether or not these should be gender-specific.
WC - ambulant	HBN 00-02	2	6	12	As per HBN guidance.	Notionally staff
WC - semi-ambulant	HBN 00-02	2.5	6	15	As per HBN guidance.	Notionallt patient or visitor
WC (independent wheelchair/semi-ambulant)	HBN 00-02	5.5	3	16.5	As per HBN guidance.	Mix of visitor and staff. HBN notes: The accessible WC should be kept locked when located in the reception area, to be opened upon request. The balance (2 to be
Nappy change	HBN 00-02	5	1	5	As per HBN guidance.	Normally located close to the visiting room.

OFFICE / MEETING ROOMS						w may be used for a number of purpose exible use of office / administration space o allow for more flexible working.	
Advocacy / Voluntary sector office. (Size based on number of workstations)	HBN 03-01	6	2	12	As per HBN guidance.		Now sized for 2 work-stations

Interview room	HBN 03-01	12	1	12	As per HBN guidance.	this can off carers to m staff withou the unit.	hin the entrance area er a space for family / eet with members of t advancing further into could also form part of room.
Tribunal / Conference suite	HBN 03-01	32	0	0	As per HBN guidance.	Woodlands and adjace double up f unit in exce HBN Notes necessary accommod on-site, the taken for is particularly	I suite available at View. Group meeting nt interview rooms will or tribunals within the ptional circumstances. : If it is considered to share ation with other facilities n care will need to be sues of safeguarding, when moving and possibly distressed
Meeting room / Staff handover / group therapy / activities (Duty room)	HBN 03-01	16	1	16	As per HBN guidance.	functional a for other ac when not in Ideally a bo more flexibi storage for be consider	ns should be multi- and offer the opportunity tivities to take place, use for meetings. okable facility will offer lity. Furnishings and unused furniture should red carefully to allow for yout to be changed.

MDT Room			20	1	20			Supporting daily MDT meetings
Multi-faith / contemplation room	HBN 03-01		16	0	0		Located in a quiet area, but easily accessible for patients.	Available in Woodlands View
Medical records store	HBN 03-01		12	0	0	As per HBN guidance.		Assumes electronic records. HBN states: This room may not be required though this will depend whether electronic patient records are used rather than hard copy records.
Ward entrance (Secure lobbies)	HBN 03-02	~	6	2	12	accessed through other service	Locked entrance will require buzzer / video and audio connection to ward office or other designated area.	The entrance to the CAMHS unit / ward should be monitored. Staff should be able to clearly see who is entering and / or leaving the ward. In addition to the main entrance to the CAMHS unit, the entrance to the PICU should be via an airlock. An additional discrete vehicular entrance will be required to allow for the admission of distressed patients without the need for them to enter through a main public area.

VISITORS FACILITIES								
Visiting room	HBN 03-02	~	16	1	16	For visiting. When not in use may be used for informal meetings in a relaxed space.	A range of seating should be provided to cater for adults and children, this could include bean bags and small chairs. Space for play should be available. Easy access to snacks and drinks should be available.	This room should be large enough to accommodate a family including siblings with sufficient space for children to play. The location of the unit may mean that visitors travel long distances and stay for some hours, therefore depending on the size of the unit, more than one visiting room may be required. Consideration should also be given to enable the preparation of food and drinks by the visitors. Access to safe and secure external space which is not overlooked by any other areas should be considered.
Kitchen / beverage area	HBN 03-02	~	6	1	6	To prepare snacks and drinks.	An area where visitors may prepare a drink and snacks to consume in the visitors room with family members.	If overnight accommodation is to be included within the building, depending on the location of the accommodation to the family visitors room then a cooker could be provided within this kitchen area to allow visitors to make a meal.
Overnight family bedroom	HBN 03-02	~	18	0	0	Sleeping accommodation for two adults and a child, with space for a cot.	Twin bedded room with space for a bed / settee or z-bed and a cot. A small wardrobe with drawers may be required. If a kitchen is not included in this area then tea / coffee making facilities within the room will be required.	Not included. HBN states: If overnight accommodation is not included within the unit then information on the location of reasonably priced overnight accommodation nearby should be available.
En-suite	HBN 03-02	$\checkmark$	4.5	0	0			As above.

Sitting / Dining area	HBN 03-02	$\checkmark$	12	0	0		As above.

PATIENT: BED AREAS					In a mixed-gender ward, a swing-zo consider carefully the issues of sam	ne as described in HBN 03-01 should be considered. Design needs to ne-sex accommodation.
Single bedroom	HBN 03-01	10.5	0	0	As per HBN guidance.	All rooms sized as larger/accessible to support additional functionality/flexibility.
Single bedroom (Accessible)	HBN 03-01	12.5	12	150	As per HBN guidance.	Personalisation of the room by the patient would be advantageous. The opportunity to display posters and photographs. Lighting which can reflect mood, colour changing, dimmable and controlled from within the room would be advantageous.
"Extra care" provision		10	10			A notional additional allowance per bedroom to support additional/enhanced care needs. Final configuration still to be determined through developing COS.
En-suite	HBN 03-01	4.5	12	54	As per HBN guidance.	A lockback door gives the opportunity for the door to be locked in the open or closed position by staff.
Assisted bathroom	HBN 03-01	15	1	15	As per HBN guidance.	Consider provision of a 'domestic'- type bathroom, feels like being at home. Also consider DDA shower as young people often prefer showers to baths. (Reduced from 2)
Mobile hoist storage	HBN 03-01	2	1	2	As per HBN guidance.	Hoists may be stored within an dedicated lockable recess within the bathroom. If this is unavailable, the hoist should be stored in a locked store room within the area which may also contain weighing / sanitary chairs. (Reduced from 2 as above)

PATIENT: COMMUNAL AREAS					Where the ward operate a day-ser required.	vice, for those young people, additional	communal space may be
Sitting area/room (size based on number of places) (Located within bedroom "clusters").	HBN 03-01	4	12	48		An open plan area with access to an outside space. An assortment of comfortable seating, television and areas for activities such as electronic games.	Assumes small sitting areas provided with 3 x bedroom "clusters". Also doubles as "quiet room provision through the day?
Dining area (size based on number of places)	HBN 03-01	2	12	24	As per HBN guidance.	Open plan, possibly co-located to the sitting area to give a larger space for use outside of mealtimes for activities such as board games, jigsaw puzzles etc.	
Quiet room	HBN 03-01	8	0	0	As per HBN guidance.		Assumes small sitting areas provided with 3 x bedroom "clusters". Also doubles as "quiet room provision through the day?
Activities area	HBN 03-01	16	1	16	As per HBN guidance.		This area should include appropriate activities for the age group. This may include electronic games.
Games area / room (Fitness suite)	HBN 03-01	24	1	24	An area to play games which require more space to allow for movement, such as table tennis, pool or computer games / exercise programmes.		Space should be considered carefully if a table tennis and / or pool table is required. Lockable storage may also be required for the tables and other equipment.
Telephone booth	HBN 03-01	2	1	2	As per HBN guidance.		Location of a telephone booth should be considered carefully. It should be away from the noise and bustle of the communal space but visible for staff.
Staff "touch-down" bases		2	3	6			As per HBN 00-02

5 2 11 As per HBN guidance.	11	2	5.5		HBN 03-01	Staff communication base/ward base (size based on number of places)
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UNIT SUPPORT AREAS							
Unit kitchen / ward kitchen	HBN 03-01 HBN 00-03	20	1	20	As per HBN guidance.		Increased to suit local catering provision. (HBN states: The catering solution and the size of the unit will determine the requirements for either a kitchen for the unit and / or ward kitchens)
Patients' beverage area	HBN 03-01 HBN 00-03	6	3	18	As per HBN guidance.		18m2 is sufficient to provide a patient pantry or 3 x separate patient beverage areas. (1 per "cluster.
Patients' property store (Personal goods store)	HBN 03-01	6	3	18	Shelving will be required, this may include pigeon holes for each patient and some floor space if it is envisaged large pieces of property will be stored.	Storage of property required infrequently or not allowed to be in the patient's possession, not allowed within the unit or property which has to be controlled by staff (such as aerosol cans).	HBN notes: The size of this room may be smaller than previously as single bedrooms with lockable storage allows more property to be kept in a secure manner. The lockable storage can be mixed and some can be controlled by staff only within the bedroom. Local model assumes 3 "clusters" of rooms and need for storge space for larger personal items within clusters. (Cases, boxes, etc)
Patients' laundry	HBN 03-01	12	1	12	As per HBN guidance.		Inclusion of this room in the unit, can assist in developing life skills.
Dirty utility (with bed pan processing)	HBN 00-03	12	1	12	As per HBN guidance.		
Disposal hold	HBN 00-03	10	2	20	As per HBN guidance.		Increased to meet local needs.
Cleaners' rooms	HBN 00-03	10	2	20	As per HBN guidance.		Increased to meet local needs.

STORAGE						All storage should be lockable. A	variety of storage solutions will be requ	lired.
Linen storage	HBN 03-01		5	3	15	As per HBN guidance.		This can be one linen store or could be small cupboard areas located in bedroom corridors. Increased to meet local needs - assumes 3 x "clusters"
Equipment	HBN 03-01		12	1	12	As per HBN guidance.		Sockets may be required for equipment which requires charging.
Outdoor storage	HBN 03-02	1	12	0	0		Large outdoor equipment such as bicycles, tents and sports equipment. Storge for gardening equipment may also be required.	Assumes an external structure: HBN states: This does not need to be located within the building but could be an unheated external structure such as a garden shed or garage.

CLINICAL/THERAPY AREAS							
Waiting area (5 places including wheelchair space). (Size based on number of places.)	HBN 03-01 HBN 00-03	1.8	4	7.2		Additional space may be required to accommodate baby buggies.	Local to treatment/consulting areas.
Treatment room	HBN 00-03 HBN 03-01	16	1	16	As per HBN guidance.		
Clinic room / drug storage	HBN 03-01 HBN 03-02	8	1		Storage of drugs and medicines. Space to prepare medications for administration to patients.	Locked storage for drugs and medicines, clinical wash hand basin, computer access.	Allows for drugs to be administered in privacy allowing the patient to discuss their medication in a private environment. It also leaves the treatment room free to be used simultaneously.
Clinical consulting room		13.5	3	40.5			Supporting a range of clinical consulting activity.Equivalent to "single-sided consulting room areas)
Small private room / area	HBN 03-01 HBN 03-02	8	0	0	To administer medicines to individual patients, allowing them to discuss the medication in a private area.	Chairs and a small table may be required. A space to place a jug of water and glasses.	Assumes treatment room is sufficient.
THERAPY ROOMS		 			A variety of activity rooms may be people, additional communal spa	e required. Where the ward operates a d ce may be required.	ay-service, for those young
Arts and Crafts room		16	0	0	As per HBN guidance.		Assumes all roms are multi- functional!

Group therapy rooms			20	3	60	As per HBN guidance.		Assumes all roms are multi- functional! Size per room increased from 16m2 to support multi- functional element.Specific teaching rooms listed seperately under education.
Group therapy room store			4	3	12			En-suite to group rooms for local eqpt storage to support multi- functionality.
Therapy kitchen			20	0	0	As per HBN guidance.		Assumes not required as patient pantry available for therapeutic activity.
PE / Activity Hall	HBN 03-02	~	306	0	0	A space to allow for exercise to be undertaken, social events and other activities requiring larger space.	Suggested area for 1 Badminton court with run off (Sport England)* excluding any requirement for lockable storage. *https://www.sportengland.org/media/438 1/comparative-sizes-indoor.pdf	(A very large area but for an important function. Serious thought will need to be given on these activities if this space is not provided!) HBN states: This could be a shared area with the school.
Gym	HBN 03-01		30	1	30	As per HBN guidance.		
Therapy office (size based on number of places)			6	2	12	As per HBN guidance.		

SECLUSION AND DE-ESCALATION							
Lobby to seclusion room	HBN 03-01	8	0	0	As per HBN guidance.		Final model to be determined. Ciurrent bedroom areas include a notional allowance to support seclusion and de-escalation although options exists to create a separate area.
Seclusion room	HBN 03-01	15	0	0	As per HBN guidance.		Access to safe and secure external space which is not overlooked by any other areas should be considered. As above.
En-suite	HBN 03-01	4.5	0	0	As per HBN guidance.		As above.
De-escalation area	HBN 03-01	12	0	0	As per HBN guidance.		Access to safe and secure external space which is not overlooked by any other areas should be considered. As above.
Sensory room	HBN 03-01	12	0	0	As per HBN guidance.		As above.
Place of Safety (Section 136 facility)	HBN 03-01			0	As per HBN guidance.	Refer to HBN 03-01 for room requirements if this suite is required.	

STAFF & OFFICE: ADMINISTRATION SPACE								
Small waiting area	HBN 03-01 HBN 00-03		1.8	4	7.2	As per HBN guidance.		If visitors to the administration area are anticipated then this may be required if the department is on a different level or some distance from the main reception waiting area.
Office - 1 person with informal meeting space	HBN 00-03		12	3	36	As per HBN guidance.	Variety of office space may be required, ranging from single-person with informal meeting space to open plan mobile working offices.	SCN x1, visiting consultants x 2.
Office - 1 person	HBN 00-03		8	0				
Multi-person office (size based on number of places)	HBN 00-03		6.6	0	0	As per HBN guidance.	A variety of office space may be required, ranging from single-person with informal meeting space to open plan mobile working offices.	Assumes no additional office accommodation required.
Office machine rooms	HBN 00-03		6	1	6		There may be one machine room to serve the whole unit or one per area may be required if there are no local printers within offices.	
Interview	HBN 03-01		8	0	0	As per HBN guidance.		Rooms have sufficient space for private interviews and small meetings.
Resource room / library	HBN 02-01	4	12	0	0	May contain journals and other reference books with space for staff to study these. Computer(s) may also be required.		Library available at Woodlands View.

STAFF ACCOMMODATION								
	HBN 03-01 HBN 00-03		1.8	15	27	As per HBN guidance.		Assumes max of 15 staff at any one time?
Staff WCs, changing rooms and showers (10 lockers)	HBN 00-02		6	4	24	As per HBN guidance.		Assumes 40 lockers required. HBN states: May include lockers and hanging space (see below).
Lockers	HBN 03-02	~	5	0		Storage of personal items for staff whilst on duty.	Lockers.	Assumes located in duty room. HBN states: These could be located in a number of places. The size of the locker will depend on the requirements. If there is a uniform policy and staff need to change, then the lockers should be half lockers located in the changing room. If they are only to contain handbags and rucksacks then cube lockers should be sufficient. These could be located in the rest room, the staff changing or another area. Consideration should be given to hanging wet outdoor clothing.

CIRCULATION ROUTES								
Circulation space	HBN 00-04 HBN 03-01				0	Quiet seating areas, informal social activities; escort/restraint of	Plan for purpose and likely function ensuring safe environment matching operational needs. Open and spacious quality to recreational and activity areas. Means of monitoring blind spots integrated into design. Natural light and external views maximised. Demarcation of routes – floor colours/finishes.	Local widening, windows, door clustering, short sections. Recessed doors to bedrooms to maintain clear corridor width. Adequate width (corridor min 1800 mm), minimal physical obstructions. Good lines of sight. Avoid dead ends, long internal corridors. Annexes and small corridors off main routes to be avoided.
SCHOOL AREA						An area for educational activities.	The location of this area should be away from the ward area to allow a more normal environment for young people, leaving the ward to go to school. However, this will be dependent on the size of the unit and the number of teaching rooms required. Some multi-purpose space may be required on the ward to allow for teaching of those young people who may be too ill to leave the ward.	Reference should be made to QNIC standards (2016), Oftsted and Department of Education guidance when planning this area. Teacher / pupil ratio is recommended at 1:4. Anyone teaching a young person under the age 16 is required to be Ofsted registered.
Teaching room (minimum recommended space for any teaching room is 3 persons) (size based on number of spaces)	HBN 03-02	~	4	12	48	For the study and teaching of subjects such as English and mathematics.	The room will have the appropriate spaces for pupils to sit at tables / desks to undertake written work. A blackboard, whiteboard or smart board may be required. Locked storage for books and other teaching equipment will be required.	In smaller units this room could be shared to allow a number of staff members to teach different subjects.

ICT room (size based on number of computers required)	HBN 03-02	~	4	4	16	Equipped with computers to enable the teaching of a variety of subjects and computer skills.		QNIC standards suggest 1 computer for every 2 young people in school. Depending on the size of the unit these may be located within this room, in larger units they may be in other teaching areas. Secure web filtering will be required.
Science room	HBN 03-02	~	12	0	0	Teaching area for science subjects.	COSSH cupboards and other lockable storage will be required. Equipment within the room will be a project specific decision based on what experiments and other practical work will be undertaken in here.	The GCSE curriculum requires entrants to undertake 9 practical experiments. Where it is anticipated that the length of stay within the unit would of such a length that the pupil would be disadvantaged by not being able to undertake these, consideration should be given to finding other options. A small specialist laboratory with vision and audio for pupils but teacher access only could be one possibility. Not included - safety issue?
Science viewing room	HBN 03-02	✓	6	0	0			
Art room	HBN 03-02	$\checkmark$	20	0	0			Included within group room allowance. (Assumes all rooms are multi-functional!)
Learning resource area	HBN 03-02	$\checkmark$	10	1	10			
Staff room/office space (size based on number of spaces)	HBN 03-02	~	6.6	2	13.2	Space for administrative work, lesson preparation, marking, informal meetings with other staff members.	Desk / worktop space with computer access. Informal meeting area. Storage for files and educational equipment.	The size of the unit will indicate whether any other office space is required.

Secure Sto	ore with safe	HBN 03-02	~	4	1	4	To store external examination papers in a secure and safe environment.	Safe.	If external examinations are to be taken in the school then a secure store with safe will be required for the examination papers.
Office spa	ce - 1 person	HBN 00-03		8	0	0		Desk with space for an informal meeting,	Depending on the size of the school individual and shared officers may be required for head teacher, secretaries and for multi- disciplinary teams.

Sub-total		1089	
Plant	12%	131	Generally, some 12% of NIA is allowed (depending on the size and nature of the building, and the location of the plant - rooftop plant, for instance, will require negligble m <sup>2</sup> ).
EDC/Switch Cupboard (x6 @2.5m2)		15	
Comms		14	Estimate based on historical projects
Net internal area (NIA) m <sup>2</sup>		1249	

Net internal area (NIA) m <sup>2</sup>	1249	
Circulation allowance	25%	312
Communication	10%	125
Engineering	25%	312
Gross internal area (GIA)	m²	1998

HGHCP have utilised the HBN figure but are sceptical that it is sufficient. We would recommend 33% but see note re: engineering.

HGHCP have utilised the HBN figure but believe it is very high.

This schedule of accommodation offers guidance on the rooms that may be required within a CAMHS unit.

Descriptions for some rooms, such as offices, indicate that the size required will be based on number of places and will be project-specific.

Further project-specific considerations are at the foot of the schedule.

Column B HBN Reference	HBN containing the full description of the room.
Column C HBN 03-02 specific room	Refers to rooms only described in this HBN.
Column D Functional Uses	Completed for all HBN 03-02 roooms and where there are additional functions for CAMHS for rooms in other HBNs.
Column E Description	Completed for all HBN 03-02 roooms and where there are CAMHS- specific descriptions for rooms in other HBNs.
Column F Notes	Guidance notes specific to the activity space/room.

Activity Space	HBN Reference	HBN 03-02 specific room	Unit area allowance m <sup>2</sup>	Quantity	Total area m²	Functional Uses	Description (where CAMHS-specific)	Notes	
			EXAMPLE: 12-bed ward, 100% single-bed rooms			The spreadsheet can be used to calculate local project-specific requirements by amending columns D & E (area allowance and quantity). Changing the circulation, communication and engineering percentages also updates the GIA.			
ENTRANCE AREA	HBN 03-01 HBN 00-03					Main entrance to the unit. May contain a reception desk, shop, café and other facilities depending on the size of the unit.	A warm and welcoming area that is not overly noisy and does not overpower young people is required. Space for waiting, parking of prams and buggies may be required.	activity spaces). Anti-ligature fixtures and fittings	
Draught Lobby	HBN 03-01		6	1	6	To retain warmth within the reception area of the building.			

Draught Lobby	HBN 03-01	6	1	6	reception area of the building.		
Main entrance/recention	HBN 03-01 HBN 00-03	20	1	20		Sign-posting to CAMHS wards. Specific operational policy should be considered for CAMHS ward visitors where this is the main entrance to a unit containing other	This may be a main entrance for a CAMHS unit only; however, if it is the main entrance to a larger adult facility, then a smaller ward entrance may be required further into the building.
lbased on number of	HBN 03-01 HBN 00-03	5.5	2	11	As per HBN guidance.		
Reception office. (Size based on number of places)	HBN 03-01 HBN 00-04	6	2	12			

Waiting area (5 places including wheelchair space). (Size based on number of places.)	HBN 03-01 HBN 00-03	1.8	6	10.8		Additional space may be required to accommodate baby buggies.	Increased to 6 spaces (Max number required)
Waiting play area	HBN 23	13	0	0			Not required. Child visting policy to be reviewed.
Café	HBN 03-01 HBN 00-03	2	0	0	As per HBN guidance.		Removed as café and shop available in Woodland View
Shop	HBN 03-01 HBN 00-03	20	0	0	As per HBN guidance.		Removed as café and shop available in Woodland View
SANITARY FACILITIES	HBN 00-02				support space such as therapy a In communal areas, consideration Equipment should be anti-ligatu	on should be given as to whether or no	
WC - ambulant	HBN 00-02	2	6	12	As per HBN guidance.		Notionally staff
WC - semi-ambulant	HBN 00-02	2.5	6	15	As per HBN guidance.		Notionallt patient or visitor
WC (independent wheelchair/semi-ambulant)	HBN 00-02	5.5	3	16.5	As per HBN guidance.		Mix of visitor and staff. HBN notes: The accessible WC should be kept locked when located in the reception area, to be opened upon request. The balance (2 to be located in staff areas). Assumes patients requiring disabled access can use en-suites - subject to design.
Nappy change	HBN 00-02	5	0	0	As per HBN guidance.		No babies will be visiting the unit.
OFFICE / MEETING ROOMS					Mobile working allows for more	low may be used for a number of purp flexible use of office / administration s to allow for more flexible working.	
Advocacy / Voluntary sector office. (Size based on number of workstations)	HBN 03-01	6	0	0	As per HBN guidance.		Advocacy will not require local office space, reflecting the service currently delivered at Woodlands

number of workstations)

View.

In	terview room	HBN 03-01	12	1	12	As per HBN guidance.	Located within the entrance area this can offer a space for family / carers to meet with members of staff without advancing further into the unit. This room could also form part of the tribunal room and support searches on admission.
Tr	ribunal / Conference suite	HBN 03-01	32	0	0	As per HBN guidance.	Full tribunal suite available at Woodlands View. Group meeting and adjacent interview rooms will double up for tribunals within the unit in exceptional circumstances. HBN Notes: If it is considered necessary to share accommodation with other facilities on-site, then care will need to be taken for issues of safeguarding, particularly when moving vulnerable and possibly distressed patients.
ha	eeting room / Staff andover / group therapy / ctivities (Duty room)	HBN 03-01	16	1	16	As per HBN guidance.	These rooms should be multi- functional and offer the opportunity for other activities to take place, when not in use for meetings. Ideally a bookable facility will offer more flexibility. Furnishings and storage for unused furniture should be considered carefully to allow for the room layout to be changed.

MDT Room			20	1	20			Supporting daily MDT meetings
Multi-faith / contemplation room	HBN 03-01		16	0	0		Located in a quiet area, but easily accessible for patients.	Available in Woodlands View
Medical records store	HBN 03-01		12	0	0	As per HBN guidance.		Assumes electronic records. HBN states: This room may not be required though this will depend whether electronic patient records are used rather than hard copy records.
Ward entrance (Secure lobbies)	HBN 03-02	~	6	2	12	accessed through other service	Locked entrance will require buzzer / video and audio connection to ward office or other designated area.	The entrance to the CAMHS unit / ward should be monitored. Staff should be able to clearly see who is entering and / or leaving the ward. In addition to the main entrance to the CAMHS unit, the entrance to the PICU should be via an airlock. An additional discrete vehicular entrance will be required to allow for the admission of distressed patients without the need for them to enter through a main public area.

VISITORS FACILITIES								
Visiting room	HBN 03-02	✓	16	1	16	For visiting. When not in use may be used for informal meetings in a relaxed space.	A range of seating should be provided to cater for adults and children, this could include bean bags and small chairs. Space for play should be available. Easy access to snacks and drinks should be available.	This room should be large enough to accommodate a family including siblings with sufficient space for children to play. The location of the unit may mean that visitors travel long distances and stay for some hours, therefore depending on the size of the unit, more than one visiting room may be required. Consideration should also be given to enable the preparation of food and drinks by the visitors. Access to safe and secure external space which is not overlooked by any other areas should be considered.
Kitchen / beverage area	HBN 03-02	×	6	0	0	To prepare snacks and drinks.	An area where visitors may prepare a drink and snacks to consume in the visitors room with family members.	Tea and coffee will be brought to the area. If overnight accommodation is to be included within the building, depending on the location of the accommodation to the family visitors room then a cooker could be provided within this kitchen area to allow visitors to make a meal.
Overnight family bedroom	HBN 03-02	4	18	0		Sleeping accommodation for two adults and a child, with space for a cot.	Twin bedded room with space for a bed / settee or z-bed and a cot. A small wardrobe with drawers may be required. If a kitchen is not included in this area then tea / coffee making facilities within the room will be required.	Not included. HBN states: If overnight accommodation is not included within the unit then information on the location of reasonably priced overnight accommodation nearby should be available.
En-suite	HBN 03-02	1	4.5	0	0			As above.

Sitting / Dining area	HBN 03-02	$\checkmark$	12	0	0		As above.

PATIENT: BED AREAS						In a mixed-gender ward, a swing-zone as described in HBN 03-01 should be considered. Design consider carefully the issues of same-sex accommodation.				
Single bedroom	HBN 03-01	10	0.5	0 0		As per HBN guidance.	All rooms sized as larger/accessible to support additional functionality/flexibility.			
Single bedroom (Accessible)	HBN 03-01	12	2.5	9 112	2.5	As per HBN guidance.	Personalisation of the room by the patient would be advantageous. The opportunity to display posters and photographs. Lighting which can reflect mood, colour changing, dimmable and controlled from within the room would be advantageous.			
Lobby to seclusion room	HBN 03-01	٤	8	3 24	1	As per HBN guidance.	Final model to be determined. Current notional allowance is for 3 bedrooms (I per "cluster") to be able to support seclusion/extra care needs.			
Single bedroom for extra care/seclusion	HBN 03-01	1	5	3 45	5	As per HBN guidance.	As above. Access to safe and secure external space which is not overlooked by any other areas should be considered. As above.			
De-escalation area	HBN 03-01	1	2	3 36	5	As per HBN guidance.	Access to safe and secure external space which is not overlooked by any other areas should be considered. As above.			
En-suite	HBN 03-01	4.	.5	2 54	1	As per HBN guidance.	A lockback door gives the opportunity for the door to be locked in the open or closed position by staff.			
Assisted bathroom	HBN 03-01	1	5	1 15	5	As per HBN guidance.	Consider provision of a 'domestic'- type bathroom, feels like being at home. Also consider DDA shower as young people often prefer showers to baths. (Reduced from 2)			

Mobile hoist storage HBN 03-01	2	1 <b>2</b> As per HBN guidance.	Hoists may be stored within an dedicated lockable recess within the bathroom. If this is unavailable, the hoist should be stored in a locked store room within the area which may also contain weighing / sanitary chairs. (Reduced from 2 as above)
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PATIENT: COMMUNAL AREAS					Where the ward operate a day-service, for those young people, additional communal space may be required.					
Sitting area/room (size based on number of places) (Located within bedroom "clusters").	HBN 03-01	3	12	36	As per HBN guidance.	An open plan area with access to an outside space. An assortment of comfortable seating, television and areas for activities such as electronic games.	Assumes small sitting areas provided with 3 x bedroom "clusters". Also doubles as "quiet room provision through the day?			
Dining area (size based on number of places)	HBN 03-01	2	18	36	As per HBN guidance.	Open plan, possibly co-located to the sitting area to give a larger space for use outside of mealtimes for activities such as board games, jigsaw puzzles etc.				
Quiet room	HBN 03-01	8	0	0	As per HBN guidance.		Assumes small sitting areas provided with 3 x bedroom "clusters". Also doubles as "quiet room provision through the day?			
Activities area	HBN 03-01	16	1	16	As per HBN guidance.		This area should include appropriate activities for the age group. This may include electronic games.			
Games area / social room	HBN 03-01	24	1	24	An area to play games which require more space to allow for movement, such as table tennis, pool or computer games / exercise programmes.		Space should be considered carefully if a table tennis and / or pool table is required. Lockable storage may also be required for the tables and other equipment.			
Telephone booth	HBN 03-01	2	0	0	As per HBN guidance.		Location of a telephone booth should be considered carefully. It should be away from the noise and bustle of the communal space but visible for staff.			
Staff "touch-down" bases		2	3	6			As per HBN 00-02			

UNIT SUPPORT AREAS							
Unit kitchen / ward kitchen	HBN 03-01 HBN 00-03	20	1	20	As per HBN guidance.		Increased to suit local catering provision. (HBN states: The catering solution and the size of the unit will determine the requirements for either a kitchen for the unit and / or ward kitchens)
Patients' beverage area	HBN 03-01 HBN 00-03	6	1	6	As per HBN guidance.		Located within the shared day space.
Patients' property store (Personal goods store)	HBN 03-01	12	1	12	Shelving will be required, this may include pigeon holes for each patient and some floor space if it is envisaged large pieces of property will be stored.	Storage of property required infrequently or not allowed to be in the patient's possession, not allowed within the unit or property which has to be controlled by staff (such as aerosol cans).	HBN notes: The size of this room may be smaller than previously as single bedrooms with lockable storage allows more property to be kept in a secure manner. The lockable storage can be mixed and some can be controlled by staff only within the bedroom. Local model assumes 3 "clusters" of rooms and need for storge space for larger personal items within clusters. (Cases, boxes, etc)
Patients' laundry	HBN 03-01	12	1	12	As per HBN guidance.		Inclusion of this room in the unit, can assist in developing life skills.
Dirty utility	HBN 00-03	10	1	10	As per HBN guidance.		No requirement for bed pan processing.
Disposal hold	HBN 00-03	10	1	10	As per HBN guidance.		Increased to meet local needs.
Cleaners' rooms	HBN 00-03	10	2	20	As per HBN guidance.		Increased to meet local needs.

STORAGE						All storage should be lockable. A	variety of storage solutions will be requ	lired.
Linen storage	HBN 03-01		5	3	15	As per HBN guidance.		This can be one linen store or could be small cupboard areas located in bedroom corridors. Increased to meet local needs - assumes 3 x "clusters"
Equipment	HBN 03-01		12	1	12	As per HBN guidance.		Sockets may be required for equipment which requires charging.
Outdoor storage	HBN 03-02	√	12	0	0		Storge for gardening equipment may also	Assumes an external structure: HBN states: This does not need to be located within the building but could be an unheated external structure such as a garden shed or garage.

CLINICAL/THERAPY AREAS								
Discrete entrance (Secure lobby)	HBN 03-02	✓	6	1	6		Locked entrance will require buzzer / video and audio connection to ward office or other designated area.	Separate discrete side entrance for prisoners, etc.
Treatment room/clinic utility	HBN 00-03 HBN 03-01		16	1	16	As per HBN guidance.		
Clinic room / drug storage	HBN 03-01 HBN 03-02		8	0	0	Storage of drugs and medicines. Space to prepare medications for administration to patients.	Locked storage for drugs and medicines, clinical wash hand basin, computer access.	Not required.Allows for drugs to be administered in privacy allowing the patient to discuss their medication in a private environment. It also leaves the treatment room free to be used simultaneously.
Clinical consulting room			13.5	3	40.5			Supporting a range of clinical consulting activity and patient searches for clients admitted via the discrete entrance, e.g. From custody(Equivalent to "single- sided consulting room areas)
Small private room / area	HBN 03-01 HBN 03-02		8	0	0	To administer medicines to individual patients, allowing them to discuss the medication in a private area.	LA Shace to blace a lind of water and	Assumes treatment room is sufficient.
THERAPY ROOMS						A variety of activity rooms may be people, additional communal spa	e required. Where the ward operates a d ce may be required.	ay-service, for those young

As per HBN guidance.

0

16

Arts and Crafts room

0

Assumes all roms are multi-

functional!

Group therapy rooms			20	3	60	As per HBN guidance.		Assumes all roms are multi- functional! Size per room increased from 16m2 to support multi- functional element.Specific teaching rooms listed seperately under education.
Group therapy room store			4	3	12			En-suite to group rooms for local eqpt storage to support multi- functionality.
Therapy kitchen			20	1	20	As per HBN guidance.		Assumes not required as patient pantry available for therapeutic activity.
PE / Activity Hall	HBN 03-02	V	306	0	0	A space to allow for exercise to be undertaken, social events and other activities requiring larger space.	Suggested area for 1 Badminton court with run off (Sport England)* excluding any requirement for lockable storage. *https://www.sportengland.org/media/438 1/comparative-sizes-indoor.pdf	(A very large area but for an important function. Serious thought will need to be given on these activities if this space is not provided!) HBN states: This could be a shared area with the school.
Gym	HBN 03-01		30	1	30	As per HBN guidance.		
Therapy office (size based on number of places)			6	2	12	As per HBN guidance.		

SECLUSION AND DE-ESCALATION							
Lobby to seclusion room	HBN 03-01	8	0	0	As per HBN guidance.		Final model to be determined. Current notional allowance is for 3 bedrooms (I per "cluster") to be able to support seclusion/extra care needs.
Seclusion room	HBN 03-01	15	0	0	As per HBN guidance.		As above.
En-suite	HBN 03-01	4.5	0	0	As per HBN guidance.		As above.
De-escalation area	HBN 03-01	12	0	0	As per HBN guidance.		Access to safe and secure external space which is not overlooked by any other areas should be considered. As above.
Sensory room	HBN 03-01	12	0	0	As per HBN guidance.		As above.
Place of Safety (Section 136 facility)	HBN 03-01			0	As per HBN guidance.	Refer to HBN 03-01 for room requirements if this suite is required.	

STAFF & OFFICE: ADMINISTRATION SPACE								
Small waiting area	HBN 03-01 HBN 00-03		1.8	0	0	As per HBN guidance.		If visitors to the administration area are anticipated then this may be required if the department is on a different level or some distance from the main reception waiting area.
Office - 1 person with informal meeting space	HBN 00-03		12	3	36	As per HBN guidance.	Variety of office space may be required, ranging from single-person with informal meeting space to open plan mobile working offices.	SCN x1, visiting consultants x 2.
Office - 1 person	HBN 00-03		8	0				
Multi-person office (size based on number of places)	HBN 00-03		6.6	0	0	As per HBN guidance.	A variety of office space may be required, ranging from single-person with informal meeting space to open plan mobile working offices.	Assumes no additional office accommodation required.
Office machine rooms	HBN 00-03		6	0	0	Shredding may also take place in	There may be one machine room to serve the whole unit or one per area may be required if there are no local printers within offices.	
Interview	HBN 03-01		8	0	0	As per HBN guidance.		Rooms have sufficient space for private interviews and small meetings.
Resource room / library	HBN 02-01	v	12	0	0	May contain journals and other reference books with space for staff to study these. Computer(s) may also be required.		Library available at Woodlands View.

STAFF ACCOMMODATION								
	HBN 03-01 HBN 00-03		1.8	15	27	As per HBN guidance.		Assumes max of 15 staff at any one time?
Staff WCs, changing rooms and showers (10 lockers)	HBN 00-02		6	4	24	As per HBN guidance.		Assumes 40 lockers required. HBN states: May include lockers and hanging space (see below).
Lockers	HBN 03-02	~	5	0	0	Storage of personal items for staff whilst on duty.	Lockers.	Assumes located in duty room. HBN states: These could be located in a number of places. The size of the locker will depend on the requirements. If there is a uniform policy and staff need to change, then the lockers should be half lockers located in the changing room. If they are only to contain handbags and rucksacks then cube lockers should be sufficient. These could be located in the rest room, the staff changing or another area. Consideration should be given to hanging wet outdoor clothing.

CIRCULATION ROUTES								
Circulation space	HBN 00-04 HBN 03-01				0	Quiet seating areas, informal social activities; escort/restraint of children and young people.	quality to recreational and activity areas. Means of monitoring blind spots integrated into design. Natural light and external views maximised. Demarcation of routes – floor colours/finishes.	Local widening, windows, door clustering, short sections. Recessed doors to bedrooms to maintain clear corridor width. Adequate width (corridor min 1800 mm), minimal physical obstructions. Good lines of sight. Avoid dead ends, long internal corridors. Annexes and small corridors off main routes to be avoided.
SCHOOL AREA						An area for educational activities.	The location of this area should be away from the ward area to allow a more normal environment for young people, leaving the ward to go to school. However, this will be dependent on the size of the unit and the number of teaching rooms required. Some multi-purpose space may be required on the ward to allow for teaching of those young people who may be too ill to leave the ward.	Reference should be made to QNIC standards (2016), Oftsted and Department of Education guidance when planning this area. Teacher / pupil ratio is recommended at 1:4. Anyone teaching a young person under the age 16 is required to be Ofsted registered.
Teaching room (minimum recommended space for any teaching room is 3 persons) (size based on number of spaces)	HBN 03-02	~	4	8	32	For the study and teaching of subjects such as English and mathematics.	whiteboard or smart board may be	In smaller units this room could be shared to allow a number of staff members to teach different subjects.

ICT room (size based on number of computers required)	HBN 03-02	~	4	4	16	Equipped with computers to enable the teaching of a variety of subjects and computer skills.		QNIC standards suggest 1 computer for every 2 young people in school. Depending on the size of the unit these may be located within this room, in larger units they may be in other teaching areas. Secure web filtering will be required.
Science room	HBN 03-02	~	12	0	0	Teaching area for science subjects.	COSSH cupboards and other lockable storage will be required. Equipment within the room will be a project specific decision based on what experiments and other practical work will be undertaken in here.	The GCSE curriculum requires entrants to undertake 9 practical experiments. Where it is anticipated that the length of stay within the unit would of such a length that the pupil would be disadvantaged by not being able to undertake these, consideration should be given to finding other options. A small specialist laboratory with vision and audio for pupils but teacher access only could be one possibility. Not included - safety issue?
Science viewing room	HBN 03-02	✓	6	0	0			
Art room	HBN 03-02	$\checkmark$	20	0	0			Included within group room allowance. (Assumes all rooms are multi-functional!)
Learning resource area	HBN 03-02	$\checkmark$	10	1	10			
Staff room/office space (size based on number of spaces)	HBN 03-02	~	6.6	2	13.2	Space for administrative work, lesson preparation, marking, informal meetings with other staff members.	Desk / worktop space with computer access. Informal meeting area. Storage for files and educational equipment.	The size of the unit will indicate whether any other office space is required.

Secure Store with safe	HBN 03-02	✓	4	0	0	To store external examination papers in a secure and safe environment.	Safe.	If external examinations are to be taken in the school then a secure store with safe will be required for the examination papers.
Office space - 1 person	HBN 00-03		8	0	0		Desk with space for an informal meeting, storage for files and other equipment.	Depending on the size of the school individual and shared officers may be required for head teacher, secretaries and for multi- disciplinary teams.

Sub-total		1069	
Plant	12%	128	Generally, some 12% of NIA is allowed (depending on the size and nature of the building, and the location of the plant - rooftop plant, for instance, will require negligble m <sup>2</sup> ).
EDC/Switch Cupboard (x6 @2.5m2)		15	
Comms		14	Estimate based on historical projects
Net internal area (NIA) m <sup>2</sup>		1226	

Net internal area (NIA) m²		1226								
Circulation allowance	25%	306								
Communication	0%	0								
Engineering	25%	306								
Gross internal area (GIA)	Gross internal area (GIA) m²									

HGHCP have utilised the HBN
figure but are sceptical that it is
sufficient. We would recommend
33% but see note re: engineering.
Not required in a single unit of this
size.
HGHCP have utilised the HBN
figure but believe this to be high.

### NSAMHIS DRAFT SCHEDULE OF ACCOMMODATION

Activity Space	HBN Reference	HBN 03-02 specific room	Unit area allowance m <sup>2</sup>	Quantity	Total area m²		Description (where CAMHS-specific)	Notes
MAIN ENTRANCE HUB &	HBN 03-01							
ADMIN	HBN 00-03							
Draught Lobby	HBN 03-01		6	1	h	To retain warmth within the reception area of the building.		
Main entrance/reception	HBN 03-01 HBN 00-03		20	1	20		Sign-posting to CAMHS wards. Specific operational policy should be considered for CAMHS ward visitors where this is the main entrance to a unit containing other adult services.	
Reception desk. (Size based on number of places.)	HBN 03-01 HBN 00-03		5.5	2	11	As per HBN guidance.		
Reception office. (Size based on number of places)	HBN 03-01 HBN 00-04		6	2	12			
Waiting area (5 places including wheelchair space). (Size based on number of places.)	HBN 03-01 HBN 00-03		1.8	6	10.8		Additional space may be required to accommodate baby buggies.	
Interview room	HBN 03-01		12	1	12	As per HBN guidance.		
Office - 1 person with informal meeting space	HBN 00-03		12	3	36	As per HBN guidance.	Variety of office space may be required, ranging from single-person with informal meeting space to open plan mobile working offices.	SCN x1, visiting consultants x 2.
WC - semi-ambulant	HBN 00-02		2.5	1	2.5	As per HBN guidance.		

WC (independent wheelchair/semi-ambulant)	HBN 00-02	5.5	1	5.5	As per HBN guidance.	Visitor toilet. HBN notes: The accessible WC should be kept locked when located in the reception area, to be opened upon request.
STAFF AREA						
Staff rest room and mini-						
kitchen (size based on number	HBN 03-01	1.8	15	27	As per HBN guidance.	Assumes max of 15 staff at any one
of spaces)	HBN 00-03					time.
WC - ambulant	HBN 00-02	2	4	8	As per HBN guidance.	
WC (independent						
wheelchair/semi-ambulant)	HBN 00-02	5.5	1	5.5	As per HBN guidance.	
						Assumes 40 lockers required. HBN
Staff WCs, changing rooms	HBN 00-02	6	4	24	As per HBN guidance.	states: May include lockers and
and showers (10 lockers)					· -	hanging space (see below).

VISITING AREA								
Visiting room	HBN 03-02	р	16	1	16	For visiting. When not in use may be used for informal meetings in a relaxed space.	A range of seating should be provided to cater for adults and children, this could include bean bags and small chairs. Space for play should be available. Easy access to snacks and drinks should be available.	Accesses toilets in the entrance hub.
DAY, DINING & LOCAL								
ACTIVITY AREAS								
Ward entrance (Secure lobbies)	HBN 03-02	р	6	2	12	Entrance to the ward when accessed through other service areas not associated with CAMHS.	Locked entrance will require buzzer / video and audio connection to ward office or other designated area.	
Dining area (size based on number of places)	HBN 03-01		2	18	36	As per HBN guidance.	Open plan, possibly co-located to the sitting area to give a larger space for use outside of mealtimes for activities such as board games, jigsaw puzzles etc.	
Unit kitchen / ward kitchen	HBN 03-01 HBN 00-03		20	1	20	As per HBN guidance.		Increased to suit local catering provision. (HBN states: The catering solution and the size of the unit will determine the requirements for either a kitchen for the unit and / or ward kitchens)
Activities area	HBN 03-01		16	1	16	As per HBN guidance.		This area should include appropriate activities for the age group. This may include electronic games.
Games area / social room	HBN 03-01		24	1	24	An area to play games which require more space to allow for movement, such as table tennis, pool or computer games / exercise programmes.		Space should be considered carefully if a table tennis and / or pool table is required. Lockable storage may also be required for the tables and other equipment.
Patients' beverage area	HBN 03-01 HBN 00-03		6	1	6	As per HBN guidance.		
Patients' laundry	HBN 03-01		12	1	12	As per HBN guidance.		Inclusion of this room in the unit, can assist in developing life skills.
Staff communication base/ward base (size based on number of places)	HBN 03-01		5.5	2	11	As per HBN guidance.		
WC - semi-ambulant	HBN 00-02		2.5	2	5	As per HBN guidance.		

PATIENT: BEDROOM AREAS					Assumes 3 x "clusters". Norionally 1 m	ale, 1 female and 1 "swing" beds	
Sitting area/room (size based on number of places) (Located within bedroom "clusters").	HBN 03-01	3	12		As per HBN guidance.	An open plan area with access to an outside space. An assortment of comfortable seating, television and areas for activities such as electronic games.	Assumes small sitting areas provided with 3 x bedroom "clusters". Also doubles as "quiet room provision through the day?
Staff "touch-down" bases		2	3	6			As per HBN 00-02
Single bedroom (Accessible)	HBN 03-01	12.5	9	112.5	As per HBN guidance.		Personalisation of the room by the patient would be advantageous. The opportunity to display posters and photographs. Lighting which can reflect mood, colour changing, dimmable and controlled from within the room would be advantageous.
Single bedroom for extra care/seclusion	HBN 03-01	15	3	45	As per HBN guidance.		Final model to be determined. Current notional allowance is for 3 bedrooms (I per "cluster") to be able to support seclusion/extra care needs.
Lobby to seclusion room	HBN 03-01	8	3	24	As per HBN guidance.		As above.
De-escalation area	HBN 03-01	12	3	36	As per HBN guidance.		As above.
En-suite	HBN 03-01	4.5	12	54	As per HBN guidance.		A lockback door gives the opportunity for the door to be locked in the open or closed position by staff.
Linen storage	HBN 03-01	5	3	15	As per HBN guidance.		This can be one linen store or could be small cupboard areas located in bedroom corridors. Increased to meet local needs - assumes 3 x "clusters"
Assisted bathroom	HBN 03-01	15	1	15	As per HBN guidance.		Consider provision of a 'domestic'-type bathroom, feels like being at home. Also consider DDA shower as young people often prefer showers to baths. (Reduced from 2)

Mobile hoist storage HBN 03-01	2	1	2 4	As per HBN guidance.	d b h si a	Hoists may be stored within an dedicated lockable recess within the pathroom. If this is unavailable, the noist should be stored in a locked store room within the area which may also contain weighing / sanitary shairs. (Reduced from 2 as above)
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UNIT SUPPORT & STORAGE AREAS							
Patients' property store (Personal goods store)	HBN 03-01	12	1	12	Shelving will be required, this may include pigeon holes for each patient and some floor space if it is envisaged large pieces of property will be stored.	Storage of property required infrequently or not allowed to be in the patient's possession, not allowed within the unit or property which has to be controlled by staff (such as aerosol cans).	can be mixed and some can be
Equipment store	HBN 03-01	12	1	12	As per HBN guidance.		Sockets may be required for equipment which requires charging.
Dirty utility	HBN 00-03	10	1	10	As per HBN guidance.		No requirement for bed pan processing.
Disposal hold	HBN 00-03	10	1	10	As per HBN guidance.		Increased to meet local needs.
Cleaners' rooms	HBN 00-03	10	2	20	As per HBN guidance.		Increased to meet local needs.

CLINICAL SUPPORT & CONSULTING AREAS WITH DISCRETE ENTRANCE								
Discrete entrance (Secure lobby)	HBN 03-02	Ρ	6	1	6		land audio connection to ward office or other	Separate discrete side entrance for prisoners, etc.
Treatment room/clinic utility	HBN 00-03 HBN 03-01		16	1	16	As per HBN guidance.		
Clinical consulting room			13.5	3	40.5			Supporting a range of clinical consulting activity and patient searches for clients admitted via the discrete entrance, e.g. From custody(Equivalent to "single-sided consulting room areas)
Meeting room / Staff handover / group therapy / activities (Duty room)	HBN 03-01		16	1	16	As per HBN guidance.		These rooms should be multi- functional and offer the opportunity for other activities to take place, when not in use for meetings. Ideally a bookable facility will offer more flexibility. Furnishings and storage for unused furniture should be considered carefully to allow for the room layout to be changed.
WC - ambulant	HBN 00-02		2	6	12	As per HBN guidance.		Notionally staff
MDT Room			20	1	20			Supporting daily MDT meetings

GROUP/ THERAPY AREA					A variety of activity rooms may be req	uired. Where the ward operates a day-service	e, for those young people, additional
Group therapy rooms		20	3	60	As per HBN guidance.		Assumes all roms are multi-functional! Size per room increased from 16m2 to support multi-functional element.Specific teaching rooms listed seperately under education.
Group therapy room store		4	3	12			En-suite to group rooms for local eqpt storage to support multi-functionality.

Therapy kitchen			20	1	20	As per HBN guidance.		Assumes not required as patient pantry available for therapeutic activity.
Gym	HBN 03-01		30	1	30	As per HBN guidance.		
WC (independent wheelchair/semi-ambulant)	HBN 00-02		5.5	2	11	As per HBN guidance.		Shared with school area.
WC - ambulant	HBN 00-02		2	2	4	As per HBN guidance.		Notionally staff
Therapy office (size based on number of places)			6	2	12	As per HBN guidance.		
SCHOOL AREA								
Teaching room (minimum recommended space for any teaching room is 3 persons) (size based on number of spaces)	HBN 03-02	Ρ	4	8	32	For the study and teaching of subjects such as English and mathematics.	The room will have the appropriate spaces for pupils to sit at tables / desks to undertake written work. A blackboard, whiteboard or smart board may be required. Locked storage for books and other teaching equipment will be required.	In smaller units this room could be shared to allow a number of staff members to teach different subjects.
ICT room (size based on number of computers required)	HBN 03-02	Ρ	4	4	16	the teaching of a variety of subjects	The number of computers will vary depending of young people and the subjects for which the room is used.	QNIC standards suggest 1 computer for every 2 young people in school. Depending on the size of the unit these may be located within this room, in larger units they may be in other teaching areas. Secure web filtering will be required.
Learning resource area	HBN 03-02	Р	10	1	10			
Staff room/office space (size based on number of spaces)	HBN 03-02	p	6.6	2	13.2	preparation, marking, informal	Desk / worktop space with computer access. Informal meeting area. Storage for files and educational equipment.	The size of the unit will indicate whether any other office space is required.
	Cub total							

Plant 12%	129		HBN recommends 12% of NIA is allowed (depending on the size and nature of the building, and the location of the plant - rooftop plant, for instance, will require negligble m <sup>2</sup> ).
EDC/Switch Cupboard (x6 @2.5m2)	15		
Comms	14		Estimate based on historical projects
Net internal area (NIA) m <sup>2</sup>	1237		

Net internal area (NIA) m <sup>2</sup>		1237	
Circulation allowance	25%	309	HBN figure used.
Communication	0%	0	Not required in a single unit of this
communication	076	0	size.
Engineering	25%	309	HBN figure used.
Gross internal area (GIA) m <sup>2</sup>		1855	

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## NSAMHIS DRAFT SCHEDULE OF ACCOMMODATION

Activity Space	HBN Reference	it area ance m antity	Total area m²	Notes
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MAIN ENTRANCE HUB & ADMIN					
Draught Lobby	HBN 03-01	6	1	6	
Main entrance/reception	HBN 03-01 HBN 00-03	20	1	20	
······ (- · · · · · · · · · · · · · · ·	HBN 03-01 HBN 00-03	5.5	2	11	
Reception office. (Size based on number of places)	HBN 03-01 HBN 00-04	6	2	12	
wheelchair space). (Size based on	HBN 03-01 HBN 00-03	1.8	6	10.8	
Interview room	HBN 03-01	12	1	12	
Office - 1 person with informal meeting space	HBN 00-03	12	3	36	SCN x1, visiting consultants x 2.
WC - semi-ambulant	HBN 00-02	2.5	1	2.5	
WC (independent wheelchair/semi- ambulant)	HBN 00-02	5.5	1	5.5	Visitor toilet. HBN notes: The accessible WC should be kept locked when located in the reception area, to be opened upon request.

Activity Space	HBN Reference	Unit area allowance m²	Quantity	Total area m²	Notes
STAFF AREA					
Staff rest room and mini-kitchen (size based on number of spaces)	HBN 03-01 HBN 00-03	1.8	15	27	Assumes max of 15 staff at any one time.
WC - ambulant	HBN 00-02	2	4	8	
WC (independent wheelchair/semi- ambulant)	HBN 00-02	5.5	1	5.5	
Staff WCs, changing rooms and showers (10 lockers)	HBN 00-02	6	4	24	Assumes 40 lockers required. HBN states: May include lockers and hanging space (see below).

Activity Space	HBN Reference	Unit area allowance m <sup>2</sup>	Quantity	Total area m²	Notes
VISITING AREA					
Visiting room	HBN 03-02	16	1	16	Accesses toilets in the entrance hub.

Activity Space	HBN Reference	Unit area allowance m²	Quantity	Total area m²	Notes
DAY, DINING & LOCAL ACTIVITY AREAS					
Ward entrance (Secure lobbies)	HBN 03-02	6	2	12	
Dining area (size based on number of places)	HBN 03-01	2	18	36	
Unit kitchen / ward kitchen	HBN 03-01 HBN 00-03	20	1	20	Increased to suit local catering provision. (HBN states: The catering solution and the size of the unit will determine the requirements for either a kitchen for the unit and / or ward kitchens)
Activities area	HBN 03-01	16	1	16	This area should include appropriate activities for the age group. This may include electronic games.
Games area / social room	HBN 03-01	24	1	24	Space should be considered carefully if a table tennis and / or pool table is required. Lockable storage may also be required for the tables and other equipment.
Patients' beverage area	HBN 03-01 HBN 00-03	6	1	6	
Patients' laundry	HBN 03-01	12	1	12	Inclusion of this room in the unit, can assist in developing life skills.
Staff communication base/ward base (size based on number of places)	HBN 03-01	5.5	2	11	
WC - semi-ambulant	HBN 00-02	2.5	2	5	

Activity Space	HBN Reference	Unit area allowance m²	Quantity	Total area m²	Notes
PATIENT: BEDROOM AREAS					
Sitting area/room (size based on number of places) (Located within bedroom "clusters").	HBN 03-01	3	12	36	Assumes small sitting areas provided with 3 x bedroom "clusters". Also doubles as "quiet room provision through the day?
Staff "touch-down" bases		2	3	6	As per HBN 00-02
Single bedroom (Accessible)	HBN 03-01	12.5	9	112.5	Personalisation of the room by the patient would be advantageous. The opportunity to display posters and photographs. Lighting which can reflect mood, colour changing, dimmable and controlled from within the room would be advantageous.
Single bedroom for extra care/seclusion	HBN 03-01	15	3	45	Final model to be determined. Current notional allowance is for 3 bedrooms (I per "cluster") to be able to support seclusion/extra care needs.
Lobby to seclusion room	HBN 03-01	8	3	24	As above.
De-escalation area	HBN 03-01	12	3	36	As above.
En-suite	HBN 03-01	4.5	12	54	A lockback door gives the opportunity for the door to be locked in the open or closed position by staff.
Linen storage	HBN 03-01	5	3	15	This can be one linen store or could be small cupboard areas located in bedroom corridors. Increased to meet local needs - assumes 3 x "clusters"
Assisted bathroom	HBN 03-01	15	1	15	Consider provision of a 'domestic'- type bathroom, feels like being at home. Also consider DDA shower as young people often prefer showers to baths. (Reduced from 2)

Activity Space	HBN Reference	Unit area allowance m²	Quantity	Total area m²	Notes
Mobile hoist storage	HBN 03-01	2	1	2	Hoists may be stored within an dedicated lockable recess within the bathroom. If this is unavailable, the hoist should be stored in a locked store room within the area which may also contain weighing / sanitary chairs. (Reduced from 2 as above)

Activity Space UNIT SUPPORT & STORAGE AREAS	HBN Reference	Unit area allowance m²	Quantity	Total area m²	Notes
Patients' property store (Personal goods store)	HBN 03-01	12	1	12	HBN notes: The size of this room may be smaller than previously as single bedrooms with lockable storage allows more property to be kept in a secure manner. The lockable storage can be mixed and some can be controlled by staff only within the bedroom. Local model assumes 3 "clusters" of rooms and need for storge space for larger personal items within clusters. (Cases, boxes, etc)
Equipment store	HBN 03-01	12	1	12	Sockets may be required for equipment which requires charging.
Dirty utility	HBN 00-03	10	1	10	No requirement for bed pan processing.
Disposal hold	HBN 00-03	10	1	10	Increased to meet local needs.
Cleaners' rooms	HBN 00-03	10	2	20	Increased to meet local needs.

Activity Space	HBN Reference	Unit area allowance m <sup>2</sup>	Quantity	Total area m²	Notes
CLINICAL SUPPORT & CONSULTING ARE	AS WITH DISCRETE ENTRAN	CE			
Discrete entrance (Secure lobby)	HBN 03-02	6	1	6	Separate discrete side entrance for prisoners, etc.
Treatment room/clinic utility	HBN 00-03 HBN 03-01	16	1	16	
Clinical consulting room		13.5	3	40.5	Supporting a range of clinical consulting activity and patient searches for clients admitted via the discrete entrance, e.g. From custody(Equivalent to "single- sided consulting room areas)
Meeting room / Staff handover / group therapy / activities (Duty room)	HBN 03-01	16	1	16	These rooms should be multi- functional and offer the opportunity for other activities to take place, when not in use for meetings. Ideally a bookable facility will offer more flexibility. Furnishings and storage for unused furniture should be considered carefully to allow for the room layout to be changed.
WC - ambulant	HBN 00-02	2	6	12	Notionally staff
MDT Room		20	1	20	Supporting daily MDT meetings

GROUP/ THERAPY AREA					
Group therapy rooms		20	3	60	Assumes all roms are multi- functional! Size per room increased from 16m2 to support multi-functional element.Specific teaching rooms listed seperately under education.
Group therapy room store		4	3	12	En-suite to group rooms for local eqpt storage to support multi- functionality.
Therapy kitchen		20	1	20	Assumes not required as patient pantry available for therapeutic activity.
Gym	HBN 03-01	30	1	30	

Activity Space	HBN Reference	Unit area allowance m²	Quantity	Total area m²	Notes
WC (independent wheelchair/semi- ambulant)	HBN 00-02	5.5	2	11	Shared with school area.
WC - ambulant	HBN 00-02	2	2	4	Notionally staff
Therapy office (size based on number of places)		6	2	12	

SCHOOL AREA					
Teaching room (minimum recommended space for any teaching room is 3 persons) (size based on number of spaces)	HBN 03-02	4	8	32	In smaller units this room could be shared to allow a number of staff members to teach different subjects.
ICT room (size based on number of computers required)	HBN 03-02	4	4	16	
Learning resource area	HBN 03-02	10	1	10	
Staff room/office space (size based on number of spaces)	HBN 03-02	6.6	2	13.2	

Sub-total	1079	
Plant 129	6 129	HBN recommends 12% of NIA is allowed (depending on the size and nature of the building, and the location of the plant - rooftop plant, for instance, will require negligble m <sup>2</sup> ).
EDC/Switch Cupboard (x6 @2.5m2)	15	
Comms	14	Estimate based on historical projects
Net internal area (NIA) m <sup>2</sup>	1237	
Net internal area (NIA) m <sup>2</sup>	1237	

Net internal area (NIA) m <sup>2</sup>		1237	
Circulation allowance	25%	309	HBN figure used.

Activity Space	HBN Reference	Unit area allowance m <sup>2</sup>	Quantity	Total area m²	Notes
	Communication 0%		$\cap$	Not required in a single unit of this size.	
	Engineering	259	%	309	HBN figure used.
	Gross internal area (GIA) m <sup>2</sup> 1855				

Notes:

Baseline guidance SofA Based on HBN 03-02 (12 beds)

Modified by N Sutherland (HGHCP) to reflect local service planning & client comments (11/5/18)

Does not include external areas (Outdoor storage, secure garden areas and secure vehicular/ambulance compound) Still being developed and modified as COS discussions are on-going.

Comments removed from this version for inclusion in IA documentation.

This version re-aligned to reflect notional zonal/area relationships and flow. (See relationship diagram)

## NSAMHIS DRAFT SCHEDULE OF ACCOMMODATION

Activity Space	HBN Reference	it area ance m antity	Total area m²	Notes
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MAIN ENTRANCE HUB & ADMIN					
Draught Lobby	HBN 03-01	6	1	6	
Main entrance/reception	HBN 03-01 HBN 00-03	20	1	20	
······ (- · · · · · · · · · · · · · · ·	HBN 03-01 HBN 00-03	5.5	2	11	
Reception office. (Size based on number of places)	HBN 03-01 HBN 00-04	6	2	12	
wheelchair space). (Size based on	HBN 03-01 HBN 00-03	1.8	6	10.8	
Interview room	HBN 03-01	12	1	12	
Office - 1 person with informal meeting space	HBN 00-03	12	3	36	SCN x1, visiting consultants x 2.
WC - semi-ambulant	HBN 00-02	2.5	1	2.5	
WC (independent wheelchair/semi- ambulant)	HBN 00-02	5.5	1	5.5	Visitor toilet. HBN notes: The accessible WC should be kept locked when located in the reception area, to be opened upon request.

Activity Space	HBN Reference	Unit area allowance m²	Quantity	Total area m²	Notes
STAFF AREA					
Staff rest room and mini-kitchen (size based on number of spaces)	HBN 03-01 HBN 00-03	1.8	12	21.6	Assumes max of 15 staff at any one time.
WC - ambulant	HBN 00-02	2	4	8	
WC (independent wheelchair/semi- ambulant)	HBN 00-02	5.5	1	5.5	
Staff WCs, changing rooms and showers (10 lockers)	HBN 00-02	6	4	24	Assumes 40 lockers required. HBN states: May include lockers and hanging space (see below).

Activity Space	HBN Reference	Unit area allowance m <sup>2</sup>	Quantity	Total area m²	Notes
VISITING AREA					
Visiting room	HBN 03-02	16	1	16	Accesses toilets in the entrance hub.

Activity Space	HBN Reference	Unit area allowance m²	Quantity	Total area m²	Notes
DAY, DINING & LOCAL ACTIVITY AREAS					
Ward entrance (Secure lobbies)	HBN 03-02	6	2	12	
Dining area (size based on number of places)	HBN 03-01	2	15	30	
Unit kitchen / ward kitchen	HBN 03-01 HBN 00-03	20	1	20	Increased to suit local catering provision. (HBN states: The catering solution and the size of the unit will determine the requirements for either a kitchen for the unit and / or ward kitchens)
Activities area	HBN 03-01	16	1	16	This area should include appropriate activities for the age group. This may include electronic games.
Games area / social room	HBN 03-01	24	1	24	Space should be considered carefully if a table tennis and / or pool table is required. Lockable storage may also be required for the tables and other equipment.
Patients' beverage area	HBN 03-01 HBN 00-03	6	1	6	
Patients' laundry	HBN 03-01	12	1	12	Inclusion of this room in the unit, can assist in developing life skills.
Staff communication base/ward base (size based on number of places)	HBN 03-01	5.5	2	11	
WC - semi-ambulant	HBN 00-02	2.5	2	5	

Activity Space	HBN Reference	Unit area allowance m²	Quantity	Total area m²	Notes
PATIENT: BEDROOM AREAS					
Sitting area/room (size based on number of places) (Located within bedroom "clusters").	HBN 03-01	3	12	36	Assumes small sitting areas provided with 3 x bedroom "clusters". Also doubles as "quiet room provision through the day?
Staff "touch-down" bases		2	3	6	As per HBN 00-02
Single bedroom (Accessible)	HBN 03-01	12.5	6	75	Personalisation of the room by the patient would be advantageous. The opportunity to display posters and photographs. Lighting which can reflect mood, colour changing, dimmable and controlled from within the room would be advantageous.
Single bedroom for extra care/seclusion	HBN 03-01	15	3	45	Final model to be determined. Current notional allowance is for 3 bedrooms (I per "cluster") to be able to support seclusion/extra care needs.
Lobby to seclusion room	HBN 03-01	8	3	24	As above.
De-escalation area	HBN 03-01	12	3	36	As above.
En-suite	HBN 03-01	4.5	9	40.5	A lockback door gives the opportunity for the door to be locked in the open or closed position by staff.
Linen storage	HBN 03-01	5	3	15	This can be one linen store or could be small cupboard areas located in bedroom corridors. Increased to meet local needs - assumes 3 x "clusters"
Assisted bathroom	HBN 03-01	15	1	15	Consider provision of a 'domestic'- type bathroom, feels like being at home. Also consider DDA shower as young people often prefer showers to baths. (Reduced from 2)

Activity Space	HBN Reference	Unit area allowance m²	Quantity	Total area m²	Notes
Mobile hoist storage	HBN 03-01	2	1	2	Hoists may be stored within an dedicated lockable recess within the bathroom. If this is unavailable, the hoist should be stored in a locked store room within the area which may also contain weighing / sanitary chairs. (Reduced from 2 as above)

Activity Space UNIT SUPPORT & STORAGE AREAS	HBN Reference	Unit area allowance m²	Quantity	Total area m²	Notes
Patients' property store (Personal goods store)	HBN 03-01	12	1	12	HBN notes: The size of this room may be smaller than previously as single bedrooms with lockable storage allows more property to be kept in a secure manner. The lockable storage can be mixed and some can be controlled by staff only within the bedroom. Local model assumes 3 "clusters" of rooms and need for storge space for larger personal items within clusters. (Cases, boxes, etc)
Equipment store	HBN 03-01	12	1	12	Sockets may be required for equipment which requires charging.
Dirty utility	HBN 00-03	10	1	10	No requirement for bed pan processing.
Disposal hold	HBN 00-03	10	1	10	Increased to meet local needs.
Cleaners' rooms	HBN 00-03	10	2	20	Increased to meet local needs.

Activity Space	HBN Reference	Unit area allowance m <sup>2</sup>	Quantity	Total area m²	Notes
CLINICAL SUPPORT & CONSULTING ARE	AS WITH DISCRETE ENTRAN	CE			
Discrete entrance (Secure lobby)	HBN 03-02	6	1	6	Separate discrete side entrance for prisoners, etc.
Treatment room/clinic utility	HBN 00-03 HBN 03-01	16	1	16	
Clinical consulting room		13.5	3	40.5	Supporting a range of clinical consulting activity and patient searches for clients admitted via the discrete entrance, e.g. From custody(Equivalent to "single- sided consulting room areas)
Meeting room / Staff handover / group therapy / activities (Duty room)	HBN 03-01	16	1	16	These rooms should be multi- functional and offer the opportunity for other activities to take place, when not in use for meetings. Ideally a bookable facility will offer more flexibility. Furnishings and storage for unused furniture should be considered carefully to allow for the room layout to be changed.
WC - ambulant	HBN 00-02	2	6	12	Notionally staff
MDT Room		20	1	20	Supporting daily MDT meetings

GROUP/ THERAPY AREA					
Group therapy rooms		20	3	60	Assumes all roms are multi- functional! Size per room increased from 16m2 to support multi-functional element.Specific teaching rooms listed seperately under education.
Group therapy room store		4	2	8	En-suite to group rooms for local eqpt storage to support multi- functionality.
Therapy kitchen		20	1	20	Assumes not required as patient pantry available for therapeutic activity.
Gym	HBN 03-01	30	1	30	

Activity Space	HBN Reference	Unit area allowance m²	Quantity	Total area m²	Notes
WC (independent wheelchair/semi- ambulant)	HBN 00-02	5.5	2	11	Shared with school area.
WC - ambulant	HBN 00-02	2	2	4	Notionally staff
Therapy office (size based on number of places)		6	2	12	

SCHOOL AREA					
Teaching room (minimum recommended space for any teaching room is 3 persons) (size based on number of spaces)	HBN 03-02	4	6	24	In smaller units this room could be shared to allow a number of staff members to teach different subjects.
ICT room (size based on number of computers required)	HBN 03-02	4	3	12	
Learning resource area	HBN 03-02	10	1	10	
Staff room/office space (size based on number of spaces)	HBN 03-02	6.6	2	13.2	

Sub-total	1000	
Plant 12%	120	HBN recommends 12% of NIA is allowed (depending on the size and nature of the building, and the location of the plant - rooftop plant, for instance, will require negligble m <sup>2</sup> ).
EDC/Switch Cupboard (x6 @2.5m2)	15	
Comms	14	Estimate based on historical projects
Net internal area (NIA) m <sup>2</sup>	1149	
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Net internal area (NIA) m <sup>2</sup>		1149	
Circulation allowance	25%	287	HBN figure used.

Activity Space	HBN Reference	Unit area allowance m²	Quantity	Total area m²	Notes
	Communication	0%	6	0	Not required in a single unit of this size.
	Engineering	25%	%	287	HBN figure used.
	Gross internal area (GIA) m	2		1724	

Notes:

Baseline guidance SofA Based on HBN 03-02 (12 beds)

Modified by N Sutherland (HGHCP) to reflect local service planning & client comments (11/5/18)

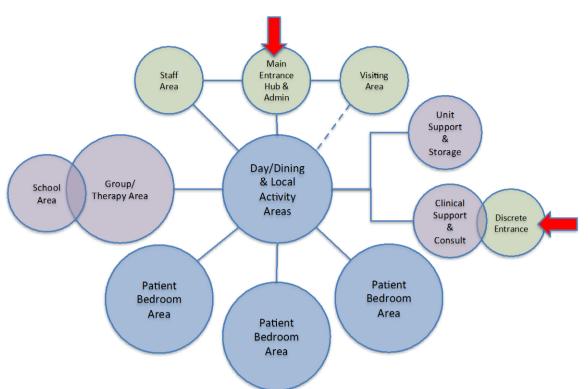
Does not include external areas (Outdoor storage, secure garden areas and secure vehicular/ambulance compound)

Still being developed and modified as COS discussions are on-going.

Comments removed from this version for inclusion in IA documentation.

This version re-aligned to reflect notional zonal/area relationships and flow. (See relationship diagram)

This version intended to reflect requirements for a 9 bed unit in 3 x "clusters"



# **NSAMHIS Core Areas & Relationships**