

New Integrated Health and Social Care Facility for Skye, Lochalsh and Wester Ross

Scottish Capital Investment Manual: Design Statement (version 7)

NHS Highland is proposing to build a new Hospital, Health and Social Care resource centre as part of the redesign of health and social care services in Skye, Lochalsh and Wester Ross. A preferred site for the facility has already been identified as part of the public consultation process and the following performance objectives include some aspects that are specific to the relationship with the existing health centre in Broadford. The design must make the most of its setting with the potential for stunning views and access to nature; while coping with the harsh weather conditions experienced in this exposed West Coast location.



Skye, Lochalsh and Wester Ross Integrated Health and Social Care Facility: Design Statement

The business objectives for the facility are:

- Integrated Health and Social Care
- Improve User Experience
- Improve Access to Services and Care
- Maximise Flexible, Responsive and Preventative Care
- Make Best Use of Resources
- Improve Quality and Effectiveness of Accommodation
- Improve Safety of Service Delivery


In order to meet these, the development must possess the following attributes.

The journeys and environments described below are for all people, and the use of best practice in relation to inclusive design (physical accessibility, sense sensitive design and design for cognitive impairments) will be part of the detailed briefing to follow of how these experiences are to be achieved.

1 Non Negotiables for Service Users

Non-Negotiable Performance Objectives <i>What the design of the facility must enable</i>	Benchmarks <i>The physical characteristics expected and/or some views of what success might look like</i>
<p>1.1 The nature of access routes out with the site boundary, and the appearance of the development when viewed from outside the site, must aid access to all services by residents of, and visitors to the area.</p>	<p>Physical access</p> <ul style="list-style-type: none"> • Road access to be improved to prevent the need for passing places, increasing reliability and safety. • Pavement access to the facility from the A87 to be wide enough to allow passing, well-lit and sheltered through the use of landscape etc. • There is the potential to increase options for access by linking the site pedestrian routes with the shore road for a more 'line of sight' route from Broadford across the new footbridge. <p>Wayfinding</p> <ul style="list-style-type: none"> • Clear and well placed signage from the A87 for pedestrians, cyclists and car users should support and reinforce intuitive way finding.

Skye, Lochalsh and Wester Ross Integrated Health and Social Care Facility: Design Statement

	<ul style="list-style-type: none"> • Where the building is visible from a distance it must look like a building for public use, although not necessarily a hospital. The building must not deter people from accessing social care and other services. • The building should inspire confidence and invite use; be appealing, clean and fresh but not clinical.  <ul style="list-style-type: none"> • The street and other routes from the A87 must feel like they're leading you to a public facility not a private house. The turning point should feel open and inviting and have a clear identity / landmark. It should be pedestrian friendly for those who need to cross, and not be confused by uncoordinated signage. • At the point the site becomes visible from the approach route(s) there must be something 'on show', for example a landscape feature or part of the building. This should provide a welcoming impression and act as a recognisable landmark so that visitors are confident that they have found the right place.
<p>1.2 The building and landscape of the new facility must be designed to work together, and with the existing health centre, to lower stress in arriving and leaving by:</p> <ul style="list-style-type: none"> • Making it clear where you need to go (parking / entrance), both for people 	<ul style="list-style-type: none"> • Bus stop within 50m of the public entrance, visible from an internal public space, to allow people to wait in the warm (see also 1.4). • Pedestrian / cycle routes on the site should take priority over car routes. The experience for those arriving via footpath / cycle / public transport must not be dominated by parking, and walking routes from the public street must not be longer than walking routes from general parking. • The public entrance (which will be operational 24/7, though buzzer operated out of hours) must be clearly visible from arrival routes. Should the entrances to the new facility and Health Centre be in independent operation they must each have clear and distinct identities to provide service users confidence in their choice. It must not be possible to see and enter one facility without seeing the other.

Skye, Lochalsh and Wester Ross Integrated Health and Social Care Facility: Design Statement

coming to the new services on the site and those accessing existing services, and make it easy for any people who present to the wrong place.

- Making public transport an accessible option.
- Protecting people from the inclement weather.
- Providing a welcoming and visually appealing impression.

- The entrance spaces of both buildings must be closely linked (less than 2 minutes walk) by a publically accessible route sheltered by the landscape (NB, this should not be read as requiring an external covered link from one entrance door to the other).
- The building and landscape must shelter walking routes and external spaces (particularly the drop-off area) from the prevailing winds. This facility is located on the exposed West Coast and frequently experiences horizontal driving rain. A unique design challenge is presented by the midges which are a particular problem during the summer months. Consideration should be given to this in the design where possible.
- The form and appearance of the building on approach to the entrance must be inviting and draw you in naturally. There should be a breathing space around the entrance to allow you to take a moment, or deal with any wet clothes, buggies etc.

Arrival route naturally draws you in to the main entrance:



Building and landscape provides shelter on approach:



1.3 On arriving under your own steam or by patient transport, the facility must feel welcoming and relaxing with direct access to the help that you need.

The entrance area should be light and airy using local materials / forms and the views from the site to aid familiarity, comfort and provide positive distractions.

A single reception in this area placed to be obvious on entry and organised flexibly to allow different needs to be accommodated. The reception should:

- Be open so that it supports personal, face to face interaction. Staff safety should be dealt with through visually unobtrusive measures such as deep desks and proximity to secure areas;
- Be placed far enough away from waiting areas to limit the potential for discussions to be overheard;
- Be close to telephony / records / back office for assistance, but audio-isolated to ensure privacy for patient discussions;
- Have space(s) immediately adjacent for private discussions to take place. This can include short conversations of a delicate nature with the receptionist or longer discussions with other staff;
- Provide direct and immediate referral of the walking wounded to emergency services (less than 1 minute walk) from reception to emergency dept);

Skye, Lochalsh and Wester Ross Integrated Health and Social Care Facility: Design Statement

- Be close to electronic check-in facilities; and
- Must not look cluttered.


Light, airy, separation from waiting area



Obvious reception desk on arrival (panelling too busy)

Light, airy, obvious reception desk



	<p>Impersonal and unwelcoming:</p> 
<p>1.4 Waiting areas must feel relaxing, allow for personal preferences and be positioned to give easy access to both interview / consulting areas and external space.</p>	<p>The waiting areas should be light and airy using local materials / forms and the views from the site to aid familiarity and comfort and provide positive distractions. They should be:</p> <ul style="list-style-type: none"> • Generally in one space for flexibility, but with seating organised into groupings to provide a choice in environment. Design should allow for a mix of open / social and more quiet / personal. Particular services such as Accident & Emergency will require a discrete waiting area to allow the walking wounded some privacy and prevent undue distress to other service users. • Flexibility and personal choice in terms of seating must be the same for disabled people as it is for non-disabled people and permit flexibility for wheelchair users, some of whom may prefer to transfer from wheelchair to seating. • Adjacent to an accessible and sheltered external area to allow a breath of fresh air during longer waits and kids to run off steam. • Seating areas should be within sight of reception to allow service users to feel in touch with assistance if needed. • Personal needs (toilets/refreshments) visible from seating area. • Waiting within 1 minute walk of all consulting/treatment rooms to enable personal collection by clinician from waiting area (<i>see reference design publication</i>). • Publically available WiFi to allow people to maintain connections to outside life, and to provide distractions while waiting

Skye, Lochalsh and Wester Ross Integrated Health and Social Care Facility: Design Statement

Light and airy. Seating placed in groups, design allows for flexibility and personal choice



Rows of seats




Goldfish bowl




1.5 Interview / consulting / treatment rooms must have a therapeutic ambiance; soft, homely and no more clinical than necessary. They must be able to have both daylight and privacy throughout the meeting.

Rooms where sensitive conversations take place (in the room, and for telehealth) should not be placed immediately adjacent to, and at the same level as, public external areas. Storage etc to be organised so that equipment (such as soft play for kids) can be used to customise rooms to different purposes and different needs.

Skye, Lochalsh and Wester Ross Integrated Health and Social Care Facility: Design Statement

	Soft play / therapeutic	Treatment room	Does not feel homely or therapeutic
<p>1.6 The layout of the facility must respect and protect the different emotional needs of service users.</p>			
<ul style="list-style-type: none"> • The access routes used by vulnerable people who may be brought in by patient transfer and need more sheltered / private locations for transfer must meet the standards set above for the arrival experience (1.3/1.4). Though other access areas might be used for privacy, it should not feel like a “back-door” delivery. There must also be a pleasant, discrete route out for residents taking day trips. • Services where patients are in very different emotional states must not be located adjacent to one another so that the experience of one impacts the experience of the other (e.g. midwifery next to a chemotherapy treatment area). • The route that deceased people take must be dignified, allowing transfer from the place of death without going through public areas. • The building and surrounding grounds must be designed together to give complimentary levels of privacy and prevent very private internal areas, and private / secluded garden areas, being adjacent to public external areas. • There must be places for people to be able to sit in privacy if they’re feeling fragile, in need of quiet, or have just received bad news. 			

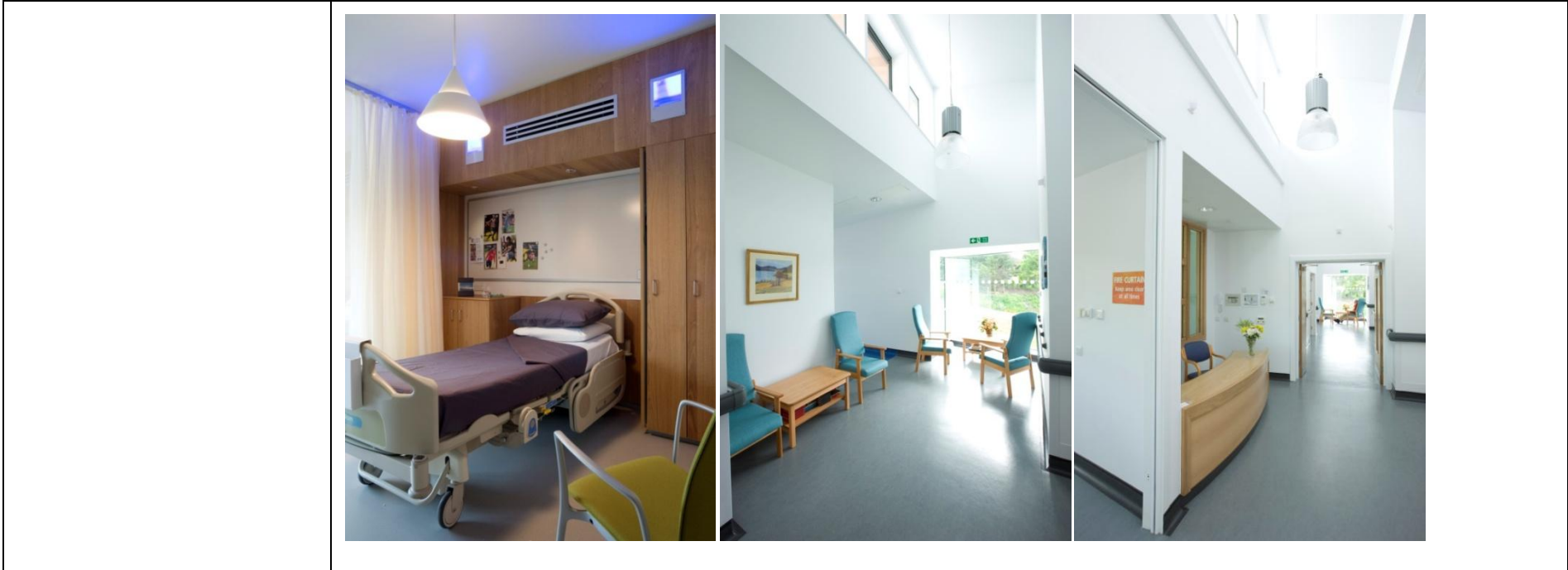
Skye, Lochalsh and Wester Ross Integrated Health and Social Care Facility: Design Statement

	
<p>1.7 Inpatient areas must have a distinct identity, be homely in nature and invite activity and social interaction. They must encourage links to home / family / community rather than isolate. Daily experiences, such as dining, should be pleasurable and help improve both physical and mental wellbeing (nutrition / social interaction etc)</p>	<ul style="list-style-type: none"> • All areas of the ward must be interesting, offering things to look at and do – views to gardens and wider landscape, visual links to social areas – to encourage activity and interaction. There must be no ‘dead ends’; all routes should take you to a ‘place’. • There must be good media / IT links in all spaces for distraction and connection to outside life. • Places for coming together (social rooms, dining) must be attractive and support interactions. • External spaces must be immediately and freely accessible from inpatient areas, offering a range of spaces for different needs; wander routes, green therapy, quiet respite, social interaction, visiting pets and private spaces associated with palliative care. • The routes to shared areas (1.3 above) must be easy, pleasant and attractive to encourage use either independently (if appropriate) or supported. • Views to the sea and hills must be maximised, and opportunities taken to allow landscape links for those able.




Skye, Lochalsh and Wester Ross Integrated Health and Social Care Facility: Design Statement




Skye, Lochalsh and Wester Ross Integrated Health and Social Care Facility: Design Statement




2 Non Negotiables for Staff

<p>Non-Negotiable Performance Objectives <i>What the design of the facility must enable</i></p>	<p>Benchmarks <i>The physical characteristics expected and/or some views of what success might look like</i></p>
<p>2.1 The experience of arriving and leaving must be safe, pleasant and efficient.</p>	<ul style="list-style-type: none"> • Walking routes within the site to be well lit, observed from occupied areas and sheltered by landscape (maximum 2 minutes walk to staff entrance from parking / bus stop / street. • Convenient, protected parking for on call staff to enable a quick exit. • Convenient (within 10m of entrance to stores/staff entrance) drop-off facilities for staff allowing them to take equipment from store to car with minimal moving and handling. • Staff changing areas within 1 minute walk of route from arrival to service areas allowing efficient flow. • Planned space for visiting service vans (e.g. breast screening) in public areas without impacting the experience described in section 1.
<p>2.2 The facility must bring staff from different disciplines together to aid understanding and joint working.</p>	<p>Routes around the facility, rest and office spaces will be shared to support staff from different departments to meet each other as part of their normal use of the facility. Office areas must allow a range of activities (quiet desk based working, sensitive phone calls in quiet environment, informal and formal staff discussions) and personal choice in environment. There will therefore have to be a range of spaces from formal desk, through small meeting rooms and pods to less formal, more café-like working spaces. There will be no private offices dedicated to one staff member.</p> <div data-bbox="714 946 1951 1332" style="display: flex; justify-content: space-around;">    </div>

Skye, Lochalsh and Wester Ross Integrated Health and Social Care Facility: Design Statement

	
<p>2.3 The telehealth in the facility must enable links to specialist and remote services and to service users, and promote the learning and education of staff.</p>	<ul style="list-style-type: none"> • Meeting spaces designed to allow training / learning events • Spaces for private conversations (see office areas above) to include private video conversations • IT enabled throughout, allowing remote services to patch into discussions in interview / consultation / treatment rooms. • WiFi throughout, enabling flexible use of spaces
<p>2.4 Facilities Management must be enabled to happen easily and unobtrusively.</p>	<ul style="list-style-type: none"> • Deliveries and waste managed out of sight from public and rest areas. • Building layout zoned to allow areas with different operating hours to be closed down and unheated without impacting the experiences described in this document.
<p>2.5 The layout of the facility must support a 24/7 operation to happen efficiently.</p>	<p>Areas that are open 24/7 to be close together for staff support and to limit the need to use / heat / light other closed areas. This will affect the design of the public entrance area; see 1.3 above in relation to arrivals. The design should enable visitors to access the facility 24/7 if required, though with controlled access out of hours. There should be a good line of sight from inside the building to this entrance for security out of hours.</p>
<p>2.6 Staff must be able and encouraged to have time properly off duty during breaks.</p>	<p>There must be attractive rest facilities (staff room and external space) accessible to all staff day and night. These should be away from public areas to allow staff to have food, refreshments, rest and social time. On-call rest areas must be within the 24/7 area, but away from public spaces.</p>




Skye, Lochalsh and Wester Ross Integrated Health and Social Care Facility: Design Statement

	
<p>2.7 The facility must be spatially efficient and flexible in use, and planned to allow for expansion.</p>	<ul style="list-style-type: none"> • Rooms with similar purposes to have a common design to allow users to flex between areas • Circulation routes designed to allow the number of rooms in any service to flex over time • Larger meeting spaces located so they can be used by staff and other uses, i.e. visiting services, third sector support groups, community. • Plan to show how 20% expansion space can be accommodated without impacting non-negotiable experiences in this document.
<p>2.8 The building must be sustainable in construction and use.</p>	<p>Achievement of BREEAM Excellent. Realistic Dynamic Simulation Modelling at each key design stage must demonstrate optimisation of orientation, fenestration etc to achieve sustainable comfort in use, as well operational energy (kWh/m2) and whole life cycle costing. Demonstrate how potential for a dementia friendly, therapeutic environment, with Equality of Access and opportunities for Health Promotion, are delivered via the design.</p>

3 Non Negotiables for Visitors

Non-Negotiable Performance Objectives <i>What the design of the facility must enable</i>	Benchmarks <i>The physical characteristics expected and/or some views of what success might look like</i>
<p>3.1 The design of the facility must help and encourage family and friends to visit inpatients / residents.</p>	<ul style="list-style-type: none"> • When arriving in the evening and in darkness (including an urgent call in), there must be an obvious lit entrance (see 1.3 above) and short (less than 1 minute walk) route into 24/7 areas. • The bedrooms must be designed to enable a family member to stop over in the room; with space for a drop down bed, convertible couch, or 'put-you-up'.
<p>3.2 When waiting for extended periods there must be a range of places to go offering privacy / distraction and where personal needs can be catered for, but where you feel confident that staff can reach you with news of your loved one.</p>	<p>Generally provided for in waiting areas noted above, and for specialist services such as children and family services through booking adjacent rooms for parents and children to be accommodated separately. However, particular consideration for accompanying dependents (children and older people) to be factored into the design of the internal waiting areas and external general use areas to allow friends and family space for respite and exercise when waiting.</p>
<p>3.3 The facility must be clear as to the range of services on offer to support friends / families / visitors own health and social care needs, and their role as carers.</p>	<ul style="list-style-type: none"> • Co-ordinated display of range of services and visiting groups; e.g. communication corner, what's going on board. • Spaces used by support groups / Citizens Advice Bureau etc to be visible from main areas, allowing you to see where they are, but not necessarily who's in there and what's going on. <div data-bbox="763 979 1240 1299" data-label="Image"> </div>

4 Alignment of Investment with Policy

<p>Non-Negotiable Performance Objectives <i>What the design of the facility must enable</i></p>	<p>Benchmarks <i>The physical characteristics expected and/or some views of what success might look like</i></p>
<p>4.1 The layout of the site must invite the community in and increase opportunities for integration and exercise. The site must be part of the community experience.</p>	<ul style="list-style-type: none"> • Walking routes within the site should allow connection between local facilities and amenities (care home, shore, jetty) to encourage use by residents, dog-walkers, joggers etc. • Grounds should be designed to provide opportunities for use by local growing initiatives. <p>Link to existing walking routes</p>  <p>Potential for therapy gardens</p>  

Skye, Lochalsh and Wester Ross Integrated Health and Social Care Facility: Design Statement

<p>4.2 Any redevelopment of released site(s) should be complimentary to the care use and benefit the needs of the local community.</p>	<p>Public directed land release, not just best price sale, to ensure function and privacy of new facility is not undermined by future development (e.g. blocking views and natural light in new facility). Examples of community benefit may be to help meet local housing need or to extend the ‘public’ function of the access road.</p>
<p>4.3 The changes in public transport that can be enabled by the new facility must be developed with a wider view of improving public transport across the locality generally.</p>	<p>Strong relationship with the Skye, Lochalsh & Wester Ross Transport & Access Group, Highland Council and commercial transport providers to ensure the delivery of the appropriate transport services to and from the new facility and within the area generally.</p>

The above statement was drafted through the participation of the following stakeholders / groups:

- Community Councils; Dornie (Glenelg & Lochduich), Dunvegan, Kilmuir, Kyle, Kyleakin / Kylrhea, Lochalsh, Lochcarron, Plockton, Portree, Raasay, Skeabost, Shieldaig, Sleat, Staffin, Stromeferry, Struan, Torridon, and Waternish.
- Voluntary Organisations; Alzheimer Scotland Skye & Lochalsh Services, Skye & Lochalsh Voluntary Association, Skye and Lochalsh Access Panel, Broadford Patient Participation Group, Red Cross.
- Public Organisations; Local General Medical Practitioners, Highland Council Elected Members, Highland Council Officers, NHS Highland Clinical and Social Care Staff, NHS Highland Officers, NHS Highland Staff Side Representation, Scottish Ambulance Service.

5 SELF ASSESSMENT PROCESS

Decision Point	Authority	Additional Skills / Perspectives	How the above criteria will be considered at this stage and/or valued in the decision	Information required to allow evaluation
Site strategy	NHSH Board with advice from Project Board	Stakeholders, Highland Council Planning Department, NHS Scotland Design Assessment Process	Risk / benefit analysis of the capacity of the sites to deliver a development that meets the criteria identified above.	Site feasibility study based on best available information
Completion of brief	NHSH Project Board with advice from Project Director	Stakeholders, including service providers and internal technical advisors. Clinical modelling supported by Independent Clinical Advisor	This Design Statement should be included in the brief.	Early engagement with HubCo to assess the affordability / deliverability of the project brief
Selection of Delivery / Design Team	HubCo Operations & Supply Chain Director with input from NHSH Project Managers	HubCo and stakeholders, including internal technical advisors	Selection process as per Hubco Method Statements, including cost and quality considerations, to ensure that the best design team is chosen from the Hubco Supply Chain. NHSH will be involved in the selection process and can influence the outcome and, if necessary, nominate other designers for consideration	Previous experience / examples of work on developments of a similar nature and complexity. Interview process to include presentation and questions relating to design approach and the potential to meet the criteria set. Consideration given to quality criteria set.

Skye, Lochalsh and Wester Ross Integrated Health and Social Care Facility: Design Statement

Decision Point	Authority	Additional Skills / Perspectives	How the above criteria will be considered at this stage and/or valued in the decision	Information required to allow evaluation
Early design concept selected from options developed	NHSH Project Board with advice from Project Director	In-house architectural team, NHS Scotland Design Assessment Process, Planning Authority	Use of AEDET to determine if the criteria are being met	Proposals developed to Stage 3 with enough detail to enable distinction between the main use types (including circulation and external space). Elevations/3D visuals
Approval of Design Proposals to be submitted to the Planning Authority	NHSH Board with advice from Project Board	NHS Scotland Design Assessment Process	Use of AEDET to determine if the criteria are being met	Selected Design to Stage 4, with elevations
Approval of detailed Design to allow Construction	NHSH Project Board with advice from Project Director	In-house architectural team and technical advisors	Use of AEDET to determine if the criteria are being met	Design developed to Stage 5 with agreed specification.
Post Occupancy Evaluation	Consideration by appropriate NHS H governance and report sent to SGHD	Independent analysis by service providers / stakeholders. Potential Third Party evaluation	Assessment of completed development by representatives of the stakeholder groups involved in establishing the assessment criteria (AEDET, Design Statement).	